

**Lunch Account Cash Deposit Form**

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Student ID # \_\_\_\_\_ School \_\_\_\_\_

**For Elementary Students:**

Teacher \_\_\_\_\_ Grade \_\_\_\_\_

Amount of Cash Deposit: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Cashier's name (please print): \_\_\_\_\_

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