CLASSROOM PARTY COMING UP? LET CHILD NUTRITION DO THE WORK!

PARENT/GUARDIAN/TEACHER NAME REQUESTING ORDER: ____

| | TEACHER'S NAME: | CLASSROOM #: | | | | |
|---|---|--------------|-------|------------|-----|--------------|
| | DATE OF PARTY: TIME OF | | ARTY: | | | |
| | COMPLETED FORMS & PAYMENT MUST BE TURNED INTO THE CAFETERIA MANAGER 3 WEEKS | | | | | |
| | PRIOR TO THE DATE REQUESTED FOR ORDERING AND DELIVERY PURPOSES. | | | | | |
| | # | REQUESTING | CO | ST FOR ONE | TOI | TAL PER ITEM |
| • | 16" CHEESE PIZZA (8 SLICES) | PIES | X | \$12.00 | = | \$ |
| • | 16" PEPPERONI* PIZZA (8 SLICES) | PIES | X | \$15.00 | = | \$ |
| • | FRESH FRUIT TRAY WITH DIP (SERVES 30) | TRAY(S) | X | \$50.00 | = | \$ |
| • | FRESH VEGETABLE TRAY WITH DIP (SERVES 30) | TRAY(S) | X | \$38.00 | = | \$ |
| • | OUNCE BUG BITE GRAHAM CRACKER BAG | BAGS | X | \$1.25 | = | \$ |
| • | 1 OUNCE BAGGED POTATO CHIPS | BAGS | X | \$1.25 | = | \$ |
| • | 1 OUNCE BAGGED NACHO CHEESE DORITOS | BAGS | X | \$1.25 | = | \$ |
| • | 3 OUNCE ICE CREAM SUNDAE CUP | CUPS | X | \$1.50 | = | \$ |
| • | 4 OUNCE 100% FRUIT JUICE BOX | JUICES | X | \$0.75 | = | \$ |
| • | 8 OUNCE WATER BOTTLE | BOTTLES | X | \$0.75 | = | \$ |
| | | | | | | |

FORMS OF PAYMENT ACCEPTED INCLUDE CASH AND CHECK.
CHECKS CAN BE MADE PAYABLE TO:
SMYRNA SCHOOL DISTRICT CAFETERIA

TOTAL DUE TO CAFETERIA MANAGER \$

*TURKEY PEPPERONIS ARE USED





2024/2025 School Year Cafeteria Managers

Smyrna High School: Mary Hecker

Email: Mary.Hecker@smyrna.k12.de.us

Phone: (302) 653-8958

• Smyrna Middle School: Jamie Gilbert

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Phone: (302) 653-2768

• Clayton Intermediate School: Linda Voshell

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Phone: (302) 659-6407

• JBM Intermediate School: Janet Leskovar

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• Clayton Elementary School: Shannon Miller

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• North Smyrna Elementary School: Emily Bantom

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• Smyrna Elementary School: Samantha Norvell

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Phone: (302) 659-6284

• Sunnyside Elementary School: Anastasia Jacobs

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:

U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

Program.Intake@usda.gov

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