



Family or Staff Name: _____

Menu:

Student Name(s):

| | | | | | | | Total \$ |
|-----------|--|----------|----------|----------|----------|----------------|----------------------|
| August 17 | Pasta with Meat Sauce Garlic Bread Green Beans Pears | 1) _____ | 2) _____ | 3) _____ | 4) _____ | \$4.00 x _____ | <input type="text"/> |
| August 24 | Chicken Tenders French Fries Steamed Broccoli Fruit Salad | 1) _____ | 2) _____ | 3) _____ | 4) _____ | \$4.00 x _____ | <input type="text"/> |
| August 31 | Maid Rite Potato Chips Corn Mandarin Oranges | 1) _____ | 2) _____ | 3) _____ | 4) _____ | \$4.00 x _____ | <input type="text"/> |

Order Form & Payment Due: A.M. August 11, 2023

Credit Amount if Applicable _____

Meals are \$4.00 each (extras are not optional).

Please provide a water bottle as drinks will not be served unless noted.

Grand Total: \$