

# PRE-PAID MEAL ACCOUNT PAYMENT

*Please Print Clearly*

School \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name: \_\_\_\_\_ ID/PIN #: \_\_\_\_\_ Teacher: \_\_\_\_\_ Amount: \_\_\_\_\_

Student Name: \_\_\_\_\_ ID/PIN #: \_\_\_\_\_ Teacher: \_\_\_\_\_ Amount: \_\_\_\_\_

Student Name: \_\_\_\_\_ ID/PIN #: \_\_\_\_\_ Teacher: \_\_\_\_\_ Amount: \_\_\_\_\_

Student Name: \_\_\_\_\_ ID/PIN #: \_\_\_\_\_ Teacher: \_\_\_\_\_ Amount: \_\_\_\_\_

Please write additional students on back if necessary

Please make checks payable to **Blackfoot School Lunch** and **WRITE STUDENT'S PIN # ON CHECK.**

Seal Envelope and return to Cafeteria Manager at School Site