

Student Name:

Monthly Breakfast and Lunch Order Form **OCTOBER**



Grade:

Please CIRCLE YOUR CHOICES, complete this form and return it to the office for the full month by FRIDAY, SEPTEMBER 20th.

Monday	Tuesday	Wednesday	Thursday	Friday
9/30/2024	10/1/2024	10/2/2024	10/3/2024	10/4/2024
Breakfast	Breakfast	Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch	Lunch	Lunch
		SCHOOL COUNTY NON-UNITOTIM		
10/7/2024	10/8/2024	10/9/2024	10/10/2024	10/11/2024
Breakfast	Breakfast	Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch	Lunch	Lunch
10/14/2024	10/15/2024	10/16/2024	10/17/2024	10/18/2024
Breakfast	Breakfast	Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch	Lunch	Lunch
10/21/2024	10/22/2024	10/23/2024	10/24/2024	10/25/2024
Breakfast	Breakfast	Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch	Lunch	Lunch
10/28/2024	10/29/2024	10/30/2024	10/31/2024	11/1/2024
Breakfast	Breakfast	Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch	Lunch	HALF DAY Treat
	Total Breakfast:	Quantity	Price Each Free*	
			Free*	

Please fill out and return for ordering purposes. One form per child. Thank you!

Total Lunch: