

RENFREW AND AREA SENIORS' HOME SUPPORT INC.

Phone: 613-432-7691

Fax: 613-432-7436

Carefor Health & Community Services Frozen Meals Program

Client Name: _____ Date Ordered: _____

Address: _____ Phone : _____

<p align="center">Entrees - \$ 5.00</p> <p>01. ___ Chicken a la King ♣♥</p> <p>03. ___ Fish Florentine ♣♥</p> <p>04. ___ Country Style Pork Casserole ♥</p> <p>05. ___ Macaroni Meat Casserole ♣♥</p> <p>06. ___ Shepherd's Pie ♣♥</p> <p>07. ___ Turkey with Stuffing ♥♣</p> <p>08. ___ Beef Stew ♥</p> <p>09. ___ Veal Parmigian</p> <p>10. ___ Traditional Pot Roast ♣♥</p> <p>13. ___ Fish & Chips ♥</p> <p>14. ___ Sweet n' Sour Chicken ♥♣</p> <p>17. ___ Salisbury Steak ♥</p> <p>20. ___ Pork with Stuffing ♣♥</p> <p>21. ___ Vegetable Lasagna ♥</p> <p>30. ___ Beef Stroganoff ♥</p> <p>32. ___ Country Chicken ♣♥</p> <p>46. ___ Chopped Swiss Steak ♣♥</p> <p>62. ___ Meatloaf in Mushroom Gravy ♥</p> <p>63. ___ Salmon/Lemon Sauce ♣♥</p> <p>75. ___ Pork Chow Mein ♥</p> <p>78. ___ Chicken Cacciatore ♣♥</p> <p>87. ___ Liver and Onions ♥</p> <p>89. ___ BBQ Rib Style Pork Cutlet ♥</p> <p>90. ___ Roast Chicken ♣♥</p> <p>91. ___ Seasoned Pork Tenderloin ♣♥</p>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>Client Pick-Up? <input type="checkbox"/> Y</p> <p align="center">OR</p> <p>RASHS Driver? <input type="checkbox"/> Y</p> <p>Name of Driver: _____</p> <p># of kms _____</p> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>Faxed to VON 613-732-2415:</p> <p>DATE _____ TIME _____</p> </div> <p align="center">SUITABLE FOR: ♣ Salt Free Diets ♥ Diabetic Diets</p> <div style="border: 1px solid black; padding: 5px;"> <p># of Entrees _____ x \$ 5.00 = \$ _____</p> <p align="right">Total Order = \$ _____</p> </div>
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FOR OFFICE USE ONLY:

Order packed by: _____ Date: _____

Entered into inventory by: _____ Date: _____

Paid \$ _____ CHQ# _____ CASH Deposit Date: _____ G/L A/C# _____