

Nutrition and Food Services Cafeteria Walk Through Service Meeting Participant List

Date of Event:	Start Time	End Time:	Number to Attend:
Facility of Catering Event:			
Program/Department		GL Account Number:	
	heck here if Nutrition and Food S	ervices Catering Requisition is at	tached
	Identify which break/meal will be charged by checking off the appropriate box		
Participant Name	AM Break Charges	Meal Charge	PM Break Charges
Total Charges			
Comments:		Gran	d Total
Johnnents.			
Contact Persor		Date	Phone Number and Extension
		to Nutrition and Food Services	
Comments	Nutrition and Food Service		
—	Signature of NFS Staff	Date	Total Charge/Billing Amount

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