



## Meal Account Fund Transfer Request

If you have an account in MyPaymentsPlus, please disable/turn off autopay for your student before submitting this form. Completed form may be emailed to [food.service@stpsb.org](mailto:food.service@stpsb.org) or mailed to St. Tammany Parish Public Schools, Attn: SFS, 321 N. Theard St., Covington, LA 70433.

Student Name: \_\_\_\_\_

Student Id Number: \_\_\_\_\_

Student School Name: \_\_\_\_\_

Transfer Amount: \_\_\_\_\_

Transfer to Student Name: \_\_\_\_\_

Transfer to Student Id Number: \_\_\_\_\_

Transfer to School Name: \_\_\_\_\_

Signature and date: \_\_\_\_\_