

Monday	Tuesday	Wednesday	Thursday	Friday
Name: _____ Phone Number: _____ Please clearly circle A - B - C indicating which meal you would like to order for each day.		1	2	3 A. BAKED FISH Mashed Potatoes Zucchini & Tomatoes <i> pudding</i> B. BAKED CHICKEN C. SWISS CHEESE SANDWICH Pasta Salad
6 A. CURRY CHICKEN Rice Cauliflower Cookies B. BAKED FISH	7 A. BEEF TIPS OVER MASHED POTATOES Carrots Fruit B. BAKED FISH	8	9	10 A. POTATO CRUNCH FISH Roasted Potatoes Brussels Sprouts <i> Cake</i> B. BAKED CHICKEN C. CHICKEN SALAD SANDWICH Carrot & Raisin Salad
13 A. MAC & CHEESE Stewed Tomatoes Fruit Cookie B. BAKED FISH	14 A. CHICKEN TERIYAKI Rice Asian Vegetables Fruit Cake B. BAKED FISH	15	16	17 A. ROAST BEEF WITH MASHED POTATOES & GRAVY Broccoli Fruit B. BAKED FISH C. TUNA SALAD PLATE Chickpea Salad
20 A. BAKED FISH Mashed Potatoes Peas & Carrots Cookie B. BAKED CHICKEN	21 A. SPINACH BEEF MACARONI BAKE Green Beans Fruit Cake B. BAKED FISH	22	23	24  CENTER CLOSED
27 A. CHICKEN CACCIATORE Penne Pasta Mixed Vegetables Pudding B. BAKED FISH	28 A. HAM & BEAN CASSEROLE Green Beans Cake B. BAKED FISH	29	30	31  CENTER CLOSED

This Congregate Dining Program is supported in part by the Albany County Department for Aging, the New York State Office for Aging, the Administration for Community Living, and CDPHP. All Albany County congregate meal programs allow for a suggested contribution of \$3.00. Contributions are very much appreciated and go directly to support and expand the congregate meal program. Contributions are voluntary, confidential, and purely optional. All seniors are welcome and encouraged to attend our meal program. Please make a reservation to assure we have a meal available at the meal program you would like to attend. No one will be turned away due to an inability to make a contribution. All meals are served with milk. Some items may be subject to last-minute substitution.