FOOD INVENTORY QUESTIONNAIRE:

Please indicate how often you and your child typically eat the following foods

D = Daily W= Weekly M = Monthly 0 = Never

Food	Child	You	Food	Child	You	Food	Child	You
Milk (white of			Cauliflower					
flavored)			Caulinower			Ham, Pork		
Yogurt			Brussel Sprouts			P (/		
Cottage Cheese			Lettuce			Beef (steak, roast)		
Cheese (any type)			Green Pepper	_		Eggs		
Chocolate			Sauerkraut	+		Tuna, fish		
						Shellfish (shrimp,		
Ice Cream or Sherbet			Greens (collard, chard)			lobster, clams) Lima Beans		
Pudding			Beans (pinto, kidney)	-				
Soy Milk			Tofu, soybeans			Corn	•	
Soy Yogurt			Peanut Butter	-		Celery		
Apple			Peanuts, nuts, sunflower	-		Onion		
Applesauce			seeds			Eggplant		
			Muffin, bagel, roll			French Fries/tater tots		
Apricot			Cold Cereal			Potato (baked, boiled)		
Banana			Oatmeal or Hot Cereal		***************************************	Sweet potato,		
Cranberry Sauce			Poptart or Breakfast Bar			hams		
Grapes			Bread or Pita			Please list any foods	that you	r child
Grapefruit			Rice, white or brown			eats that are not spec	ified on	the
Kiwi			Pasta (spaghetti, noodles)			list:		
Mango			Crackers					
Nectarines			Pizza					
Oranges/Tangerin es			Stuffing or filling					
Peaches			Candy (not chocolate)	-				
Pears			Donuts or Sweet rolls	-				
Strawberries			Pie					
Other berries			Cake					
Pineapple			Potato Chips					
Plums			Corn/tortilla chips					
Raisins			Cheese puffs/curls					
Watermelon			Pretzels			:		
Other melon			Cucumbers					
Chicken nuggets/fingers			Carrots					
Chicken, turkey			Broccoli					
Ground beef, namburger			Colesiaw, Cabbage					
Sausage			Zucchini					
lot dogs			Squash					
Bacon			Tomato					
unch Meat			Peas					