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In order for us to get to serve you all better, we ask that you take a few minutes to fill out the following questionnaire. Please return this to the office at your earliest convenience.

Thank You,

Your P.T.O.

Name Peggy Blue

Grade Level/Position Kitchen Manager Elementary

Birthday (MM/DD) 8-6-45

What is your favorite...

Color Green

Fruit Nectarine

Snack chips

Beverage Green Tea (diet)

Candy chocolate

Flower Rose

Hobby computer games

Wants/Needs for your classroom/office

Need a copier for my office.