

South Carolina Department of Social Services
 Child and Adult Care Food Program
INDIVIDUAL INFANT MEAL RECORD

Facility/Provider: _____ Formula: _____ Birthdate: _____ Month: _____ Year: _____
 Infant Name: _____

Requirements for Infant Meal Pattern – All serving sizes are minimum quantities of the food components that are required to be served.			
Ages	Breakfast	Lunch or Supper	Snack
0-5 mos.	4-6 fl. oz. breastmilk or formula	4-6 fl. oz. breastmilk or formula	4-6 fl. oz. breastmilk or formula
6-11 mos.	6-8 fl. oz. breastmilk or formula; and 0-4 tbsp. infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz cheese; or 0-4 oz (volume) cottage cheese; or 0-4 oz yogurt; or a combination *; and 0-2 tbsp. vegetable, fruit or both *	6-8 fl. oz. breastmilk or formula; and 0-4 tbsp. infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz cheese; or 0-4 oz (volume) cottage cheese; or 0-4 oz yogurt; or a combination *; and 0-2 tbsp. vegetable, fruit or both *	2-4 fl. oz. breastmilk or formula; and 0-1/2 bread slice; or 0-2 crackers; or 0-4 tbsp infant cereal or ready-to-eat cereal *; and 0-2 tbsp vegetable, fruit or both *

* Required when infant is developmentally ready.
REMEMBER: Medical statement is required for all exempt formulas; refer to the list of exempt formulas on the FDA website. A completed infant statement must be on file for all infants.

Date	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Meal Count
BREAKFAST						
Breastmilk or Formula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Infant Cereal / Meat / Meat Alternate						
Fruit / Vegetable						
LUNCH						
Breastmilk or Formula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Infant Cereal / Meat / Meat Alternate						
Fruit / Vegetables						
SNACK						
Breastmilk or Formula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bread Slice / Crackers / Infant Cereal / Ready-to-Eat Cereal						
Fruit / Vegetable						