

Need A Neighbor Food Planning Sheet

Project Number: _____

Neighbor's Name _____

Number of adults in home: _____ Number of children in home: _____

Has access to: Refrigerator, Stove, Oven, Microwave (Circle all that apply)

Allergies: _____

Produce

- Apples
- Bananas
- Oranges
- Berries
-
-
- Lettuce
- Tomatoes
- Onions
- Green beans
- Carrots
- Potatoes
-
-
-

Condiments

- Peanut butter
- Jelly/jam
- Ketchup
- Mustard
- Olive Oil
-
-

Canned Goods

- Beans
- Fruit
- Vegetables
- Soup/broth
- Tomato sauce
- Chicken/tuna

Beverages

- Coffee/tea
- Juice
- Soda
- Water
-

Breads and Grains

- Bread
- Tortillas
- Cereal
- Oatmeal
- Pasta
- Rice
-
-

Frozen Foods

- Meals
- Pizza
- Fruits/vegetables
-
-

Deli

- Lunch meat
- Cheese
-

Meat

- Beef
- Chicken
- Fish
- Pork
-
-

Dairy

- Milk
- Butter
- Eggs
- Cheese
- Yogurt
-

Supplies

- Disinfectant spray
- Bleach
- Dish soap
- Laundry detergent
- Toilet paper
- Paper towels
- Tissues
- Trash bags
-
-

Toiletries

- Hand soap
- Hand sanitizer
- Shampoo
- Toothpaste
- Body soap

Pet Supplies

- Pet food
- Litter
-
-

Notes: _____