|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | Number of meals served *(complete this section after meal service)* | | | |
| **CACFP sponsor** |  |  |  | Breakfast | Lunch | Snack  AM  PM |
| **Site:** |  |  | **Reimbursable meals:** |  |  |  |
| **Date:** |  |  | **Nonreimbursable meals:** |  |  |  |
|  | | | **Total meals:** |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Food components**  *Review the* [*CACFP Meal Patterns for Adults*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/MealPattern/Adult_Meal_Pattern_CACFP.pdf) *for required components and serving sizes* | | **Column 1** | **Column 2** | Column 3 | | | | **Column 4** | | **Column 5** | **Column 6** | **Column 7** |
| **Menu item** | **Recipe number or product name** | Serving size and amount prepared | | | | **Temperatures:** Take corrective action if not at target temperature | | **Total quantity of food used**  ***e.g., number  of servings, pounds, cans*** | **Amount leftover** | **Total amount served**  ***(column 5 minus column 6)*** |
| Reimbursable meals | | **Nonreimbursable meals** | |
| **Serving  size** | **Number of  servings** | **Serving  size** | **Number of  servings** | Time: | Time: |
| **Breakfast** | **Milk** |  |  |  |  |  |  |  |  |  |  |  |
| **Vegetables, fruits or both** |  |  |  |  |  |  |  |  |  |  |  |
| **Grains** \* |  |  |  |  |  |  |  |  |  |  |  |
| Other foods  *Do not credit* |  |  |  |  |  |  |  |  |  |  |  |
| **Lunch** | **Milk** |  |  |  |  |  |  |  |  |  |  |  |
| **Vegetables** |  |  |  |  |  |  |  |  |  |  |  |
| **Fruits** |  |  |  |  |  |  |  |  |  |  |  |
| **Grains** \* |  |  |  |  |  |  |  |  |  |  |  |
| **Meat/meat alternates** |  |  |  |  |  |  |  |  |  |  |  |
| Other foods  *Do not credit* |  |  |  |  |  |  |  |  |  |  |  |
| **Snack (Choose 2 of 5)** | **Milk** |  |  |  |  |  |  |  |  |  |  |  |
| **Vegetables** |  |  |  |  |  |  |  |  |  |  |  |
| **Fruits** |  |  |  |  |  |  |  |  |  |  |  |
| **Grains** \* |  |  |  |  |  |  |  |  |  |  |  |
| **Meat/meat alternates** |  |  |  |  |  |  |  |  |  |  |  |
| Other foods  *Do not credit* |  |  |  |  |  |  |  |  |  |  |  |

\* Indicate “WGR” next to whole grain-rich (WGR) menu items.For more information, refer to the Connecticut State Department of Education’s (CSDE) resource, [*Meeting the Whole Grain-rich Requirement for the CACFP*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Crediting/WGR_Requirement_CACFP.pdf).

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Instructions**  Complete the production record following the guidance below. For additional guidance, refer to the CSDE’s resource, *[Using Production Records in the CACFP](http://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Crediting/Using_Product_Formulation_Statements_CACFP.pdf).* | | | **Sponsor, site,** **and** **date**: List the sponsor name, site name, and date of meal service.  **Number of meals served:** *Complete this section after the meal service.* Indicate the number of reimbursable meals served to adult participants. Indicate the number of nonreimbursable meals, if applicable, e.g., meals for CACFP staff and incomplete meals served to adult participants.  **Menu item (column 1):** List all planned menu items. Include the specific type and amount of all meal choices, milk, leftovers, substitutions, all other food items such as noncreditable foods (e.g., desserts and condiments), and any substitutions. For information on the CACFP adult meal pattern requirements, refer to the CSDE’s resource, *[CACFP Meal Patterns for Adults](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/MealPattern/Adult_Meal_Pattern_CACFP.pdf),* and visit the CSDE’s [Meal Patterns for CACFP Adult Day Care Centers](https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers/Documents) webpage. For information on “other” foods, refer to the CSDE’s resource, [*Noncreditable Foods in CACFP Adult Day Care Centers*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Crediting/Noncredreditable_Foods_Adults_CACFP.pdf). For more resources, refer to “CSDE Meal Pattern and Menu Planning Resources” below.  **Recipe number or food product (column 2):** Indicate the recipe (and recipe number, if available) or name of food product used. Include the form (e.g., fresh, frozen, or canned) and packing medium (e.g., canned in juice or light syrup, or frozen with added sugar).  **Serving size and amount prepared (column 3):** Indicate the serving size and number of servingsforall planned menu items served to adult participants, and to CACFP staff, if applicable. | **Temperatures (column 4):** *Complete this section throughout the meal service.* List each food’s temperature and the time it was taken. Hold hot foods at 135 °F or above. Hold cold foods at 41 °F or below. For more information, visit the CSDE’s [Food Safety for Child Nutrition Programs](https://portal.ct.gov/SDE/Nutrition/Food-Safety-for-Child-Nutrition-Programs) webpage.  **Total quantity of food used (column 5):** *Complete this section after the meal service*. Indicate the total amount of food used to prepare the number of planned meals indicated in column 3. For single-serving items like hamburgers or oranges, record the total number of items or servings prepared, e.g., 100 oranges and 250 servings of hamburgers. For all other items, indicate the amount of food used with as much detail as possible, e.g., “3 10-lb. boxes,” “2 #10 cans” or “1½ recipes.”  **Amount leftover (column 6):** *Complete this section after the meal service*. Indicate the amount of food leftover for each menu item. If the item can be counted, record the number, e.g., 10 oranges. If the item can be measured in volume, record the estimated amount, e.g., “half of a full-size steam table pan” or “2 quarts.” Use consistent measurements. For example, if the total quantity of food used (column 5) is 150 hamburgers, indicate the number of leftovers (e.g., 10 hamburgers), not the weight (e.g., 2 pounds).  **Total amount served (column 7):** *Complete this section after the meal service*. Subtract “Amount leftover” (column 6) from “Total quantity of food used” (column 5) to determine the total amount of food served | | **CSDE Meal Pattern and Menu Planning Resources**  Crediting Foods in CACFP Adult Day Care Centers: [https://portal.ct.gov/SDE/Nutrition/Crediting-Foods-in-CACFP-Adult-Day-Care-Centers](https://portal.ct.gov/SDE/Nutrition/Crediting-Foods-in-CACFP-Adult-Day-Care-Centers/Documents)  Meal Patterns for CACFP Adult Day Care Centers: <https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers>  Menu Forms: <https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers/Documents#MenuForms>  Menu Planning: <https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers/Related-Resources#MenuPlanning>  Sample Menus: <https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers/Documents#SampleMenus> | | | For a complete list of meal pattern resources, refer to the CSDE’s *[Resources for the CACFP Meal Patterns](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/MealPattern/Resources_CACFP_Meal_Patterns.pdf).* For a summary of the crediting requirements for each component, refer to the CSDE’s [*Crediting Summary Charts for the CACFP Adult Meal Patterns*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Crediting/Crediting_Summary_Charts_CACFP_Adults.pdf)*.* | | |

For more information, refer to the CSDE’s resource, [*Using Production Records in the CACFP*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Forms/ProdRecord/Using_Production_Records_CACFP.pdf), and visit the CSDE’s [Meal Patterns for CACFP Adult Day Care Centers](https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers) and [Crediting Foods in CACFP Adult Day Care Centers](https://portal.ct.gov/SDE/Nutrition/Crediting-Foods-in-CACFP-Adult-Day-Care-Centers) webpages or contact the [CACFP staff](https://portal.ct.gov/SDE/Nutrition/CACFP-Contact) at the Connecticut State Department of Education, Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841.

This form is available at <https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Forms/ProdRecord/‌Adult_Production_Record_CACFP_breakfast_lunch_snack.docx>.

|  |  |
| --- | --- |
| In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.  Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.  To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: [https://www.usda.gov/‌sites/default/files/documents/ad-3027.pdf](https://www.usda.gov/sites/default/files/documents/ad-3027.pdf), from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:   1. mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or 2. fax: (833) 256-1665 or (202) 690-7442; or 3. email:[program.intake@usda.gov](mailto:program.intake@usda.gov)   This institution is an equal opportunity provider. | The Connecticut State Department of Education is committed to a policy of equal opportunity/affirmative action for all qualified persons. The Connecticut Department of Education does not discriminate in any employment practice, education program, or educational activity on the basis of race; color; religious creed; age; sex; pregnancy; sexual orientation; workplace hazards to reproductive systems, gender identity or expression; marital status; national origin; ancestry; retaliation for previously opposed discrimination or coercion, intellectual disability; genetic information; learning disability; physical disability (including, but not limited to, blindness); mental disability (past/present history thereof); military or veteran status; status as a victim of domestic violence; or criminal record in state employment, unless there is a bona fide occupational qualification excluding persons in any of the aforementioned protected classes. Inquiries regarding the Connecticut State Department of Education’s nondiscrimination policies should be directed to: Attorney Louis Todisco, Connecticut State Department of Education, by mail 450 Columbus Boulevard, Hartford, CT 06103-1841; or by telephone 860-713-6594; or by email [louis.todisco@ct.gov](mailto:louis.todisco@ct.gov). |