



# Snoqualmie Valley School District 410

Food Services Department  
8001 Silva Avenue SE, PO Box 400, Snoqualmie, WA 98065  
Phone (425) 831-8030 FAX (425) 831-8041

## Student Lunch Money Refund Request



Please complete the following information for a refund on your child's lunch account. This is required before a refund can be processed. A refund may take 2-6 weeks to receive.

If you have any questions please call 425-831-8030.

Student Name: _____ School: _____ Student ID#: _____ Grade: _____	<b>Balance on Account</b>  Amount:\$ _____
Student Name: _____ School: _____ Student ID#: _____ Grade: _____	<b>Balance on Account</b>  Amount:\$ _____
Student Name: _____ School: _____ Student ID#: _____ Grade: _____	<b>Balance on Account</b>  Amount:\$ _____
Reason: _____ _____	<b>Total From All Accounts</b>  \$ _____

(Check is only payable to Parent or Guardian)

Parent or Guardian: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*For Office Use Only:*

Amt Taken Off Account by FS Secretary \_\_\_\_\_ Date: \_\_\_\_\_  
\*Copy of Meal Statement is attached  
Food Service Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Business Office Approval: \_\_\_\_\_ Date: \_\_\_\_\_