G7. on-site self-serve/made-to-order Bar form (Group 3)

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OMB Control Number: 0584-XXXX

Expiration Date: XX/XX/XXXX

## On-Site Self-Serve / Made-to-Order Bar Form

**School Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Name of Bar:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Meal:** 🞏 Breakfast 🞏 Lunch |

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| **A.** | **B.** | **C.** | **D.** | **E.** | **F.** | **G.** |
| **Food Name** | **Portion Size *(Include Units if Pre-Portioned)*** | **Production Information** | **Manufacturer/ Brand Name and Product Code *(If Applicable)*** | **Food Description** | **USDA Food?** | **Recipe?** |
| **Amount at Beginning** | **Amount Added** | **Amount Left Over for Later Use** | **Amount Wasted** |
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*If more ingredients are present on the bar, please continue to next page.*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All information will be kept private under the Privacy Act to the extent allowed by law. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

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| **A.** | **B.** | **C.** | **D.** | **E.** | **F.** | **G.** |
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