

(1) School: _____

New Mexico Department of Education
Production Record

(4) Date: _____

(2) Menu:

(5) Day: M T W TH F

(6) Meal: B L SN

(7) Grade Group: _____

(3) Number of Meals Served: Students _____ (reimbursable)*
Adults _____

Food Items	(14) Product Code or Recipe Number	(15) Portion Size as Served	(16) Component Contribution	(17) Number of Student (Reimbursable) Meals Planned	(18) Number of Adult and A la Carte Meals Planned	(19) Allowable Servings Per Purchased Unit	(20) Total Quantity of Food Prepared (lbs/cans/cs)	(21) Total Number of Portions Prepared	(22) Number of Student (Reimbursable) Meals Served	(23) Number of Adult and A La Carte Meals Served	(24) Number of Leftover Servings	(25) Comments
(8) M/MA:												
(9) Vegetable:												
Dark Green:												
Red/Orange												
Peas/Beans (Legumes):												
Starchy:												
Other:												
(10) Fruit:												
(11) Grain:												
Whole Grains:												
Enriched Grains:												
(12) Milk:												
1% Unflavored												
FF Flavored:												
FF Unflavored:												
Other:												
(13) Extra/condiments:												

*Must match what is submitted through the claims system

I verify that the above information is correct (Manager or Designated Person)