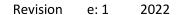


Milk	Egg	Peanut	Tree Nut	Fish	Shellfish	Soy	Wheat
YES	NO	NO	NO	NO	NO	NO	NO





Yellow Cheddar Feather Shred - 4/5#

Product Number: 75519-1 UPC: 0-71078-75519-2 GTIN: 1-00-71078-75519-9

Product Description:

Yellow Cheddar Feather Cheese Shreds have a mild, buttery cheddar flavor with a creamy texture. Each bag is 5 lbs. with 4 per case. Perfec for salads, Mexican dishes, and entrees. This product complies with the Standard of Identity for Chedd r (21 CFR 133.113).

Ingredients:

Pasteurized Milk, Cheese Cultures, Salt, Enzymes, Annatto (color), Powdered Cellulose (nticaking agent), Natamycin (mold inhibitor).

Allergens: Milk

Chemical and Physical:				
<u>Analysis</u>	<u>Specification</u>			
Moisture	34.5-39.0%			
Fat (dry basis)	49.0-57.5%			
Salt	1.30-2.20%			
рН	4.9-5.4			
NCI Color Ch rt	6-8			
Shred Size (t rge)	0.5-2.0" x 0.15-			
	0.17" x 0.07-0.09"			

Microbiological:		
<u>Analysis*</u>	<u>Specification</u>	
Yeast/Mold	<1000/g	
Coliforms	<100/g	
E. coli	<10/g	
Staphylococcus coag +	Negative	
Salmonella	Negative	
Listeria Monocytogenes	Negative	

^{*}Typical an lysis. Not all test performed on each lot. Added test at addi ional customer cos .

Shelf Life and Storage: 180 days*

*When stored in original unopened container. Product must be shipped & stored between 35°F - 40°F. The freezing of this product is not recommended since extural and/or flavor changes may result.

Nutritional Information:					
Serving Size: 28g					
Servings Per Container:					
	Per Serving	Daily Value			
Calories	110				
Total Fat	9g	12%			
Saturated Fat	5g	27%			
Trans Fa	0g				
Cholesterol	30mg	9%			
Sodium	190mg	8%			
Total Carbs	1g	0%			
Dietary Fiber	0g	0%			
Total Sugar	0g				
Added Sugar	0g	0%			
Protein	6g				
Vitamin	0.2mcg	0%			
Calcium	200mg	15%			
Iron	0mg	0%			
Potassium	20mg	0%			

^{*}Calculated values

Allergen & Sensitive Ingredient Attachment 3

(One form per supplied item)

Product:	ar, Shredded 102 IMHA	Product Code Number: 755 19				
	ar, 211100000 102 11197	Contact Name & Number:				
Company: Bongar	ds	Joe DeAntoni 952-466-3582				
		302 100 000 <u>1</u>				
Fill in the follo	owing chart for each product you	supply to the Anne Arundel County Public Schools.				
	$\sqrt{\mathbf{Y}}$	es or No.				
	Component	Present in Product?				
	Milk	X Yes □ No				
Egg		□ Yes 🛭 No				
	Peanut	□ Yes 🖄 No				
	Tree Nut	□ Yes 🛛 No				
	Fish	□ Yes 🛛 No				
	Shellfish	□ Yes 🛛 No				
	Soy	□ Yes 🛛 No				
	Wheat	□ Yes 🛛 No				
Is there a policy to prevent cross contamination? Yes No						
Is this product produ	iced in a peanut free facility?	Yes No				
Is this product produ	aced in a tree nut free facility?	☐ Yes ☐ No				
IF FOR ANY REASON, THERE ARE MODIFICATIONS TO THIS PRODUCT, YOU ARE RESPONSIBLE FOR UPDATING YOUR RECORDS AND NOTIFYING US IMMEDIATELY.						
Form completed by:	Form completed by:					
apl		3/11/19				
Signature of Rep	presentative	Date				
SFS Mgr						