

# North Light Canned Good Menu

Submission Deadline: September 25<sup>th</sup> NO EXECPTIONS!!!!

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

The following is a list of categories with corresponding items that are available under each category. Each category has a maximum quantity limit. The total number of items you can choose CANNOT exceed the total allowed under each category.

**Example:** You could choose 2 Boxes of Cereal, 2 Oatmeal and 0 Pancake mix for a total of 4 items under the Breakfast Category because the maximum allowed is 4 or less.

Please write the amount you want next to each item. Please do NOT write in what is not listed.

## Category: Breakfast (4 or less Total):

- \_\_\_ Box Cereal
- \_\_\_ Oatmeal
- \_\_\_ Pancake mix

## Category: Other Items (10 or less Total):

- \_\_\_ Soup
- \_\_\_ Chef- Boyardee
- \_\_\_ Broth \*Circle which type  
(Chicken, Vegetable, Beef)
- \_\_\_ Tuna Fish
- \_\_\_ Sugar \*Circle which type (Light brown, Powdered)
- \_\_\_ Apple Sauce
- \_\_\_ Mixed Fruit/Fruit Cocktail
- \_\_\_ Pineapple Chunks
- \_\_\_ Peaches
- \_\_\_ Tortilla Chips
- \_\_\_ Chicken Breast in a Can

## Category: Sides (6 or less Total):

- \_\_\_ Pasta Sides
- \_\_\_ Italian Sides
- \_\_\_ Rice Sides
- \_\_\_ Rice \*Circle which type (White or Brown)
- \_\_\_ Macaroni and Cheese
- \_\_\_ Scalloped Potatoes
- \_\_\_ Mashed Potatoes

## Category: Beans (10 or less Total):

- \_\_\_ Black Beans
- \_\_\_ Red Kidney Beans
- \_\_\_ Pork and Beans
- \_\_\_ Cannellini Beans
- \_\_\_ Garbanzo Beans

## Category: Vegetables (10 or less Total):

- \_\_\_ Yams
- \_\_\_ Collard Greens
- \_\_\_ White Potatoes
- \_\_\_ Green Beans
- \_\_\_ Mixed Vegetables
- \_\_\_ Mixed Greens
- \_\_\_ Corn \*Circle which type (Cream or regular)
- \_\_\_ Carrots

## Category: Pasta (8 or less) & Tomato Sauce (3 or less depending on how many pastas):

- \_\_\_ Angel Hair
- \_\_\_ Spaghetti \*Circle which type  
(Whole grain or Regular)
- \_\_\_ Elbow Macaroni
- \_\_\_ Fettuccine
- \_\_\_ Ziti

## Category: Condiments (Maximum 1 of each):

- \_\_\_ Peanut Butter \*Circle which type  
(Chunky or Creamy)
- \_\_\_ Jelly
- \_\_\_ Ketchup
- \_\_\_ Mustard \*Circle which type (Spicy or regular)
- \_\_\_ Relish
- \_\_\_ Mayonnaise
- \_\_\_ Barbecue Sauce
- \_\_\_ Syrup
- \_\_\_ Salad Dressing \*Circle which type (Ranch, Caesar, Blue Cheese, Thousand Island)

## SPECIALTY ITEMS

These Items are NOT guaranteed however if you need a specific item please indicate below. Please write legibly and in print. *For the baby items, the child must be in the system.*

**Household supplies:** The amount of these supplies will be determined by Shontell

- Laundry Detergent
- Dish Soap
- Body Soap/Body Wash
- Toilet Paper
- Dental Hygiene (Toothpaste, mouthwash)
- Personal Hygiene wipes
- Feminine Products (limited)

**Cleaning Supplies:** Please indicate what you specifically need. If you need floor cleaners, please circle type of flooring (Wood, Tile, or Carpet).

**Baby Items:** Please contact Shontell directly via phone or email. Indicate gender, size and any sensitivities.

- Diapers
- Wipes
- Baby furniture (car seats, strollers, highchair)
- Children's medicine (Specify what medicine)
- Children's body wash/ lotion
- Baby formula (indicate which type)
- Children's dental hygiene

**Over-the-Counter Medications:** Write in what you need (indicate if generic brands are okay (up & up)

**Other Items:** Indicate what is needed if not listed above.

For questions or special requests, please contact Shontell at [smoman@northlightcommunitycenter.org](mailto:smoman@northlightcommunitycenter.org) or (215) 483-4800 ext. 103. A response will be provided within 1-2 business days.

**Thank you!**