

SISSETON EMERGENCY MENU 1

SISSETON

DATE \_\_\_\_\_

| B<br>R<br>E<br>A<br>K<br>F<br>A<br>S<br>T | Menu component      | Menu            | Serving Sizes |         |      |        | Specific Food Item | Quantity Prepared | Leftover  | Number Served  |                |           |          |              |              |        |             |              |
|---|---------------------|-----------------|---------------|---------|------|--------|--------------------|-------------------|-----------|--|----------------|-----------|----------|--------------|--------------|--------|-------------|--------------|
|   |                     |                 | Ages          | Ages    | Ages | Ages   |                    |                   |           |  |                |           |          |              |              |        |             |              |
|   |                     |                 | 1-2           | 3-5     | 6+   | Adults |                    |                   |           |  |                |           |          |              |              |        |             |              |
| L<br>U<br>N<br>C<br>H                     | Meat/Meat Alternate | American Cheese |               | 1.5 oz. |      | 2 oz.  | Canned             | 4.75 #            | 1-2 _____ |  |                |           |          |              |              |        |             |              |
|   | Bread/Grain         | Bread           |               | 1/2 sl. |      | 2 sl.  |                    |                   |           | Canned   | 2-1.5 # loaves | 3-5 _____ |          |              |              |        |             |              |
|   | Vegetable           | Corn            |               | 1/4 c.  |      | 1/2 c. |                    |                   |           |  |                |           | Canned   | 2-# 10 can   | 6+ _____     |        |             |              |
|   | Fruit               | Pears           |               | 1/4 c.  |      | 1/2 c. |                    |                   |           |  |                |           |          |              |              | Canned | 2-#10 can   | Adults _____ |
|   | Milk                | 1%              |               | 3/4 c.  |      | 1 c.   |                    |                   |           |  |                |           |          |              |              |        |             |              |
| Other                                     |                     |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        |             |              |
| S<br>N<br>A<br>C<br>K                     | (CHOOSE TWO)        |                 |               |         |      |        |                    | 1-16 oz. box      | 1-2 _____ |  |                |           |          |              |              |        |             |              |
|   | Meat/Meat Alternate |                 |               |         |      |        |                    |                   |           |  | 3-5 _____      |           |          |              |              |        |             |              |
|   | Bread/Grain         | Toasted oats    |               | 1/3 c.  |      | 3/4 c. |                    |                   |           |  |                |           | 6+ _____ |              |              |        |             |              |
|   | Vegetable           |                 |               |         |      |        |                    |                   |           |  |                |           |          |              | Adults _____ |        |             |              |
|   | Fruit               |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        | Total _____ |              |
| Milk                                      | 1%                  |                 | 1/2 c.        |         | 1 c. |        |                    |                   |           |  |                |           |          |              |              |        |             |              |
| P<br>M                                    |                     |                 |               |         |      |        |                    |                   | 1-2 _____ |  |                |           |          |              |              |        |             |              |
|   | Meat/Meat Alternate |                 |               |         |      |        |                    |                   |           | List any substitutions for children with food allergies. | 3-5 _____      |           |          |              |              |        |             |              |
|   | Bread/Grain         |                 |               |         |      |        |                    |                   |           |  |                |           | 6+ _____ |              |              |        |             |              |
|   | Fruit/Vegetable     |                 |               |         |      |        |                    |                   |           |  |                |           |          | Adults _____ |              |        |             |              |
|   | Fruit/Vegetable     |                 |               |         |      |        |                    |                   |           |  |                |           |          |              | Total _____  |        |             |              |
|   | Milk                |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        |             |              |
| Other                                     |                     |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        |             |              |
| S<br>U<br>P<br>P<br>E<br>R                |                     |                 |               |         |      |        |                    |                   | 1-2 _____ |  |                |           |          |              |              |        |             |              |
|   | Meat/Meat Alternate |                 |               |         |      |        |                    |                   |           | List any substitutions for children with food allergies. | 3-5 _____      |           |          |              |              |        |             |              |
|   | Bread/Grain         |                 |               |         |      |        |                    |                   |           |  |                |           | 6+ _____ |              |              |        |             |              |
|   | Fruit/Vegetable     |                 |               |         |      |        |                    |                   |           |  |                |           |          | Adults _____ |              |        |             |              |
|   | Fruit/Vegetable     |                 |               |         |      |        |                    |                   |           |  |                |           |          |              | Total _____  |        |             |              |
|   | Milk                |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        |             |              |
| Other                                     |                     |                 |               |         |      |        |                    |                   |           |  |                |           |          |              |              |        |             |              |



**SISSETON EMERGENCY MENU 3 (IF NO PEANUT ALLERGIES)**

SISSETON

DATE \_\_\_\_\_

| B<br>R<br>E<br>A<br>K<br>F<br>A<br>S<br>T | Menu component      | Menu           | Serving Sizes |         |      |        | Specific Food Item | Quantity Prepared   | Leftover | Number Served |       |
|---|---------------------|----------------|---------------|---------|------|--------|--------------------|---|----------|---------------|-------|
|   |                     |                | Ages          | Ages    | Ages | Ages   |                    |   |          |               |       |
|   |                     |                | 1-2           | 3-5     | 6+   | Adults |                    |   |          |               |       |
| B<br>R<br>E<br>A<br>K<br>F<br>A<br>S<br>T | Bread/Grain         | Chex <b>WG</b> |               | 1/3 c.  |      | 3/4 c. | Canned             | 1-16 oz. box<br>11-20 oz. (220 oz. total)<br>1.5 gallons                                    |          | 1-2           | _____ |
|   | Fruit/Vegetable     | Pineapple      |               | 1/2 c.  |      | 1/2 c. |                    |   |          | 3-5           | _____ |
|   | Milk                | 1%             |               | 3/4 c.  |      | 1 c.   |                    |   |          | 6+            | _____ |
|   | Other               |                |               |         |      |        |                    |   |          | Adults        | _____ |
|   |                     |                |               |         |      |        |                    |   |          | Total         | _____ |
| L<br>U<br>N<br>C<br>H                     | Meat/Meat Alternate | Peanut Butter  |               | 1.5 oz. |      | 2 oz.  | Jar                | 3-32 oz. (96 oz. total)<br>2-1.5 # loaves<br>2-#10<br>8-15 oz. (120 oz. total)<br>3 gallons |          | 1-2           | _____ |
|   | Bread/Grain         | Bread          |               | 1/2 sl. |      | 2 sl.  | Canned             |   |          | 3-5           | _____ |
|   | Vegetable           | Green Beans    |               | 1/4 c.  |      | 1/2 c. |                    |   |          | 6+            | _____ |
|   | Fruit               | Peaches        |               | 1/4 c.  |      | 1/2 c. | Canned             |   |          | Adults        | _____ |
|   | Milk                | 1%             |               | 3/4 c.  |      | 1 c.   |                    |   |          | Total         | _____ |
|   | Other               | Jam            |               |         |      |        |                    |   |          |               |       |
| S<br>N<br>A<br>C<br>K<br><br>P<br>M       | <b>(CHOOSE TWO)</b> |                |               |         |      |        |                    | 1-16 oz. box<br><br>1.5 gallons   |          | 1-2           | _____ |
|   | Meat/Meat Alternate |                |               |         |      |        |                    |   |          | 3-5           | _____ |
|   | Bread/Grain         | Chex           |               | 1/3 c.  |      | 3/4 c. |                    |   |          | 6+            | _____ |
|   | Vegetable           |                |               |         |      |        |                    |   |          |               | _____ |
|   | Fruit               |                |               |         |      |        |                    |   |          | Adults        | _____ |
|   | Milk                | 1%             |               | 1/2 c.  |      | 1 c.   |                    |   |          | Total         | _____ |
| S<br>U<br>P<br>P<br>E<br>R                | Meat/Meat Alternate |                |               |         |      |        |                    | List any substitutions for children with food allergies.                                    |          | 1-2           | _____ |
|   | Bread/Grain         |                |               |         |      |        |                    |   |          | 3-5           | _____ |
|   | Fruit/Vegetable     |                |               |         |      |        |                    |   |          | 6+            | _____ |
|   | Fruit/Vegetable     |                |               |         |      |        |                    |   |          | Adults        | _____ |
|   | Milk                |                |               |         |      |        |                    |   |          | Total         | _____ |
|   | Other               |                |               |         |      |        |                    |   |          |               |       |