

FISH Food Pantry Guest Information:

FISH ID#: _____

X

Adults: _____

Name (First & Last) - Please Print _____

Birthdate _____

Children: _____

X

SNAP Recipient?: _____

Address _____

City / State / Zip Code _____

Yes

No

FISH Food Pantry Shopping List

Number in Household: _____

X

Adults: _____

Name (First & Last) - Please Print _____

Children: _____

*Check ✓ each item you would like on list. *** Please Note: Items may not be available all of the time.*

Frozen Meats	
Assorted Bag of Meat	<input type="checkbox"/>

Canned Goods	
Applesauce	<input type="checkbox"/>
Canned Fruit	<input type="checkbox"/>
Green Beans	<input type="checkbox"/>
Kernel Corn	<input type="checkbox"/>
Peas	<input type="checkbox"/>
Diced Tomatoes	<input type="checkbox"/>
Canned Beans	<input type="checkbox"/>
Baked / Pork & Beans	<input type="checkbox"/>
Spaghetti Sauce	<input type="checkbox"/>
Ravioli / Spaghettio's	<input type="checkbox"/>
Canned Chicken	<input type="checkbox"/>
Canned Tuna	<input type="checkbox"/>

Broth & Soups	
Broth	<input type="checkbox"/>
Chicken Noodle Soup	<input type="checkbox"/>
Cream Soup	<input type="checkbox"/>
Tomato Soup	<input type="checkbox"/>

Condiments	
Jelly	<input type="checkbox"/>
Peanut Butter	<input type="checkbox"/>
Cooking Oil	<input type="checkbox"/>

Beverages	
Shelf Stable Milk	<input type="checkbox"/>
Fruit Juice	<input type="checkbox"/>

Dry Goods	
Oatmeal	<input type="checkbox"/>
Pancake Mix	<input type="checkbox"/>
Mac & Cheese	<input type="checkbox"/>
Rice	<input type="checkbox"/>
Pasta Noodles	<input type="checkbox"/>
Instant Potatoes	<input type="checkbox"/>

Personal Care	
Bar / Hand Soap	<input type="checkbox"/>
Toothpaste	<input type="checkbox"/>

Choose Only 1 of Next 2 Items	
Feminine Pads OR	<input type="checkbox"/>
Tampons (Not Both)	<input type="checkbox"/>

Pads will be given if Tampons are not available

Household Items	
Toilet Tissue	<input type="checkbox"/>
Laundry Soap	<input type="checkbox"/>

Assorted Bakery Bag / Box	
Breads/Pastries	<input type="checkbox"/>

Frozen & Refrigerated	
Miscellaneous Bag	<input type="checkbox"/>

Products may include meals, pizza, vegetables, cheeses, desserts, fruits, vegetables, soup, breakfast items, appetizers, hotdogs, sausage, bacon deli meats & deli items, etc...

Dairy Products	
1% Milk (Fresh Gallon)	<input type="checkbox"/>
1 dozen Fresh Eggs	<input type="checkbox"/>
Butter/Margarine	<input type="checkbox"/>
Yogurt	<input type="checkbox"/>

Fresh Produce (1 of each)			
Carrots	<input type="checkbox"/>	Bell Pepper	<input type="checkbox"/>
Celery	<input type="checkbox"/>	Tomatoes	<input type="checkbox"/>
Cucumber	<input type="checkbox"/>	Lettuce	<input type="checkbox"/>
<i>If available:</i>			
Apples	<input type="checkbox"/>	Onions	<input type="checkbox"/>
Oranges	<input type="checkbox"/>	Potatoes	<input type="checkbox"/>

Baby Diapers			
<i>(Only 1 package per Child)</i>			
Newborn	<input type="checkbox"/>		
Size 1	<input type="checkbox"/>	Size 4	<input type="checkbox"/>
Size 2	<input type="checkbox"/>	Size 5	<input type="checkbox"/>
Size 3	<input type="checkbox"/>	Size 6	<input type="checkbox"/>

Adult Diapers			Size	
Women <input type="checkbox"/>	Men <input type="checkbox"/>		S	<input type="checkbox"/>
Women <input type="checkbox"/>	Men <input type="checkbox"/>		M	<input type="checkbox"/>
Women <input type="checkbox"/>	Men <input type="checkbox"/>		L	<input type="checkbox"/>
Women <input type="checkbox"/>	Men <input type="checkbox"/>		XL	<input type="checkbox"/>
Women <input type="checkbox"/>	Men <input type="checkbox"/>		XXL	<input type="checkbox"/>