

The Spring Café Order Form

<u>Contact Name:</u>	<u>Event Date: (ie: Day of the week, MM/DD/YY)</u>		
<u>Contact Information (ie: phone number, email address)</u>			
<u>Ministry:</u>			
<u>Event:</u>			
<u>Event Date/Time:</u>	<u>Deliver (Name of person picking up) or Pickup:</u>		
<u>Expected Volume:</u>	<u>When does the order need to be ready?</u>		
<u>Event Location:</u>	<u>Event will be finished and can pickup:</u>		
Please note: After your events, all café items being used after outside normal business hours will need to be returned back to the Spring Café.			
Product Order			
<u>Product</u>	<u>Quantity</u>	<u>Price</u>	<u>Total</u>
Total Order Cost:			
<u>Dept and Account Number to Transfer Payment Out of:</u>			
<u>Signature Responsible For Payment:</u> _____			
Account Budget Transfers To: L100 D5053 10001 1000 40310 Catering/Beverage Income-Internal			
<u>Signature Responsible For Receiving Payment:</u>			