# LLCC Student Organization Food Order

Club/Organization: _______________________________________________________

Advisor: ____________________________ Phone: ____________________________

Club Account: 10 - 635 -59902-00 (SLO Program Assistant can fill in if unknown)

Requesting from:  
- [ ] Subway  
- [ ] Nelson’s Catering

This form must be completed and returned to Amber Berman at least two weeks prior to your event.

Day/Date Food Needed: ____________________________  Time to be Delivered: ____________________________

Place Food is to be delivered to: ____________________________________________

We would like to order the following:

<table>
<thead>
<tr>
<th>Food Item</th>
<th>Price</th>
<th>Quantity</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: 20 dozen assorted cookies</td>
<td>(if known)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. 
2. 
3. 
4. 
5. 
6. 

Approvals:

Club Advisor: ____________________________ Date: ________________

Student Life Approval: ____________________________ Date: ________________

Office use only:

Date Submitted to Subway/Nelson’s: ____________________________ Date: ________________

Date Invoice Received: ____________________________ Invoice #: ________________

Date Club Voucher Received: ____________________________