

Office Name:	Cost Centre No.:
Requesting Official: Telephone:	
Address:	
Meeting Room: Date:_	Time:
No. Attending: Contact / Organizer:	
Beverages: Coffee (10 cup air-pot) Tea (10 cup air-pot) Juice Iced Tea Fruitopia Bottled Water Pop Milk	
Baked Goods: Muffins Apple, Cherry, Cinnamon Danish Apple or Raspberry Strudel Chocolate or Cheese Croissant Tea Biscuits Bagels Butter or Pecan Tarts Gourmet Cookies	
Lunch: Veggie Platter with Dip Fresh Fruit Platter Dessert Squares Garden Fresh Salad Pasta Salad Potato Salad Deli Sandwiches Hot Entrées	