

Did you know 5.3 million Americans over 60 are food insecure? Thirty percent of these seniors are low-income and choose prescription medicine instead of food. Meals on Wheels wants to end hunger and malnutrition during this lifetime. Contrary to popular belief, this is not done through calories but rather through a calculated look at each individual's medical picture and a strategic plan for the type of meals that will improve their health. At Meals on Wheels, we know, **FOOD IS MEDICINE.**

We are privately funded and accommodate low-income clients through funds raised by monthly membership. Translated: Meals on Wheels is NOT a government agency. **WE NEED YOUR HELP.**

When you become a Supper Club member you help eradicate food insecurity for a low-income, homebound person. Your membership provides them with medically-tailored meals which are made to accommodate their individual diet plan.



Eskenazi Press Release



Generational Jump





Food Pantry

The Sol Center

What are medically-tailored meals? Medically-tailored meals are physician prescribed meals that take into consideration the health needs of the individual person. These meals are prescribed by the client's doctor. **EVERY** meal delivered through Meals on Wheels is prepared specifically for the individual client. These meals include:

*Low Sodium *Diabetic *Renal *Puree *Mechanical Soft *Heart Healthy *Lactose Free *Gluten Free

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	When you join the Meals on Wheels Supper Club, a homebound senior or disabled person receives medically-tailored meals.			
SUPPER CLUB! monthly commitment meals provided	\$15 One week of 10 medically- tailored meals	\$30 Two weeks of 20 medically- tailored meals tailored	\$45 Three weeks of 30 medically- tailored meals	\$60 One month of 40 medically- tailored meals
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Yes, I would like to become a Supper Clu	b member!			
Please check your monthly commitment:	\$15	\$30	\$45	\$60
Check one of the following payment options I give Meals on Wheels permssion to char		t on the let 15th	or 30th (circle	onel
If scheduled deduction falls on weekend	-			,
I pledge to set up a monthly deduction w	vith my banking	g institution.		
I would like to make a one-time donation	n of \$			
Jame:				
treet Address:				
City: Sto	ate:	_ Zip Code:		
lome Phone:	Ce	ell:		
mail:				
Credit Card: (circle one) MasterCard, \	∕isa, Discover	-		
Credit Card Number:		Exp	iration Date: .	
Name as it appears on the card:				

** Meals on Wheels of Central Indiana is a 501 (c) (3) charitable organization. All donations are tax deductible. Thank you letters are mailed each December. By signing, you authorize Meals on Wheels to debit your account on a monthly basis. Automatic membership renewals are processed after the twelfth month of membership in the current cycle.

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