

Abbey Food Service

Student Name: _____

| Week of | Monday | Tuesday | Wednesday | Thursday | Friday | Total Cost |
|---------------------------------|--------|---------|-----------|----------|--------|------------|
| Breakfast | | | | | | |
| Snack | | | | | | |
| Snack Milk Only | | | | | | |
| Lunch (Main Entrée) | | | | | | |
| Option #1 Turkey Sandwich | | | | | | |
| Option #2 Peanut Butter & Jelly | | | | | | |
| Option #3 Ham Sandwich | | | | | | |
| Lunch Milk Only | | | | | | |

Breakfast

Paid \$1.60
Reduced Free

Lunch

Paid \$2.30
Reduced Free

Milk Only

\$0.50

Total Amount Due _____

Make checks payable to: **RNESU Food Service Program** Please return order form and payment to Suzanne Denis by 9:00 am Monday morning or first day of attendance for the week. This form can be downloaded from the Whiting Website – whiting.rnesu.org under School Forms.