

# Allegany Park and Shop Service Stores Shopping List

<p><b>Produce:</b></p> <p><input type="checkbox"/> <b>Veggies</b> _____</p> <p><input type="checkbox"/> Lettuce _____</p> <p><input type="checkbox"/> Carrots _____</p> <p><input type="checkbox"/> Broccoli _____</p> <p><input type="checkbox"/> Potatoes _____</p> <p><input type="checkbox"/> Onions _____</p> <p><input type="checkbox"/> Tomatoes _____</p> <p><input type="checkbox"/> <b>Fruits</b></p> <p><input type="checkbox"/> Apples _____</p> <p><input type="checkbox"/> Grapes _____</p> <p><input type="checkbox"/> Oranges _____</p> <p><input type="checkbox"/> Grapefruit _____</p> <p><input type="checkbox"/> Bananas _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>Deli:</b></p> <p><input type="checkbox"/> <b>Subs</b> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> <b>Pizza</b> _____</p> <p><input type="checkbox"/> Fish Fry (Fri) _____</p> <p><input type="checkbox"/> Cold Cuts _____</p> <p><input type="checkbox"/> Cheese _____</p> <p><input type="checkbox"/> Salads _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>Meat:</b></p> <p><input type="checkbox"/> <b>Pork</b> _____</p> <p><input type="checkbox"/> Chops _____</p> <p><input type="checkbox"/> Ham _____</p> <p><input type="checkbox"/> Sausage _____</p> <p><input type="checkbox"/> <b>Beef</b></p> <p><input type="checkbox"/> Ground _____</p> <p><input type="checkbox"/> Steaks _____</p> <p><input type="checkbox"/> Roasts _____</p> <p><input type="checkbox"/> <b>Chicken</b></p> <p><input type="checkbox"/> Breast _____</p> <p><input type="checkbox"/> LegsQtrs _____</p> <p><input type="checkbox"/> Whole _____</p> <p><input type="checkbox"/> Hot Dogs _____</p> <p><input type="checkbox"/> Bacon _____</p> <p><input type="checkbox"/> Cold Cuts _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
<p><b>Aisle 1:</b></p> <p><input type="checkbox"/> Box Dinners _____</p> <p><input type="checkbox"/> Rice/Beans _____</p> <p><input type="checkbox"/> Condiments _____</p> <p><input type="checkbox"/> Pickles _____</p> <p><input type="checkbox"/> Salad Drsg. _____</p> <p><input type="checkbox"/> Mayo _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>Aisle 2:</b></p> <p><input type="checkbox"/> Pasta _____</p> <p><input type="checkbox"/> Sauce _____</p> <p><input type="checkbox"/> Soups _____</p> <p><input type="checkbox"/> Canned Fruit _____</p> <p><input type="checkbox"/> Canned Vgs _____</p> <p><input type="checkbox"/> Gravy _____</p> <p><input type="checkbox"/> Potatoes _____</p> <p><input type="checkbox"/> Mexican _____</p> <p><input type="checkbox"/> Chinese _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>Aisle 3:</b></p> <p><input type="checkbox"/> Cereals _____</p> <p><input type="checkbox"/> Tuna _____</p> <p><input type="checkbox"/> Beans _____</p> <p><input type="checkbox"/> Juice _____</p> <p><input type="checkbox"/> Pancakes _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>

<p><b>Aisle 4:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Cake Mix _____</li> <li><input type="checkbox"/> Baking _____</li> <li><input type="checkbox"/> Sugar _____</li> <li><input type="checkbox"/> Spices _____</li> <li><input type="checkbox"/> Coffee _____</li> <li><input type="checkbox"/> Tea _____</li> <li><input type="checkbox"/> Cocoa _____</li> <li><input type="checkbox"/> Gelatin _____</li> <li><input type="checkbox"/> Plastic Bags _____</li> <li><input type="checkbox"/> Trash Bags _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Aisle 5:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Towels _____</li> <li><input type="checkbox"/> Tissues _____</li> <li><input type="checkbox"/> Toilet Paper _____</li> <li><input type="checkbox"/> Pet Food _____</li> <li><input type="checkbox"/> Litter _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Aisle 6:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Cleaning _____</li> <li><input type="checkbox"/> Dish Detergent _____</li> <li><input type="checkbox"/> Laundry Det _____</li> <li><input type="checkbox"/> Bleach _____</li> <li><input type="checkbox"/> Diapers _____</li> <li><input type="checkbox"/> Baby Food _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>
<p><b>Aisle 7:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Soft Drinks _____</li> <li><input type="checkbox"/> Nuts _____</li> <li><input type="checkbox"/> Candy _____</li> <li><input type="checkbox"/> Popcorn _____</li> <li><input type="checkbox"/> Chips _____</li> <li><input type="checkbox"/> Pretzels _____</li> <li><input type="checkbox"/> Snacks _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Aisle 8:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Bread _____</li> <li><input type="checkbox"/> Rolls _____</li> <li><input type="checkbox"/> Bagels _____</li> <li><input type="checkbox"/> Cookies _____</li> <li><input type="checkbox"/> Crackers _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Dairy:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Eggs _____</li> <li><input type="checkbox"/> Margarine _____</li> <li><input type="checkbox"/> Butter _____</li> <li><input type="checkbox"/> Cheese _____</li> <li><input type="checkbox"/> Dip/Sr Crm _____</li> <li><input type="checkbox"/> Yogurt _____</li> <li><input type="checkbox"/> Juice _____</li> <li><input type="checkbox"/> Milk _____</li> <li><input type="checkbox"/> Creamer _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>
<p><b>Frozen:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Froz Meals _____</li> <li><input type="checkbox"/> Veggies _____</li> <li><input type="checkbox"/> French Fries _____</li> <li><input type="checkbox"/> Waffles _____</li> <li><input type="checkbox"/> Juice _____</li> <li><input type="checkbox"/> Pies/Cakes _____</li> <li><input type="checkbox"/> Fruit _____</li> <li><input type="checkbox"/> Cool Whip _____</li> <li><input type="checkbox"/> Novelties _____</li> <li><input type="checkbox"/> Ice Cream _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Front Items:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Peanut Butter _____</li> <li><input type="checkbox"/> Jelly/Jam _____</li> <li><input type="checkbox"/> Donuts _____</li> <li><input type="checkbox"/> Pastries _____</li> <li><input type="checkbox"/> Candy Bars _____</li> <li><input type="checkbox"/> Gum _____</li> <li><input type="checkbox"/> Batteries _____</li> <li><input type="checkbox"/> Newspaper _____</li> <li><input type="checkbox"/> Bottled Water _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	<p><b>Health/Beauty:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Hair Products _____</li> <li><input type="checkbox"/> Cold Medicine _____</li> <li><input type="checkbox"/> Pain Reliever _____</li> <li><input type="checkbox"/> Tooth Paste _____</li> <li><input type="checkbox"/> Mouthwash _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>