

## Saint Patrick Cathedral School Hot Lunch Program

<b>Name</b> _____		<b>Grade</b> _____		
For the Week of _____ / _____ / _____ month      day      year				
Check ( x ) your selection		Flavor of Milk for the Week <b>White</b> <b>Chocolate</b> <b>Low Fat</b>		
<b>Day</b>	<b>Lunch \$2.50 (includes milk)</b>	<b>Dates of Credit</b>	<b>Milk Only \$0.40</b>	<b>Date of Credit</b>
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Total Due \$ _____		Amount enclosed \$ _____		

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**Total Amount Enclosed if Paying for the Month: \$ \_\_\_\_\_**