

Office of Purchasing and Travel

FOOD PURCHASE

DATE OF EVENT: \_\_\_\_\_ AGENCY: \_\_\_\_\_

TIME OF EVENT: \_\_\_\_\_ REQUESTING INDIVIDUAL: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

RESTAURANT/VENDOR: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

| NAMES OF PARTICIPANTS** | TITLE/AFFILIATION |
|-------------------------|-------------------|
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |
| _____                   | _____             |

GROUP ATTENDING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PURPOSE OF EVENT : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\* If more than 10 people were present, give a general description of who attended the event with the name or names of the people leading the event:

\_\_\_\_\_  
Signature of Requesting Individual Cardholder Date

\_\_\_\_\_  
Signature of Approving Program Coordinator or Agency Head Date