
Low Sodium Distribution Rate Sheet

Individual Food Box

Food items

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|--|------------------|
| Meat/ NO Processed | 3 |
| Soup | 0 |
| Vegetables | 5 |
| Fruit | 2 |
| PLAIN Pasta/ NO Mixes | 2 |
| Canned Tomatoes/ NO Spaghetti Sauce | 2 |
| Brown or White Rice/ NO Rice Mixes | 1 |
| Cereal/Cereal Bars | 1 |
| ONLY Dried Beans | 2 |
| Peanut Butter | 1 |
| Crackers | 1 |
| Baking Supplies | 2 |
| Assorted Foods | 0 |
| Beverage/ NO Snack | 1 |
| Baby Supplies | Give as Needed |
| Food Extras | One of each kind |
| Non-Food Extra | One of each kind |
| Milk Quarts | 1 |

If a family of 4 comes in requesting a food box and one family member needs a low sodium box, give 1 low sodium box and then a regular box for 3.