







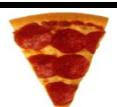

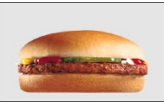








Sep '09

Lunch Menu

K-8

Define Foods

Monday		Tuesday		Wednesday		Thursday		Friday	
SNACK DAY ONLY		SNACK DAY ONLY		SNACK DAY ONLY		SNACK DAY ONLY		SNACK DAY ONLY	
7		8	Hamburger	9	Quesadilla	10	Chicken Nuggets	11	Pizza
HOLIDAY		Chips Salad 		Fruit Salad 		Fruit Salad 		Fruit Salad 	
14	Hot Dog	15	Hamburger	16	Quesadilla	17	Chicken Nuggets	18	Pizza
Chips Salad 		Chips Salad 		Fruit Salad 		Fruit Salad 		Fruit Salad 	
21	Hot Dog	22	Hamburger	23	Quesadilla	24	Chicken Nuggets	25	Pizza
Chips Salad 		Chips Salad 		Fruit Salad 		Fruit Salad 		Fruit Salad 	
28	Hot Dog	29	Hamburger	30	Quesadilla				
Chips Salad 		Chips Salad 		Fruit Salad 					

ALL MEALS INCLUDE YOUR CHOICE OF: WATER, MILK IN A CUP, OR JUICE

PAYMENT: Pre-paid lunches are \$3.75 (Define Foods is not responsible for ANY lost cash orders). **Please make checks payable to "Define Foods."** Please return by September 4, 2009. Emergency lunches are \$5.00. You must pay the \$5.00 the following day.

CHECKS: **There will be a \$25 service fee on returned checks.**

ABSENCE & CREDITS If your child will be absent please call Define Foods and leave a message at **760-373-0514** (Dulce) or **760-207-4141** (Jason) to request credit. YOU MUST CALL PRIOR TO 8 AM THE MORNING OF THE ABSENCE. No exceptions. Credits must be used before the end of the school year. Field Trips & Pre-planned events will not be credited.

Due September 4 (Cut here and return bottom portion with payment)

ONE ORDER FORM PER CHILD PLEASE

CHILD NAME: _____ PHONE #: _____
 GRADE: _____ TEACHER NAME: _____ ROOM: _____

PLEASE CIRCLE THE DATES THAT YOU WILL PREPAY.

M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F
X	X	X	X	X	X	8	9	10	11	14	15	16	17	18	21	22	23	24	25	28	29	30		

1- \$3.75	2- \$7.50	3- \$11.25	4- \$15.00	5- \$18.75	6- \$22.50	7- \$26.25	8- \$30.00	9- \$33.75	10- \$37.50
11- \$41.25	12- \$45.00	13- \$48.75	14- \$52.50	15- \$56.25	16- \$60.00	17- \$63.75			
								Total:	\$63.75

CHECK #: _____ AMOUNT: _____ DATE: _____

PLEASE NOTIFY CATERER OF ANY FOOD ALLERGIES