



## REQUEST FOR RETURN OF LUNCH ACCOUNT FUNDS

I, \_\_\_\_\_ hereby request that the Aberdeen Catholic School System refund the remaining balance of \_\_\_\_\_'s lunch account in the amount of \$\_\_\_\_\_. Please send check to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signed by Parent or Guardian