

St. Jerome School Milk Program & Hot Lunches...



Prepayment Order Form

Student Name: _____









Teacher: _____

Grade: _____

Parent / Guardian Signature: _____

Instructions:

If you wish to pre-order, please complete the following calendar for the month of April. Indicate white milk with a w, chocolate milk with a 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
			1	2 Good Friday
5 Easter Monday	6	7  Qty.: _____	8	9  Qty.: _____
12	13	14  Qty.: _____	15	16  Qty.: _____
19 P. D. Day	20	21  Qty.: _____	22	23  Qty.: _____
26	27	28  Qty.: _____	29	30  Qty.: _____

Total # of *white* milk _____ x 0.75 ¢ = _____

Total # of *chocolate* milk _____ x 0.75 ¢ = _____

Total # of *hot dogs* _____ x \$ 1.00 = _____

Total # of *pizza* _____ x \$ 1.75 = _____

Snack Program Remittance _____ = _____

Overall Total = _____

Note: Please return this form to the school by Wednesday, Mar. 31st.