

Single Check Distribution List

2025-2026 School Year

Please send cash or write a single check for the items below:

Please note: Extended Care, Hot Lunch and Spiritwear should be paid for seperately.

Family Name: _____

Item	Amount	Quantity	Amount Paid
Milk K3 <i>(Tuesdays, Wednesdays & Thursdays)</i>	\$12.00	<input type="text"/>	\$ <input type="text"/>
Milk K4 -8th Grade <i>PER STUDENT</i>	\$20.00	<input type="text"/>	\$ <input type="text"/>
Home and School Dues <i>PER FAMILY</i>	\$50.00	<input type="text"/>	\$ <input type="text"/>
Assignment Notebooks <i>Grades 3-8 ONLY</i>	\$5.00	<input type="text"/>	\$ <input type="text"/>
Headphones <i>K5, New Student or New Ones Needed</i>	\$5.00	<input type="text"/>	\$ <input type="text"/>
Recorder Grade 4 ONLY <i>(if they do not have one)</i>	\$5.00	<input type="text"/>	\$ <input type="text"/>

Total Paid

\$

Please complete form and return with back-to-school paperwork. Cash or check payable to St. Joseph School.

Office use only: Date Received: _____ Amount Paid: _____ Cash: _____ Check Number: _____