

Milk Order Form

April-June 2008

Please write an "M" on the days for which you are ordering milk.

New milk orders, additions and cancellations must be received in the office by the **Thursday** prior to the week for which you are requesting milk.

Child's Name: _____

Child's Teacher: _____

Number of Milk

_____ x \$0.45 = _____

____ Please bill me

____ I have enclosed a check

Check # _____

Shaded days are not available for Milk orders.



April

Mon	Tues	Wed	Thurs	Fri
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30		

18 days

May

Mon	Tues	Wed	Thurs	Fri
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30

21 days

June

Mon	Tues	Wed	Thurs	Fri
2	3	4	5	6
9	10	11	12	13
16	17	18	19	

10 days



49 total days