## **Prepayment Order Form**

	Solito OT
ARKLAN	DLAKE

Student Name:		
Teacher	Grado:	

## Parent / Guardian Signature:

## Instructions:

If you wish to pre-order, please complete the following calendar for the month of January. Indicate white milk with a  $\underline{\mathbf{w}}$ , chocolate milk with a  $\underline{\mathbf{c}}$ , and specify the quantity on the appropriate days. While we will still accept daily orders for milk and hot dogs, we encourage you to consider this option, as it will help facilitate our ordering and availability.

Monday	Tuesday	Wednesday	Thursday	Friday
10	11	12 Qty.:	13	14 Qty.:
17	18	19 Qty.:	20	21 Qty.:
24	25	26 Subway Lunch Please complete the order form.	27	28 Qty.:
31 Professional Activity Day				

Total # of <i>whit</i> e milk	 x \$ 1.00	=
Total # of <i>chocolat</i> e milk	 x \$ 1.00	=
Total # of hot dogs	 x \$ 1.00	=
Total # of <i>pizza</i>	 x \$ 2.00	=
Snack Program Remittance		=

Note: Please return this form to the school by 9:00 a.m. on Friday, Jan. 7th.

Overall Total