






Fresno EOC
Head Start
0 to 5

Early Care
&
Education




CANTUA SNACK MENU – SEPTEMBER 2021

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
		1. Sliced Apple ½ c. 1% White Milk ½ c. or 4 oz.	2. Hi Ho Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz.	3. Graham Crackers .5 oz or 1 ea. 1% White Milk ½ c. or 4 oz.
6. Holiday	7. Kix Cereal ¾ c. or .5 oz. 1% White Milk ½ c. or 4 oz	8. WG Waffle 1 ea. or 1 oz. 1% White Milk ½ c. or 4 oz	9. Hi Ho Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz.	10. Assorted Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz.
13. Graham Crackers .5 oz. or 1 ea. 1% White Milk ½ c. or 4oz	14. Assorted Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz	15. WG Waffle 1 ea. or 1 oz. Banana ½ c Water	16. Hi Ho Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz	17. Graham Crackers .5 oz. or 1 ea. 1% White Milk ½ c. or 4 oz
20. Pancakes 1 ea. or 1 oz. 1% White Milk ½ c. or 4oz	21. Kix Cereal ¾ c. or .5 oz 1% White Milk ½ c. or 4 oz	22. Cheerios Cereal ½ c. or .5 oz. 1% White Milk ½ c. or 4 oz	23. Graham Crackers .5 oz. or 1 ea. Apple Wedges ½ c. Water	24. Assorted Crackers .5 oz. or 4 ea. 1% White Milk ½ c. or 4 oz
27. Bean Burrito 1 ea. or 1 oz. 1% White Milk ½ c. or 4oz	28. Hi Ho Crackers .5 oz. or 4 ea. Banana ½ c. Water	29. Graham Crackers 1 ea. or .5 oz. 1% White Milk ½ c. or 4 oz.	30. Kix Cereal ¾ c. or .5 oz 1% White Milk ½ c. or 4 oz	

* Use up items from emergency supply and restock (first in first out) with dates. Use Whole Wheat or Multi-Grain products
Please cut all fresh fruit.

This Institution is equal opportunity provider

Cantua Menú septiembre 2021

LUNES	MARTES	MIÉRCOLES	JUEVES	VIERNES
		1. Manzana Leche blanca 1%	2. Galletas Hi Ho Leche blanca 1%	3. Galletas de Miel Leche blanca 1%
6. Holiday	7. Cereal Kix Lecha blanca 1%	8. Waffles GE Leche blanca 1%	9. Galletas Hi Ho Leche blanca 1%	10. Surtido de Galletas Leche blanca 1%
13. Galletas de Miel Leche blanca 1%	14. Surtido de Galletas Leche blanca 1%	15. Waffles GE Plátano Agua	16. Galletas Hi Ho Leche Blanca 1%	17. Galletas de Miel Leche blanca 1%
20. Panqueques Leche blanca 1%	21. Cereal Kix Lecha blanca 1%	22. Cereal Cheerios Leche blanca 1 %	23. Galletas de Miel Leche blanca 1%	24. Surtido de Galletas Leche blanca 1%
27. Burrito de frejoles Leche blanca 1%	28. Galletas Hi Ho Leche blanca 1%	29. Galletas de Miel Leche blanca 1%	30. Cereal Kix Lecha blanca 1%	

Favor de cortar toda la fruta fresta para nuestros niños. Todos los panes son de trigo integral o multi-grano.

Esta institución es un proveedor que ofrece igualdad de oportunidades.



CANTUA MENU PLANNING WORKSHEET

Week of 9-1-21 & 9-3-21 Estimated meals served : Children 20 Adults 3 Weekly Refrigerator Temperatures _____ ° F _____ Int.

DATE:	Snack Item and Serving Size:	Actual Served:	CACFP Minimum Amount Required	Scale Weight:	Purchased Units:	Amount Served:	Amounts of Leftovers:
# of Children	Milk Substitutions ½ c.	<i>Soy Milk:</i> _____	Lactose Free: _____		Name of Other:		
# of Children	Milk Substitutions ½ c.	<i>Soy Milk:</i> _____	Lactose Free: _____		Name of Other:		
9-1-21	Apple slices ½ c.	<i>#of Children:</i>	7 lbs.				
	1% White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk:</i> _____	Lactose Free: _____		Name of Other:		
9-2-21	Hi Ho Crackers 4 ea. or .5 oz.	<i>#of Children:</i>	12 oz.				
	1% White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk:</i> _____	Lactose Free: _____		Name of Other:		
9-3-21	Graham Crackers 1 ea. or .5 oz.	<i>#of Children:</i>	12 oz.				
	1% White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		

Teacher Dir: _____ Date: _____

Reviewer: _____ Date: _____

Menu Change Notice: You must first inform your Nutrition Assistant and get approval.

Center: _____

Reason for Changes/substitutions: _____

FPC Breakfast menu

FPC Lunch Menu

HS PM Snack Menu

HS Extended Snack Menu

Changes & Dates : _____

Changes & Dates : _____

Changes & Dates : _____

TD/CD signature: _____

Approved by: _____

Make a copy for your own file and send in the original weekly.

Write in your nutrition assistant's name.

All substitutions must be written on Posted Menu, and Menu Planning Worksheet.



CANTUA MENU PLANNING WORKSHEET

Week of 9-6-21 thru 9-10-21

Estimated meals served: Children 20 Adults 3

Weekly Refrigerator Temperatures _____ ° F _____ Int.

DATE:	Snack Item and Serving Size:	Actual Served:	CACFP Minimum Amount Required	Scale Weight:	Purchased Units:	Amount Served:	Amounts of Leftovers:
9-6-21	Holiday						
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-7-21	Kix Cereal ¾ c. or .5 oz	<i>#of Children:</i>	12 oz.				
	1% White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-8-21	WG Waffle 1 ea. or 1 oz.	<i>#of Children:</i>	23 @ 1 ea.				
	1% White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-9-21	Hi Ho Crackers 4 ea. or .5 oz.	<i>#of Children:</i>	12 oz.				
	1 % White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-10-21	Assorted Crackers 4 ea. or .5 oz.	<i>#of Children:</i>	12 oz.				
	1 % White Milk ½ c. or 4 oz.	<i>#of Adults:</i>	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		

Teacher Dir: _____ Date: _____

Reviewer: _____ Date: _____

Menu Change Notice: You must first inform your Nutrition Assistant and get approval.

Center: _____ Reason for Changes/substitutions: _____

FPC Breakfast menu

FPC Lunch Menu

HS PM Snack Menu

HS Extended Snack Menu

Changes & Dates : _____

Changes & Dates : _____

Changes & Dates : _____

TD/CD signature: _____

Approved by: _____

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Write in your nutrition assistant's name.

All substitutions must be written on Posted Menu, and Menu Planning Worksheet.



CANTUA MENU PLANNING WORKSHEET

Week of 9-13-21 thru 9-17-21

estimated meals served: Children 20 Adults 3

Weekly Refrigerator Temperatures _____ ° F _____ Int.

DATE:	Snack Item and Serving Size:	Actual Served:	CACFP Minimum Amount Required	Scale Weight:	Purchased Units:	Amount Served:	Amounts of Leftovers:
9-13-21	Graham Crackers 1 ea. or .5 oz.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-14-21	Assorted Crackers .5 oz. or 4 ea.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-15-21	WG Waffle 1 ea. or 1 oz.	#of Children:	23 @ 1 ea.				
	Banana ½ c.	#of Adults:	9 lbs.				
	Water		-				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-16-21	Hi Ho Crackers 4 ea. or .5 oz.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-17-21	Graham Crackers .5 oz. or 1 ea.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		

Teacher Dir: _____ Date: _____

Reviewer: _____ Date: _____

Menu Change Notice: You must first inform your Nutrition Assistant and get approval.

Center: _____

Reason for Changes/substitutions: _____

FPC Breakfast menu

FPC Lunch Menu

HS PM Snack Menu

HS Extended Snack Menu

Changes & Dates : _____

Changes & Dates : _____

Changes & Dates : _____

TD/CD signature: _____

Approved by: _____

Make a copy for your own file and send in the original weekly.

Write in your nutrition assistant's name.

All substitutions must be written on Posted Menu, and Menu Planning Worksheet.



CANTUA MENU PLANNING WORKSHEET

Week of 9-20-21 thru 9-24-21

estimated meals served: Children 20 Adults 3

Weekly Refrigerator Temperatures _____ ° F _____ Int.

DATE:	Snack Item and Serving Size:	Actual Served:	CACFP Minimum Amount Required	Scale Weight:	Purchased Units:	Amount Served:	Amounts of Leftovers:
9-20-21	Pancakes 1 ea. or 1 oz.	#of Children:	23 @ 1 ea.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-21-21	Kix Cereal ¾ c. or .5 oz.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-22-21	Cheerios Cereal .5 oz. or ½ c.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-23-21	Graham Cracker .5 oz. or 1 ea.	#of Children:	12 oz.				
	Apple wedges. ½ c.	#of Adults:	7 lbs.				
	Water		-				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		
9-24-21	Assorted Crackers .5 oz. or 4 ea.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	Soy Milk _____	Lactose Free _____		Name of Other:		

Teacher Dir: _____ Date: _____

Reviewer: _____ Date: _____

Menu Change Notice: You must first inform your Nutrition Assistant and get approval.

Center: _____

Reason for Changes/substitutions: _____

FPC Breakfast menu

FPC Lunch Menu

HS PM Snack Menu

HS Extended Snack Menu

Changes & Dates : _____ 5/25

Changes & Dates : _____ 5/26

Changes & Dates : _____ 5/27

TD/CD signature: _____

Approved by: _____

Make a copy for your own file and send in the original weekly.

Write in your nutrition assistant's name.

All substitutions must be written on Posted Menu, and Menu Planning Worksheet.



CANTUA MENU PLANNING WORKSHEET

Week of 9-27-21 thru 9-30-21

estimated meals served: Children 20 Adults 3

Weekly Refrigerator Temperatures _____ °F _____ Int.

DATE:	Snack Item and Serving Size:	Actual Served:	CACFP Minimum Amount Required	Scale Weight:	Purchased Units:	Amount Served:	Amounts of Leftovers:
9-27-21	Bean Burrito 1 ea. or 1 oz.	#of Children:	23 @ 1 ea.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-28-21	Hi Ho Crackers .5 oz. or 4 ea.	#of Children:	12 oz.				
	Bananas ½ c.	#of Adults:	9 lbs.				
	Water		-				
# of Children	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-29-21	Graham Crackers .5 oz. or 1 ea.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		
9-30-21	Kix Cereal ¾ c. or .5 oz.	#of Children:	12 oz.				
	1% White Milk ½ c. or 4 oz.	#of Adults:	1 gal.				
	Milk Substitutions ½ c.	<i>Soy Milk</i> _____	Lactose Free _____		Name of Other:		

Teacher Dir: _____ Date: _____

Reviewer: _____ Date: _____

Menu Change Notice: You must first inform your Nutrition Assistant and get approval.

Center: _____

Reason for Changes/substitutions: _____

FPC Breakfast menu

FPC Lunch Menu

HS PM Snack Menu

HS Extended Snack Menu

Changes & Dates : _____

Changes & Dates : _____

Changes & Dates : _____

TD/CD signature: _____

Approved by: _____

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Write in your nutrition assistant's name.

All substitutions must be written on Posted Menu, and Menu Planning Worksheet.



CANTUA DAY GROCERY LIST

Dates: 9-1-2021 & 9-3-2021

Class size: 20 children /3 adults

Date:	Purchased Units	PM - Grocery List
9-1-21	7 lbs. *	Apple - cut into slices 1% White Milk
	3 gals.	1% White Milk - total for the week*
9-2-21	12 oz. *	Hi Ho Crackers 1% White Milk
9-3-21	12 oz. *	Graham Crackers 1% White Milk

Date: 9-13-21 thru 9-17-21

Class size: 20 children /3 adults

Date:	Purchased Units	PM - Grocery List
9-6-21	Holiday	
9-7-21	12 @ ½ ea. 4 - 16 oz. cans *	WG Tortilla - burritos Refried beans 1% White Milk
	4 gals.	1% White Milk - total for the week*
9-8-21	23 @ 1 ea. *	WG Waffle 1% White Milk
9-9-21	12 oz. *	Hi Ho Crackers 1% White Milk
9-10-21	12 oz. *	Assorted Crackers 1% White Milk

MAKE SURE YOU HAVE EMERGENCY MEAL COMPONENTS IN YOUR STORAGE UNIT; make sure to rotate out your emergency meal components. Keep it fresh.

Place a pitcher of water in advance in refrigerator for cool water for snack use.



CANTUA GROCERY LIST

Dates: 9-13-21 thru 9-17-21

Class size: 20 children /3 adults

Date:	Purchased Units	PM – Grocery List
9-13-21	12 oz.	Graham Crackers
	*	1% White Milk
	4 gals	1%White Milk – total for the week*
9-14-21	12 oz.	Assorted Crackers
	*	1% White Milk
9-15-21	23 @ 1 ea.	WG Waffle
	9 lbs.	Banana
	-	Water
9-16-21	12 oz.	Hi Ho Crackers
	*	1% White Milk
9-17-21	12 oz.	Graham Crackers
	*	1% White Milk

Dates: 9-20-21 thru 9-24-21

Class size: 20 children /3 adults

Date:	Purchased Units	PM – Grocery List
9-20-21	23 @ 1ea.	Pancake
	*	1% White Milk
	4 gals.	1% White Milk – total for the week*
9-21-21	18 oz.	Kix Cereal
	*	1% White Milk
9-22-21	18 oz.	Cheerios Cereal
	*	1% White Milk
9-23-21	12 oz.	Graham Crackers
	7 lbs.	Apple – cut into wedges
	-	Water
9-23-21	12 oz.	Assorted Crackers
	*	1% White Milk

Dates: 9-27-21 thru 9-30-21

Class size: 20 children /3 adults

Date:	Purchased Units	PM – Grocery List
9-27-21	12 @ ½ ea.	WG Tortilla – burritos
	4 – 16 oz. cans	Refried beans
	*	1% White Milk
	3 gals	1% White Milk – total for the week*
9-28-21	12 oz.	Hi Ho Crackers
	9 lbs.	Bananas
	-	Water
9-29-21	12 oz.	Graham Crackers
	*	1% White Milk
9-30-21	18 oz.	Kix Cereal
	*	1% White Milk

Do not let food get old in your storage. Make sure to rotate out your emergency meal components. Keep it fresh.

***Use up items that are in your emergency supply by dates and remember to restock for any emergency after you come back from summer break.**

Place a pitcher of water in advance in refrigerator for cool water for snack use.