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Form
Menu Plan
 Residential Care and Transition Services

Day and Date	Monday ____/____/____	Tuesday ____/____/____	Wednesday ____/____/____	Thursday ____/____/____	Friday ____/____/____	Saturday ____/____/____	Sunday ____/____/____
Breakfast							
Morning Tea							
Lunch							
Afternoon Tea							
Dinner							
Who's helping prepare dinner?							
Who's helping clean up?							