



**DOOR COUNTY
DEPARTMENT OF HEALTH & HUMAN SERVICES
Aging & Disability Resource Center**

916 North 14th Avenue
Sturgeon Bay, WI 54235

Jake Erickson, Director
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«Date»
«First_Name» «Last_Name»
«Address1»
«Address2»
«City»

**This is not a bill or an invoice.
If you have already contributed to the cost of your monthly meals, please
disregard this reminder.**

Thank you for participating in our home delivered nutrition program! Our meals have proven to be a valuable and necessary community resource in order to help people remain in their own homes. Donations toward the cost of the home delivered meals you have received are very much appreciated and important to continue the program.

**Please contribute what your budget allows.
You will not be denied a meal if you are unable to contribute.**

We are required to provide you the opportunity to contribute to the cost of this service. The actual cost to our agency to provide this meal is «Real_Unit_Cost_text» per meal. Contributions to help offset the cost of meals are essential to maintaining nutrition services for our community's older adults. Contributions from participants, their families, and others directly fund the meals we provide and are combined with federal, state, and local funds to provide this service.

The suggested contribution is «Unit_Cost_text» per meal. Our records show that you received «Total_Units» in «Month», which amounts to a total suggested contribution of «Cost_text». Please contribute what your budget allows. You will not be denied a meal if you are unable to contribute. We are committed to protecting the privacy of your contributions.

Contributions are accepted in:

- Check or Money Order: Please make any checks payable to: ADRC of Door County
- Cash: For security reasons, please be cautious about sending cash via mail.

You may mail contributions to 916 N. 14th Avenue, Sturgeon Bay, WI, 54235

If you have any questions or comments, contact Wendy Schubert at wshubert@co.door.wi.us or 920-746-2523.

Thank you for your support!

✂ Please return the bottom portion of this letter with your contribution.

Door County Nutrition Program Meal Summary for «Month»

Total Number of Meals Provided	Total Suggested Contribution
«Total_Units»	«Cost_text»

On the back side of this sheet, please write comments you would like to share with us about your meals (or attach a separate note if you wish)