

### DAILY TRANSPORTATION LOG

Route #: \_\_\_\_\_

Driver Name: \_\_\_\_\_

**BerkyTest 1**
**Non Infant Menu Production Record**
**BerkyKids - Jordans Test**

2142346458

**Monday 07/29/2024**
**TX Program No: 21345**
**(987) 458-4698**

<b>Breakfast</b>		1 Yrs	2 Yrs	3-5 Yrs	6-12 Yrs	13-18 Yrs	Adults	Total	Planned Participation	Total Including Infants	
		Estimated Attendance									
		Actual Attendance									
Component	Food Served/Planned	Rqd Serving Size By Age						Qty Needed Per Est Attendance	Qty Needed Per Actual Attendance	Actual Qty Prepared	Comments
		1	2	3-5	6-12	13-18	Adult				
Brd/Alt	Multi Grain Cheerios(WG)	1/2 c	1/2 c	1/2 c	1 c	1 c	1 1/2 c				
Veg											
Fruit	Strawberries	2 oz	2 oz	4 oz	4 oz	4 oz	4 oz				
Meat/Alt											
Milk	Whole Milk	1/2 c									
Milk	1%/Skim Milk		1/2 c	3/4 c	1 c	1 c	1 c				
Milk	Milk Substitute	1/2 c	1/2 c	3/4 c	1 c	1 c	1 c				
Milk	Parent Provided Milk	1/2 c	1/2 c	3/4 c	1 c	1 c	1 c				

  

<b>Lunch</b>		1 Yrs	2 Yrs	3-5 Yrs	6-12 Yrs	13-18 Yrs	Adults	Total	Planned Participation	Total Including Infants	
		Estimated Attendance									
		Actual Attendance									
Component	Food Served/Planned	Rqd Serving Size By Age						Qty Needed Per Est Attendance	Qty Needed Per Actual Attendance	Actual Qty Prepared	Comments
		1	2	3-5	6-12	13-18	Adult				
Brd/Alt	Muffin	1/2 serv	1/2 serv	1/2 serv	1 serv	1 serv	2 serv				CN Label 456181614 for chicken
Veg	Green Beans	1/8 c	1/8 c	1/4 c	1/2 c	1/2 c	1/2 c				
Fruit	Strawberries	1/8 oz	1/8 oz	1/4 oz	1/4 oz	1/4 oz	1/2 oz				
Meat/Alt	Tyson Chicken Nuggets -	1 oz	1 oz	1 1/2 oz	2 oz	2 oz	2 oz				
Milk	Whole Milk	1/2 c									
Milk	1%/Skim Milk		1/2 c	3/4 c	1 c	1 c	1 c				
Milk	Milk Substitute	1/2 c	1/2 c	3/4 c	1 c	1 c	1 c				
Milk	Parent Provided Milk	1/2 c	1/2 c	3/4 c	1 c	1 c	1 c				

Kitchen Time: \_\_\_\_\_ Temperature: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Milk Sent: \_\_\_\_\_ Other Sent: \_\_\_\_\_  
 Delivery Time: \_\_\_\_\_ Temperature: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Milk Refused: \_\_\_\_\_ Other Refused: \_\_\_\_\_  
 Breakfast: \_\_\_\_\_ Snack: \_\_\_\_\_ Lunch Veggie: \_\_\_\_\_ Lunch Fruit: \_\_\_\_\_

7/30/2024 5:37:31PM

All CACFP forms and documents must be kept for three (3) years after the end of the program year.

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Route #: \_\_\_\_\_

Driver Name: \_\_\_\_\_

**BerkyTest 1**

**Non Infant Menu Production Record**

**BerkyKids - Jordans Test**

**2142346458**

**Monday 07/29/2024**

**TX Program No: 21345**

**(987) 458-4698**

P.M. Snack	Estimated Attendance	1 Yrs	2 Yrs	3-5 Yrs	6-12 Yrs	13-18 Yrs	Adults	Total	Planned Participation	Total Including Infants	
										Non-Program	
		Actual Attendance									
Component	Food Served/Planned	Rqd Serving Size By Age						Qty Needed Per Est Attendance	Qty Needed Per Actual Attendance	Actual Qty Prepared	Comments
Brd/Alt	Pretzels - Whole Grain(WG)	1/2 oz	1/2 oz	1/2 oz	1 oz	1 oz	1 oz				Served orange juice to 2 children who cannot have apple juice
Veg											
Fruit	Apple Juice	1/2 c	1/2 c	1/2 c	3/4 c	3/4 c	1/2 c				
Meat/Alt											
Milk	Whole Milk										
Milk	1%/Skim Milk										
(Choose 2 of 5)											
Milk	Milk Substitute										
Milk	Parent Provided Milk										

Kitchen Time: \_\_\_\_\_

Temperature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Milk Sent: \_\_\_\_\_

Other Sent: \_\_\_\_\_

Delivery Time: \_\_\_\_\_

Temperature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Milk Refused: \_\_\_\_\_

Other Refused: \_\_\_\_\_

Breakfast: \_\_\_\_\_

Snack: \_\_\_\_\_

Lunch Veggie: \_\_\_\_\_

Lunch Fruit: \_\_\_\_\_

7/30/2024 5:37:31PM

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