## **FOOD AND SUPPLIES ORDER**

| Date:   | -  |                                | Prepared By:                        |               |                      |        |
|---|----|--------------------------------|-------------------------------------|---------------|----------------------|--------|
| Facility Name: (Check One)  |    |                                |                                     |               |                      |        |
| ☐ Arbor Vista   |    | ncroft House                   | ☐ Beth House                        |               | Glen Meadows Ar      | nnex   |
|   |    | rriet House Annex              | ☐ Mentone House                     | Newport House |                      |        |
| ☐ Raymond House ☐ Wyoming House   |    | ymond House Annex<br>lor House | ☐ Evergreen House☐ Zook House☐      | ш             | Maple House          |        |
|   |    |                                | d Sunday. List must be completed of | each          | Sunday night for n   | ick-un |
|   |    |                                | y PM (afternoon) to Thursday PM (   |               |                      |        |
| be filled upon availability and tra<br>(Example – Gloves #1 box gloves or app |    | When ordering supplies         | , write number # or quantity in the | appro         | opriate sections.    |        |
| FOOD  | #  | Quantity                       | Supplies                            | #             | Quantity             |        |
| Fresh Fruit   |    |                                | Deodorant                           |               |                      | Ť      |
| Lettuce   |    |                                | Toothpaste                          |               |                      |        |
| Tomatoes  |    |                                | Shampoo                             |               |                      |        |
| Bread   |    |                                | Hand & Body Soap/Ivory              |               |                      |        |
| Milk  |    |                                | Hair Gel                            |               |                      |        |
| Fruit Punch   |    |                                | Shaving Cream                       |               |                      |        |
| Lunch Meat  |    |                                | Skin Cream/Lotion                   |               |                      |        |
| Cheese  |    |                                | Diapers/Pampers                     |               | SMALL<br>MED LARGE   |        |
| Eggs  |    |                                | Kotex                               |               | map Brition          |        |
| Sausage   |    |                                | Razor/Shaver                        |               |                      |        |
| Bacon   |    |                                | Razor Blades                        |               |                      |        |
| Margarine/Butter  |    |                                | Paper Towels                        |               | Rolls / Singles      |        |
| Prunes  |    |                                | Toilet Paper                        |               |                      |        |
| Tuna  |    |                                | Napkins                             |               |                      |        |
| Can Fruit   |    |                                | Plastic Trash Bags                  |               | SMALL<br>MED / LARGE |        |
| Can Vegetables  |    |                                | Paper Bags                          |               |                      |        |
| Can Juices  |    |                                | Gloves                              |               | Singles /Box         |        |
| Hot Cereal  |    |                                |                                     |               |                      |        |
| Cold Cereal   |    |                                | Dish Soap                           |               |                      |        |
| Cookies   |    |                                | Window Cleaner                      |               |                      |        |
| Chips   |    |                                | Furniture Polish                    |               |                      |        |
| Peanut Butter   |    |                                | Cleanser/Ajax                       |               |                      |        |
| Salt  |    |                                | Pine Sol                            |               |                      |        |
| Sugar   |    |                                | Odor Disinfectant                   |               |                      |        |
| Soup  |    |                                | Glass Cleaner                       |               |                      |        |
| Jelly   |    |                                | Laundry Detergent                   |               |                      |        |
| Syrup   |    |                                | Mop                                 |               |                      |        |
| Pancake Mix   |    |                                | Mop Head                            |               |                      |        |
| Mayonnaise  |    |                                | Broom                               |               |                      |        |
| OTHER:  |    |                                | Baking Soda                         |               |                      |        |
| Masking Tape (To Mark Foo   | d) |                                | Toilet Brush                        |               |                      |        |
| Black Marker (To mark Food  |    |                                | Vacuum Cleaner Bag                  |               |                      |        |
|   |    |                                | OTHER:                              |               |                      |        |
|   |    |                                |                                     |               |                      |        |

Date Received: \_\_\_\_\_ Order Filled/Delivered By: \_\_\_\_\_ Date: \_\_\_\_