2018 Yearly Milk Order

USE THIS PART OF THE FORM TO ORDER MILK FOR THE REST OF THE YEAR

Please return your order by Friday, Oct 26th , 2018 .

I am ordering **milk** for _____ Grade _____.
(Name)

Please indicate your choice: [ ] Low Fat or [ ] Chocolate

[ ] I am including $32.50 (130 days X .25), for the ***rest of the year***.

[ ] cash [ ] check #_____

October Milk Order

Please return your order by Friday, October 26th 2018.

I am ordering **milk** for _____ Grade _____.
(Name)

Please indicate your choice: [ ] Low Fat or [ ] Chocolate

[ ] I am including $4.25 (.25 x 17 days), for ***November*** 2018.

[ ] cash [ ] check #_____