

First & Last Name of Recipient: _____ Color/Make of car _____ # _____
in household _____

If new, please provide: Address: _____ City _____ Zip _____
Ages: _____ Circle if applicable: WIC, SNAP, NSLP, Veteran

Special dietary needs: Gluten-free, vegetarian, vegan, diabetic, food allergy: _____

Please **CIRCLE** what you would like below:

1. Meat Choices:

1-3 people - select 1 meat

4-6 people - select 2 meats

7+ people - select 3 meats

Turkey Lit'l Smokies	Ground Chicken	Beef Misc.	Salmon	Bologna	Chicken Drumsticks	Pork Sausage Roll
----------------------	----------------	------------	--------	---------	--------------------	-------------------

2. Canned, bagged and boxed foods (circle if you'd like this box of food)

3. Frozen Soups

4. Frozen Fruit

5. Milk

6. Eggs

7. Deli

8. Bread/Dessert

9. Snacks

10. Coffee: Ground Decaf Coffee

11. One wish list item _____

Produce is now available in our farmer's market under the canopy. Please remain in vehicle until you're at canopy and then quickly make your produce choices.

Please share any items that you don't need with friends or family.

Wishing you a good day and all the best!