Kansas City Public Schools

Food Service Department Catering Order Form

Please FAX order to 418-7431 or email order form to tbelisle@kcpublicschools.org

Questions about Catering? Please call Chef Thomas Belisle Office at 418-7436.

All orders must be placed at least 4 BUSINESS DAYS in advance to ensure service.

(Call us to see if we can accommodate you with shorter time frames.)

,	,	
Date of request		
Date of Event 7	Γime Delivery Needed	
School/Location of Event	Room	
Number of People	<u></u>	
Requested by	Dept	
Contact Person for this Event		
Telephone Email		
Bill To Account (Alio account#)	5471 <u> . </u>	A <u>food</u> expense account n
(The account number MUST be provided at the time of the order. That	ank you.)	
DROP OFF SERVICE IS INCLUDED. For Set up/S	Staff Service, please contact us	to detail additional char
Justification Statement for ordering food (topic, ag	genda, attendees) required wh	en paid with district fund
This event is for:		
After event, documentation of agenda,	<u>sign in sneet, etc must be sent</u>	to complete justification
Requested Items/Menu	Amount/People	Price
		
		
		
	Total Price	
Please let us know if you have any allergy or special diet restrictions		
Special instructions	Basic Disposables (included	۹/
	Service Staff (upcharge)	<u>-</u> ,
	After Hours (upcharge)	
	Tablecloth (upcharge)	
Confirmation sent within 48 hours of placing order—i	f you do not receive confirmatio	n, please call 418-7436.
Authorizing Signature		
Received by Signature		
Invoice Number Amount of	Invoice	