RED ROCKS COMMUNITY COLLEGE

FOOD SERVICES - CATERING REQUEST

- 1. Complete an Official Function Form (must be approved by VP or President).
- 2. Submit this form to the Food Services Office (room 1461) 72 business hour notice minimum.
- 3. Food Services will submit an invoice to the Department, authorized ORG owner must sign invoice as "Buyer Signature".
- 4. Return invoice to Business Services Accounts Payable, Box 16 with original Official Function, agenda, sign-in sheet, etc.

Date of Request:				Date of Event	:			
Name of Group:				Location:	Lakew	ood	Arvada	
Contact Person:				Room:				
Phone Number:				Set Up Time:				
Address:				Time of Event	t:			
State Purchase (tax exempt):	Yes	No		Clearing Time	2 :			
Personal Purchase (taxable):	Yes	No	No Number of Guests:					
BEVERAGES: Please mark all that apply. If only ordering beverages, please indicate amount desired.								
Coffee			Decaf Coffee		ı	Hot Tea		
Orange Juice Bottled Water			ſ	Bottled Soda				
Lemonade			Fruit Punch		I	ced Tea		
Hot Chocolate			Hot Cider		,	Water		
NATALL.								

MENU:

For Food Services Only: Approved:	Decline:
-----------------------------------	----------

Revised: September 2016