





JANUARY 2021

Moonachie Elementary School



MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
 <p>Free meals for all students*</p>	 <p>Take Home Meal Storage and Handling Instructions</p>		<p>School Closed</p>	1
<p>4</p> <p>Boneless Chicken Wings Vegetable & Fruit Free Cookie w/ Lunch</p> 	<p>5</p> <p>Nachos w/ Beef, Cheese & Tortilla Rounds Vegetable & Fruit</p>	<p>6</p> <p>Waffle Pouch w/ Egg Patties Vegetable & Fruit</p>	<p>7</p> <p>Chicken Patty on a Bun w/ French Fries & Fruit</p>	8
<p>11</p> <p>Popcorn Chicken w/ a Dinner Roll Vegetable & Fruit</p>	<p>12</p> <p>Meatballs w/ Cheese & Garlic Bread Vegetable & Fruit</p>	<p>13</p> <p>Baked Mozzarella Sticks w/ Marinara Sauce Vegetable & Fruit</p>	<p>14</p> <p>Boneless Chicken Wings w/ Dinner Roll Vegetable & Fruit</p>	15
<p>18</p> <p>School Closed</p> 	<p>19</p> <p>Chicken Nuggets & Fries Vegetable & Fruit</p>	<p>20</p> <p>French Toast Vegetable & Fruit</p>	<p>21</p> <p>Teriyaki Chicken w/ Vegetable Fried Rice & Fruit</p>	22
<p>25</p> <p>Chicken Patty on a Bun Vegetable & Fruit</p>	<p>26</p> <p>Cheeseburger on a Bun w/ French Fries & Fruit</p>	<p>27</p> <p>Pancake Pouch w/ Egg Patties Vegetable & Fruit</p>	<p>28</p> <p>Boneless Chicken Wings Vegetable & Fruit Free Cookie w/ Lunch</p> 	29
<p>Monday Breakfast Large Muffin</p>	<p>Tuesday Breakfast Assorted Cereal</p>	<p>Wednesday Breakfast Bagel</p>	<p>Thursday Breakfast Pop-Tarts</p>	<p>Friday Breakfast Cinnamon Roll</p>

Contact your cafeteria for
Alternate Vegetarian Options

A Complete Lunch Includes:
Protein, Grain, Vegetable, Fruit & Milk

Menu Subject to Change



Allergy Aware menus are available for students with food allergies. For more information contact your Food Service Director or see our Food Allergy Best Practices at www.pomptonian.com.



At least 50% of All Grains served w/ your meal are Whole Grain Rich



***USDA approved until further notice**

"This institution is an equal opportunity provider."



January MOONACHIE 2021

Robert L. Craig Elementary School
ORDER FORM



Please indicate your breakfast and lunch choice by including the code from the list below in the appropriate box for the days you would like to order. Return each form to the school by **9:00 a.m. on the due date indicated** in an **ENVELOPE** with the exact money OR check made payable to the "Moonachie Board of Education."

Breakfast Codes: [B1] Daily Breakfast
Lunch Codes: [D1] Daily Lunch

Breakfast: No Charge
Reduced Breakfast: No Charge
Free Breakfast: No Charge

Lunch: No Charge
Reduced Lunch: No Charge
Free Lunch: No Charge

"This institution is an equal opportunity provider."

Tear at this line and return in an **ENVELOPE**.

DAY	BREAKFAST	LUNCH
MON 4		
TUE 5		
WED 6		
THU 7		
FRI 8		
TOTAL \$:		

Please check if your student receives

- Free Lunch
 Reduced Price Lunch

STUDENT'S NAME _____

TEACHER _____ ROOM # _____

CONTACT PHONE # _____ TOTAL \$ _____

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:
If you plan to participate in the lunch program, you **must** fill out and return this form.

Please return form & payment by Tuesday, December 22, 2020

DAY	BREAKFAST	LUNCH
MON 11		
TUE 12		
WED 13		
THU 14		
FRI 15		
TOTAL \$:		

Please check if your student receives

- Free Lunch
 Reduced Price Lunch

STUDENT'S NAME _____

TEACHER _____ ROOM # _____

CONTACT PHONE # _____ TOTAL \$ _____

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:
If you plan to participate in the lunch program, you **must** fill out and return this form.

Please return form & payment by Tuesday December 22, 2020

DAY	BREAKFAST	LUNCH
MON 18		
TUE 19		
WED 20		
THU 21		
FRI 22		
TOTAL \$:		

Please check if your student receives

- Free Lunch
 Reduced Price Lunch

STUDENT'S NAME _____

TEACHER _____ ROOM # _____

CONTACT PHONE # _____ TOTAL \$ _____

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:
If you plan to participate in the lunch program, you **must** fill out and return this form.

Please return form & payment by Tuesday, January 5, 2021

DAY	BREAKFAST	LUNCH
MON 25		
TUE 26		
WED 27		
THU 28		
FRI 29		
TOTAL \$:		

Please check if your student receives

- Free Lunch
 Reduced Price Lunch

STUDENT'S NAME _____

TEACHER _____ ROOM # _____

CONTACT PHONE # _____ TOTAL \$ _____

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:
If you plan to participate in the lunch program, you **must** fill out and return this form.

Please return form & payment by Tuesday, January 12, 2021