

FIRST & LAST NAME: _____

No Milk

Frozen Meat: Hamburger or Chicken Garlic Sausage

Bonus Item: Frozen Egg Product

Please circle your choices below. If you'd like two of something, write the number 2 beside it.

Please choose no more than 2 of a single item. Total number of items: whatever you need this week.

Ready Made Meals:

Beef Stew

Pasta with Meat Sauce

Pasta in Tomato Sauce

Vegetables:

Carrots

Creamed corn

Regular corn

Green beans

Mixed Vegetables

Peas

Boxed Pasta/Noodles/Rice:

Hamburger Helper

Tuna Helper

Taco Mac

Mac & cheese

Misc Pasta Noodles

Spaghetti Noodles

Spaghetti Sauce

Stuffing Mix

Instant Potato Flakes

Baking:

Rolled Oats

Instant Dry Milk

Pancake mix

Syrup

Chocolate Frosting

Apple Cinnamon Muffin Mix

Vanilla Pudding

Fruits:

Pears

Peaches

Mixed fruit

Cranberry Sauce

Soup:

Vegetable

Tomato

Cream of Mushroom

Chicken Noodle

Chili with Beans

Beans:

Pork 'n Beans

Pinto Beans

Chickpeas

Kidney Beans

Black Beans

Baked Beans

Dried Fruit/Nuts:

Raisins

Fig Pieces

Pistachios

Tomato products

Diced Tomatoes

Cereal:

Cheerios

Corn Biscuits

Corn Flakes

Crisp Rice

Wheat Bran

Misc

Pita Chips

Peanut butter - Creamy

Grape Jelly

Strawberry Preserves

Palm Oil

Fruit Snacks

Granola Bars

Baby Food/Formula

Birthday Kit

Toiletries on page 2

Toiletries:

*Total number of items: whatever
you need this week. However,
LIMIT 1 of*

a single item:

Toilet Paper

Hand Sanitizer

Hand Soap

Alcohol Wipes

Diapers (Newborn - size 6 & Pull-ups)

Baby Wipes

Men's Deodorant

Razor

Dental Floss

Toothbrush

Toothpaste

2 in 1 Hair/Body Wash

Bar Soap

Panty Liners

Tampons

Kids Face Masks

PPE Kit