## 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	t:			
Name of Group:				Location:	Lakewo	ood	Arvada	
Contact Person:				Room:				
Phone Number:				Set Up Time:				
Address:				Time of Event	t:			
State Purchase (tax exempt):	Yes	No		Clearing Time	<b>:</b> :			
Personal Purchase (taxable):	Yes	No		Number of Guests:				
<b>BEVERAGES:</b> Please mark all that apply. If only ordering beverages, please indicate amount desired.								
Coffee			Decaf Coffee		H	Hot Tea		
Orange Juice			Bottled Water		E	Bottled Sod	а	
Lemonade			Fruit Punch		I	ced Tea		
Hot Chocolate			Hot Cider		١	Nater		

**MENU:** 

For Food Services Only: Approved:	Decline:
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