Private Pay Meals on Wheels Contract

Client Name: _____

Address: _____

Phone: _____

As a Private Pay Client of the Meals on Wheels Program, you must pay for each meal delivered to your home. Failure to make payments will result in the termination of service.

The cost of each meal is **$9.50.** This amount will be billed to you for each meal reported as delivered to you. Invoices for the previous month will be sent on the 15th of each month. Payment will be received at Senior Services for South Sound by the 10th of the following month. The price is subject to change per the Area Agency on Aging's instructions; clients will be notified if and when a change will occur.

If your circumstances change or you want to discontinue meals, please contact Stephanie at 360-586-6181 x 124.

Thank you for letting us serve you.

_____ _____
Client Signature Date

Number of meals per week?_____

_____
Dietary restrictions/food allergies?