Palo Verde Unified School District

Nutrition Services

REQUEST FOR REFUND OF PREPAID LUNCH MONEY

School Name: Click or tap here to enter text.

Student Name: Click or tap here to enter text.

Student ID: Click or tap here to enter text.

Student’s Grade: Click or tap here to enter text.

Amount of prepaid lunch money to be refunded: $Click or tap here to enter text.

Requested by: Click or tap here to enter text. Date: Click or tap to enter a date.

Address: Click or tap here to enter text. Phone: Click or tap here to enter text.

\*Checks will be mailed to the above address

**Return to Nutrition Services Department or email:** **mclayton@pvusd.us**

|  |
| --- |
| Nutrition Services Department Only\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Authorized Signature |