



CHEF ANN FOUNDATION

Meal Pattern Certification Tool

Printed By: Vanessa Carter

Site:

Age Group: Grades 9-12

Serving Period: Lunch

Week Of: 7/9/2018 to 7/13/2018

Daily Requirement Check

Monday (7/9/2018)

Meal Name <i>Name of each reimbursable meal found on the weekly menu.</i>	2. Meat/Meat Alternate (M/MA)		3. Grains				4. Fruits			5. Vegetables			6. Milk	
	M/MA oz equivalents	Daily M/MA Requirement Check 2 oz equivalents	a. Grains oz equivalents or bread servings	Daily Grain Requirement Check 2 oz equivalents	b. Whole Grain Rich oz equivalents or bread servings	c. Grain Based Dessert oz equivalents or bread servings	a. Fruit cups	Daily Fruit Requirement Check 1 cup	b. Fruit Juice cups	a. Vegetables cups	Daily Vegetable Requirement Check 1 cup	b. Vegetable Juice cups	Milk cups	Daily Milk Requirement Check 1 cup
SALAD BAR MEAL W/ 2 OZ ROLL SA305	2 1/2	Yes	2	Yes	2	0	1	Yes	0	2	Yes	0	1	Yes
ORANGE CHICKEN LW001	2 1/4	Yes	3	Yes	3	0	1	Yes	0	2	Yes	0	1	Yes

Milk Type		
Types of milk offered to students on Monday. All types of milk included.		
Skim/fat-free, unflavored	<input checked="" type="checkbox"/>	Yes
Skim/fat-free, flavored	<input type="checkbox"/>	
Low-fat (1% or less), unflavored	<input checked="" type="checkbox"/>	
Low-fat (1% or less), flavored	<input type="checkbox"/>	
Reduced fat (2% fat) or whole, unflavored and flavored	<input type="checkbox"/>	



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Daily Vegetable Subgroup

Creditable Amount of Each Vegetable Offered on Monday (7/9/2018)

Offered weekly vegetable bar on Monday with **NO CHANGES:**

Vegetables offered in addition to the weekly vegetable bar are listed below. NOTE: If the vegetable bar offered on Monday differs from the weekly offerings, all offerings and quantities for each vegetable subgroup is listed below.

Dark Green vegetables offered on Monday	Quantity (cups)	Red/Orange vegetables offered on Monday	Quantity (cups)	Beans/Peas (legumes) offered on Monday	Quantity (cups)	Starchy vegetables offered on Monday	Quantity (cups)	Other vegetables offered on Monday	Quantity (cups)
Largest amount of Dark Green vegetables	7/8	Largest amount of Red/Orange vegetables	5/8	Largest amount of Beans/Peas (legumes)	1/2	Largest amount of Starchy vegetables	1/8	Largest amount of Other vegetables	1/2

Unspecified Dark Green Vegetables

Unspecified Dark Green Vegetables	Unspecified Red/Orange Vegetables	Unspecified Beans/Peas (legumes)	Unspecified Starchy Vegetables	Unspecified Other Vegetables



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Daily Requirement Check

Tuesday (7/10/2018)

Meal Name <i>Name of each reimbursable meal found on the weekly menu.</i>	2. Meat/Meat Alternate (M/MA)		3. Grains			4. Fruits			5. Vegetables			6. Milk		
	M/MA oz equivalents	Daily M/MA Requirement Check 2 oz equivalents	a. Grains oz equivalents or bread servings	Daily Grain Requirement Check 2 oz equivalents	b. Whole Grain Rich oz equivalents or bread servings	c. Grain Based Dessert oz equivalents or bread servings	a. Fruit cups	Daily Fruit Requirement Check 1 cup	b. Fruit Juice cups	a. Vegetables cups	Daily Vegetable Requirement Check 1 cup	b. Vegetable Juice cups	Milk cups	Daily Milk Requirement Check 1 cup
BI BIM BAP 9-12 PF013	2 1/4	Yes	2 1/4	Yes	2 1/4	0	1	Yes	0	2	Yes	0	1	Yes
SALAD BAR MEAL W/ 2 OZ ROLL SA305	2 1/2	Yes	2	Yes	2	0	1	Yes	0	2	Yes	0	1	Yes

Milk Type		
Types of milk offered to students on Tuesday. All types of milk included.		
Skim/fat-free, unflavored	<input checked="" type="checkbox"/>	Yes
Skim/fat-free, flavored	<input type="checkbox"/>	
Low-fat (1% or less), unflavored	<input checked="" type="checkbox"/>	
Low-fat (1% or less), flavored	<input type="checkbox"/>	
Reduced fat (2% fat) or whole, unflavored and flavored	<input type="checkbox"/>	



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Daily Vegetable Subgroup

Creditable Amount of Each Vegetable Offered on Tuesday (7/10/2018)

Offered weekly vegetable bar on Tuesday with **NO CHANGES:**

Vegetables offered in addition to the weekly vegetable bar are listed below. NOTE: If the vegetable bar offered on Tuesday differs from the weekly offerings, all offerings and quantities for each vegetable subgroup is listed below.

Dark Green vegetables offered on Tuesday	Quantity (cups)	Red/Orange vegetables offered on Tuesday	Quantity (cups)	Beans/Peas (legumes) offered on Tuesday	Quantity (cups)	Starchy vegetables offered on Tuesday	Quantity (cups)	Other vegetables offered on Tuesday	Quantity (cups)
Largest amount of Dark Green vegetables	7/8	Largest amount of Red/Orange vegetables	5/8	Largest amount of Beans/Peas (legumes)	1/2	Largest amount of Starchy vegetables	1/8	Largest amount of Other vegetables	1/2

Unspecified Vegetable Subgroups

Unspecified Dark Green Vegetables	Unspecified Red/Orange Vegetables	Unspecified Beans/Peas (legumes)	Unspecified Starchy Vegetables	Unspecified Other Vegetables



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Daily Requirement Check

Wednesday (7/11/2018)

Meal Name <i>Name of each reimbursable meal found on the weekly menu.</i>	2. Meat/Meat Alternate (M/MA)		3. Grains			4. Fruits			5. Vegetables			6. Milk		
	M/MA oz equivalents	Daily M/MA Requirement Check 2 oz equivalents	a. Grains oz equivalents or bread servings	Daily Grain Requirement Check 2 oz equivalents	b. Whole Grain Rich oz equivalents or bread servings	c. Grain Based Dessert oz equivalents or bread servings	a. Fruit cups	Daily Fruit Requirement Check 1 cup	b. Fruit Juice cups	a. Vegetables cups	Daily Vegetable Requirement Check 1 cup	b. Vegetable Juice cups	Milk cups	Daily Milk Requirement Check 1 cup
CHILE RELLENO CASSEROLE 9-12 PF015	2 1/4	Yes	2 1/4	Yes	2 1/4	0	1	Yes	0	2	Yes	0	1	Yes
SALAD BAR MEAL W/ 2 OZ ROLL SA305	2 1/2	Yes	2	Yes	2	0	1	Yes	0	2	Yes	0	1	Yes

Milk Type		
Types of milk offered to students on Wednesday. All types of milk included.		
Skim/fat-free, unflavored	<input checked="" type="checkbox"/>	Yes
Skim/fat-free, flavored	<input type="checkbox"/>	
Low-fat (1% or less), unflavored	<input checked="" type="checkbox"/>	
Low-fat (1% or less), flavored	<input type="checkbox"/>	
Reduced fat (2% fat) or whole, unflavored and flavored	<input type="checkbox"/>	



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Daily Vegetable Subgroup

Creditable Amount of Each Vegetable Offered on Wednesday (7/11/2018)

Offered weekly vegetable bar on Wednesday with **NO CHANGES:**

Vegetables offered in addition to the weekly vegetable bar are listed below. NOTE: If the vegetable bar offered on Wednesday differs from the weekly offerings, all offerings and quantities for each vegetable subgroup is listed below.

Dark Green vegetables offered on Wednesday	Quantity (cups)	Red/Orange vegetables offered on Wednesday	Quantity (cups)	Beans/Peas (legumes) offered on Wednesday	Quantity (cups)	Starchy vegetables offered on Wednesday	Quantity (cups)	Other vegetables offered on Wednesday	Quantity (cups)
Largest amount of Dark Green vegetables	7/8	Largest amount of Red/Orange vegetables	5/8	Largest amount of Beans/Peas (legumes)	1/2	Largest amount of Starchy vegetables	1/8	Largest amount of Other vegetables	1/2

Unspecified Dark Green Vegetables	Unspecified Red/Orange Vegetables	Unspecified Beans/Peas (legumes)	Unspecified Starchy Vegetables	Unspecified Other Vegetables



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Daily Requirement Check

Thursday (7/12/2018)

Meal Name <i>Name of each reimbursable meal found on the weekly menu.</i>	2. Meat/Meat Alternate (M/MA)		3. Grains				4. Fruits			5. Vegetables			6. Milk	
	M/MA oz equivalents	Daily M/MA Requirement Check 2 oz equivalents	a. Grains oz equivalents or bread servings	Daily Grain Requirement Check 2 oz equivalents	b. Whole Grain Rich oz equivalents or bread servings	c. Grain Based Dessert oz equivalents or bread servings	a. Fruit cups	Daily Fruit Requirement Check 1 cup	b. Fruit Juice cups	a. Vegetables cups	Daily Vegetable Requirement Check 1 cup	b. Vegetable Juice cups	Milk cups	Daily Milk Requirement Check 1 cup
SALAD BAR MEAL W/ 2 OZ ROLL SA305	2 1/2	Yes	2	Yes	2	0	1	Yes	0	2	Yes	0	1	Yes
THAI TOFU CURRY 9-12 FS057	3 1/4	Yes	2 1/4	Yes	2 1/4	0	1	Yes	0	2	Yes	0	1	Yes

Milk Type		
Types of milk offered to students on Thursday. All types of milk included.		
Skim/fat-free, unflavored	<input checked="" type="checkbox"/>	Yes
Skim/fat-free, flavored	<input type="checkbox"/>	
Low-fat (1% or less), unflavored	<input checked="" type="checkbox"/>	
Low-fat (1% or less), flavored	<input type="checkbox"/>	
Reduced fat (2% fat) or whole, unflavored and flavored	<input type="checkbox"/>	



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Daily Vegetable Subgroup

Creditable Amount of Each Vegetable Offered on Thursday (7/12/2018)

Offered weekly vegetable bar on Thursday with **NO CHANGES:**

Vegetables offered in addition to the weekly vegetable bar are listed below. NOTE: If the vegetable bar offered on Thursday differs from the weekly offerings, all offerings and quantities for each vegetable subgroup is listed below.

Dark Green vegetables offered on Thursday	Quantity (cups)	Red/Orange vegetables offered on Thursday	Quantity (cups)	Beans/Peas (legumes) offered on Thursday	Quantity (cups)	Starchy vegetables offered on Thursday	Quantity (cups)	Other vegetables offered on Thursday	Quantity (cups)
Largest amount of Dark Green vegetables	7/8	Largest amount of Red/Orange vegetables	5/8	Largest amount of Beans/Peas (legumes)	1/2	Largest amount of Starchy vegetables	1/8	Largest amount of Other vegetables	1/2

Unspecified Vegetable Subgroups

Unspecified Dark Green Vegetables	Unspecified Red/Orange Vegetables	Unspecified Beans/Peas (legumes)	Unspecified Starchy Vegetables	Unspecified Other Vegetables



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Daily Requirement Check

Friday (7/13/2018)

Meal Name <i>Name of each reimbursable meal found on the weekly menu.</i>	2. Meat/Meat Alternate (M/MA)		3. Grains			4. Fruits			5. Vegetables			6. Milk		
	M/MA oz equivalents	Daily M/MA Requirement Check 2 oz equivalents	a. Grains oz equivalents or bread servings	Daily Grain Requirement Check 2 oz equivalents	b. Whole Grain Rich oz equivalents or bread servings	c. Grain Based Dessert oz equivalents or bread servings	a. Fruit cups	Daily Fruit Requirement Check 1 cup	b. Fruit Juice cups	a. Vegetables cups	Daily Vegetable Requirement Check 1 cup	b. Vegetable Juice cups	Milk cups	Daily Milk Requirement Check 1 cup
VEGGIE AND CHEESE FLATBREAD PF008	2 1/2	Yes	2 1/4	Yes	2 1/4	0	1	Yes	0	2	Yes	0	1	Yes
SALAD BAR MEAL W/ 2 OZ ROLL SA305	2 1/2	Yes	2	Yes	2	0	1	Yes	0	2	Yes	0	1	Yes

Milk Type		
Types of milk offered to students on Friday. All types of milk included.		
Skim/fat-free, unflavored	<input checked="" type="checkbox"/>	Yes
Skim/fat-free, flavored	<input type="checkbox"/>	
Low-fat (1% or less), unflavored	<input checked="" type="checkbox"/>	
Low-fat (1% or less), flavored	<input type="checkbox"/>	
Reduced fat (2% fat) or whole, unflavored and flavored	<input type="checkbox"/>	



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Daily Vegetable Subgroup

Creditable Amount of Each Vegetable Offered on Friday (7/13/2018)

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Largest amount of Dark Green vegetables	7/8	Largest amount of Red/Orange vegetables	5/8	Largest amount of Beans/Peas (legumes)	1/2	Largest amount of Starchy vegetables	1/8	Largest amount of Other vegetables	1/2

Unspecified Vegetable Subgroups

Unspecified Dark Green Vegetables	Unspecified Red/Orange Vegetables	Unspecified Beans/Peas (legumes)	Unspecified Starchy Vegetables	Unspecified Other Vegetables



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Weekly Report 7/9/2018 to 7/13/2018

	Cells shaded this color means the daily minimum for the component is NOT met.
	Cells shaded this color means the maximum for the component exceeds the requirement.

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Weekly Requirement (cups)	Weekly Requirement Check
Minimum Fruit (cups)	1	1	1	1	1	5	5	Yes

Weekly Fruit Juice Limit Check (no more than half of total fruit)	Total Weekly Fruit	Total Weekly Fruit Juice	Percent of total weekly fruit that is juice	Weekly Requirement Check
	5	0	0.00 %	Yes

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Weekly Requirement (cups)	Weekly Requirement Check
Minimum Vegetables	2	2	2	2	2	10	5	Yes
Cups of DARK GREEN	7/8	7/8	7/8	7/8	7/8	4 3/8	1/2	Yes
Cups of RED/ORANGE	5/8	5/8	5/8	5/8	5/8	3 1/8	1 1/4	Yes
Cups of BEANS/PEAS (Legumes)	1/2	1/2	1/2	1/2	1/2	2 1/2	1/2	Yes
Cups of STARCHY vegetables	1/8	1/8	1/8	1/8	1/8	5/8	1/2	Yes
Cups of OTHER (any other type of vegetable)	1/2	1/2	1/2	1/2	1/2	2 1/2	3/4	Yes

Weekly Vegetable Juice Limit Check (no more than half of total vegetables)	Total Weekly Vegetables	Total Weekly Vegetable Juice	Percent of total weekly vegetables that is juice	Weekly Requirement Check
	10	0	0.00 %	Yes

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Weekly Requirement (oz equivalents)	Weekly Requirement Check
Minimum Meat/Meat Alternate	2 1/4	2 1/4	2 1/4	2 1/2	2 1/2	11 3/4	10	Yes
Maximum Meat/Meat Alternate	2 1/2	2 1/2	2 1/2	3 1/4	2 1/2	13 1/4	12	No



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	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Weekly Requirement (oz equivalents)	Weekly Requirement Check
Minimum Grain	2	2	2	2	2	10	10	Yes
Maximum Grain	3	2 1/4	2 1/4	2 1/4	2 1/4	12	12	Yes
Grain Based Dessert Total for all weekly meals						0	No more 2 oz equivalents	Yes
Whole Grain Rich Weekly Amount	Weekly Grains Total	22	Weekly Whole Grain Rich Total	22	Percent of Whole Grain Rich	100.00 %	100% whole grain rich	Yes

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Weekly Requirement (cups)	Weekly Requirement Check
Minimum Fluid Milk	1	1	1	1	1	5	5	Yes
Variety: Skim/fat free unflavored, Skim/fat-free flavored, Low-fat (less	Yes	Yes	Yes	Yes	Yes			
Low-fat (1% or less), flavored								
Reduced fat (2% fat) or whole, unflavored and flavored								