

CATERING SERVICE CONTRACT & BILLING INFORMATION

Date of Service		Set up Time	
Event Name		Location of Event	
Contact Person		Guaranteed Count	
Email Address		Group/Department	
Phone Number		Event Start Time	

Billing Information		Contact & Address to Send Service Invoice	
Person or Organization		Name:	
Budget/Cost Center		Street/MS:	
Contact Person		City	
Phone Number		Zip Code:	
Can Group Incr Order?	YES	NO	Phone Number:

SERVICE DETAILS: Service will be set up in designated location requested by customer. Any authorized request for additional products will result in additional charges to the final invoice. Person submitting request agrees to policies and procedures outlined in NS Catering Manual.

PAYMENT DETAILS: Signed contract must be submitted no later than 3 days prior to event date. Payment is due within 30 days of invoice/statement date and must be submitted to: Nutrition Services, Seattle Public Schools, MS 32-372, PO Box 34165, Seattle, WA 98124

AUTHORIZED SIGNATURE FOR DEPARTMENT/GROUP EXPENDITURE	AUTHORIZED SIGNATURE FOR BUDGET APPROVAL
Signature & Date	Signature & Date

CATERING SERVICE ORDER AND SET-UP INFORMATION

Specific Instructions or Requests from Customer:	
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Food Item Ordered	Quantity	Price	Extended Cost	NS STAFF NOTES AND DIRECTIONS
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL			\$ -	