

UGA FOOD SERVICES BOX BREAKFAST ORDER

CAMP NAME \_\_\_\_\_

CONTACT NAME & PHONE: WORK \_\_\_\_\_ CELL \_\_\_\_\_

DATE NEEDED: \_\_\_\_\_ TIME NEEDED: \_\_\_\_\_ PICKUP \_\_\_\_\_ DELIVERY \_\_\_\_\_

For Delivery: Site/Address: \_\_\_\_\_

TOTAL BOX BREAKFASTS NEEDED: \_\_\_\_\_

# of BAGELS

PLAIN \_\_\_\_\_

WHOLE WHEAT \_\_\_\_\_

CINNAMON & RAISIN \_\_\_\_\_

VERY BERRY \_\_\_\_\_

TOTAL BAGELS \_\_\_\_\_ *(equal to total number of boxes ordered)*

# of SPREADS

CREAM CHEESE \_\_\_\_\_

BUTTER \_\_\_\_\_

# of FRUIT

RED, GREEN, OR  
YELLOW APPLE \_\_\_\_\_

BANANA \_\_\_\_\_

ORANGE \_\_\_\_\_

TOTAL FRUIT \_\_\_\_\_ *(equal to total number of boxes ordered)*

# of BEVERAGES

APPLE JUICE \_\_\_\_\_

ORANGE JUICE \_\_\_\_\_

Water \_\_\_\_\_

Power-Ade \_\_\_\_\_

TOTAL BEVERAGES \_\_\_\_\_ *(equal to total number of boxes ordered)*

Return to: Sandi Behr  
UGA Food Services  
Food Service Admin Office  
200 W Green Street  
Campus Mail  
OR  
Fax to 706-542-7137