



KILLEEN INDEPENDENT SCHOOL DISTRICT

200 North W.S. Young Drive, Killeen, Texas 76543
P.O. Box 967, Killeen, Texas 76540-0967
(254) 336-0000

Dr. Jo Ann Fey
Superintendent

The Killeen Independent School District School Nutrition Department is requesting a response as to the distribution of any remaining school lunch account balance after your student is **withdrawn or graduated** from the district. Please contact the school nutrition department at (254)336-0775 if you have any questions.

Please indicate your choice below and return to the campus cafeteria, the address above or the email below.

Please sign and date your response below.

Student Name: _____

Student ID#: _____

Student Campus: _____

Please indicate below your choice for distribution of these funds. Return by email (below), return to cafeteria or mail to the address above. If a choice is not returned, you will periodically continue to receive these letters.

_____ Transfer funds to: Student Name _____ Student ID# _____

_____ I do not want these funds. Please donate funds to the KISD Charged Lunch Program.

_____ I do not want these funds. Please donate funds to the KISD Education Foundation.

_____ Return these funds to me, issue a check and mail to:

Address: _____

Parent/Guardian Signature

Date

Parent/Guardian Printed Name

Phone Number

Thank you,

Unclaimed.Property@killeenisd.org