



PRE-PAID LUNCH PAYMENT SLIP

Please Print Clearly

St. Christopher School

Date: ___/___/___

Student Name: _____

Homeroom: _____

Amount Enclosed \$ _____

Number of Lunches _____

Please make checks payable to Sweet Home Lunch Program and **WRITE STUDENT'S LAST NAME AND HOMEROOM # ON CHECK.** Lunches are \$2.40 each.



PRE-PAID LUNCH PAYMENT SLIP

Please Print Clearly

St. Christopher School

Date: ___/___/___

Student Name: _____

Homeroom: _____

Amount Enclosed \$ _____

Number of Lunches _____

Please make checks payable to Sweet Home Lunch Program and **WRITE STUDENT'S LAST NAME AND HOMEROOM # ON CHECK.** Lunches are \$2.40 each.