Smoothie Bike Ingredient Kit Order Form and Billing Log

Please bring completed order form/billing log to Cafeteria Supervisor to place your ingredient kit order. Two week lead time required.

School: _____

Budget Code #: _____ - _____ - _____ - _____ - _____ - _____ or [ ] Cash/Check

Contact Name: _____

Phone Number: _____

Signature: _____ Date: _____

Event/Group Information: _____

Description	Price	Quantity	Dollar Total
Smoothie Bike Ingredients—$8.25/per 10 servings	$8.25		
		Total:	

Saint Paul Public Schools
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Nutrition Services Staff Only: Please email completed billing log to Leighton.Swanson@spps.org and Lynn.Broberg@spps.org for payment processing.