All balances (positive & negative) carry over to the following year.

Refunds may take up to four weeks to process.

**Refund or Account Transfer:**

A. Please complete the top portion of the attached refund/transfer form and send it to the Food & Nutrition Services Office. The completed form can be mailed to Food & Nutrition Services Office, Attn: Valerie Dugan at 1812 27th Street East, Bradenton, FL 34208 or emailed to Valerie Dugan at duganv@manateeschools.net.

B. If the student is a graduating senior and they have a sibling in a district public school, we can transfer their positive balance to the sibling. If this is the case, you will complete the bottom half of the refund/transfer form and send it to the Food & Nutrition Services Office via one of the same methods used for refunds.

**Payments:**

If a parent would like to make a payment to their student's account, they can make an electronic payment using My Payments Plus or they can mail a check to the district office.

A. My Payments Plus is a secure website https://www.mypaymentsplus.com/welcome. The parent will need to create an account if they do not already have one and will need their student’s ID number to add them to an account.

B. If they choose to mail a check, they can send it to the Food & Nutrition Services Office, Attn: Valerie Dugan at 1812 27th Street East, Bradenton, FL 34208. Please note that we do not accept starter checks (must be pre-printed) and the check must have the student’s name and/or ID written in the memo section.

Food & Nutrition Services
1812 27th Street E., Bradenton, FL 34208
(941) 739-5700
ACCOUNT REFUND/TRANSFER FORM

We must have a parent request in writing to process a refund or transfer of funds* on school meal accounts.

To request a refund please include the following information:

Student Name: ______________________________
School: ________________________________
Student ID# ______________________________
Refund Amount $ __________________

Parent or Guardian Name to address the refund to: ________________________________
Phone Number/Email of person requesting refund: ________________________________
Mailing address for refund check to be mailed to: ________________________________
___________________________________________________________________________

Reason for Refund: ___________________________________________________________
Parent Signature: __________________________________________________________________

To transfer funds from one account to another please supply the following information:

Transfer funds from: Student Name: ______________________________
School: ________________________________
Student ID#: ______________________________
Transfer funds to: Student Name: ______________________________
School: ________________________________
Student ID#: ______________________________
Full Balance or Other Amount ________ (Circle One & Enter Amount, if Other)
Reason for Transfer: ___________________________________________________________

*Please Note: Money cannot be transferred to or from a student that is not attending a Manatee County Public School (i.e. Rowlett Academy, Rowlett Middle, Manatee School for the Arts, Manatee Charter).