

**CITY OF PEMBROKE PINES  
CHARTER MIDDLE/HIGH SCHOOL  
CAFETERIA BALANCE REQUEST**

**PARENT:** \_\_\_\_\_

**STUDENT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Check Option Below:**

**Refund Amount:** \_\_\_\_\_

**Transfer Amount:** \_\_\_\_\_

Sibling Name: \_\_\_\_\_

Campus: \_\_\_\_\_

**Donation Amount:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**\*Student Signature** (Graduating Senior): \_\_\_\_\_

**Date:** \_\_\_\_\_

**For Office Use Only:**

**REASON:**

**Withdrawn**

**Graduate**

**AMOUNT:** \_\_\_\_\_

**VENDOR:**

ONE TIME VENDOR

**ACCOUNT:**

172-000-0000-223005-2413-000-0000

**BOOKKEEPER:**

\_\_\_\_\_  
Bookkeeper Signature

**APPROVAL:**

\_\_\_\_\_  
Approval Signature

For account balance visit:  
[www.2.mypaymentsplus.com](http://www.2.mypaymentsplus.com)

\*Student signature is only required if student is a graduating senior and balance is less than \$5.