



DOWNSTATE
HEALTH SCIENCES UNIVERSITY

Batch #: _____

Date Entered: _____

Initials: _____

STUDENT CENTER
SODA ORDER

Name _____ Phone _____

Group _____ Acct _____

Date/Time needed: ____/____/____ _____ AM PM (circle one)

Signature _____

Please note: Orders will
not be delivered outside
the Student Center.

They will be available
for pick-up at the
Student Center Main Desk.

Comments:

	Pepsi – Cans	\$0.50	
	Diet Pepsi – Cans	\$0.50	
	Water Bottles	\$0.50	
	Ginger Ale – Cans	\$0.50	
	Flavored Seltzer - Cans	\$0.50	
	Cups - Sleeve of 50	\$2.00	
	Napkins - pack of 50	\$1.00	
	Forks - 50	\$2.00	
	Spoons - 50	\$2.00	
	Knives - 50	\$2.00	
	Small plates - 50	\$2.00	
	Large plates - 30	\$2.00	

Total \$ _____

Please deposit funds to SCGB Acct: 40-41002-015

Acct: _____