

Cafeteria Order Form

Date: / /

Child's Name	Grade	# of Lunch Cards* (5/card)	Total Lunch	# of Milk Cards (5/Card)	Total Milk	Total
		____ X \$19.00 =		____ X \$3.25 =		
		____ X \$19.00 =		____ X \$3.25 =		
		____ X \$19.00 =		____ X \$3.25 =		
		____ X \$19.00 =		____ X \$3.25 =		
*Milk is included in the Lunch Card purchase.						
Circle One: Cash/Check					Check#: _____	Total

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