

Practice Product Request Form

Directions: Below is a practice order form that the Lowcountry Food Bank has used in the past. Fill it in like you would to create an order, while also doing your best to create a balanced pantry that reflects a MyPlate. You will submit after completion.

AGENCY CODE:

AGENCY NAME:

**All items subject to availability $\ -$ All perishable product is first-come first serve **

IF REQUESTING PALLET(S), PLEASE INDICATE BY WRITING "P" NEXT TO THE QUANTITY **Please make sure you bring a tarp on raining days**

QUANTITY (case or weight)	DESCRIPTION	F2E	Shared Maintenance (per pound)	CODE
	PRODUCE		\$0.00	04
	BREAD / PASTRY		\$0.00	06A
	Cabbage (50 lb bag)	F2E	\$0.00	PR0301
	Cantaloupe (full pallet only)	F2E	\$0.00	Bulk
	Sweet Potatoes (40 lb Box)	F2E	\$0.00	PR1660
	CHILLED PRODUCT: MUST HAVE A FREEZ	ER BLANKET IN	ORDER TO RECEIVE	-
QUANTITY	DESCRIPTION		SMF	CODE (WAREHOUSE USE
	MISCELLANEOUS DAIRY		\$0.03	03
	MILK		\$0.03	03
	DELI		\$0.08	02 / 02D
	FROZEN GROCERY		\$0.18	02
	MEAT		\$0.18	02M
USDA PROD	UCT: MUST BE A USDA AGENCY I	ORDER T	O RECEIVE ITEMS LI	STED BELOW
QUANTITY	DESCRIPTION		LIMIT	CODE (WAREHOUSE USE)
	Frozen Blueberries (12/2.5oz)	F2E		USDA110623
	Butter (36 x 1 lb)		10	USDA100001
	Fresh Eggs (15 Dozen)	F2E	10	USDA100936
	Milk (9/64 oz)	F2E		USDA111174