

Hamilton-Fulton-Montgomery BOCES

2755 State Highway 67

Johnstown, NY 12095

FOOD SERVICE REQUISITION

* Before completing this requisition form and the attached menu selection form, please confirm with HFM BOCES that the appropriate space is available and reserved for your event. *

Organization Name: _____

Contact Name: _____

Billing Address: _____

Phone Number: _____

Fax Number: _____

*** Tax Exempt Number ***

*If no tax exempt number is entered, 8% sales tax will be added to your bill.

Please contact Chris Bush at 518-736-4360 for room availability and/or set-up requests.

Please contact Cindy Fratianni at 518-736-4681 ext. 4649 for menu assistance.

Event Information

Event Name: _____

Date of Event: _____

Start Time: _____

End Time: _____

Food Serving Time: _____

Number of Attendees: _____

Special Needs or Requests: _____

Customer Signature: _____ Date: _____

Upon completion of event, a bill will be mailed to the above address.

*** PLEASE NOTE ***

- Rates may vary if school is not in session.
- To ensure proper billing and adequate food preparation, please notify HFM BOCES with any changes in the number of attendees at least two days prior to the scheduled event.
- HFM BOCES will not be held responsible for food prepared over or under the anticipated attendee count.
- HFM BOCES cannot accommodate credit cards payments at this time.

*** OFFICE USE ONLY ***

Received By: _____

Date Received: _____

Set-Up Room #: _____

Please fax completed requisition to 518-736-4361.

MORNING OR AFTERNOON SETTING OPTIONS

Select each item as appropriate; you may indicate varying numbers for any specific option.
 (For example: 25 people at a workshop: 20 coffees, 10 waters, 10 bagels, 10 muffins, 5 danish)

ITEM	PRICE	AMOUNT ORDERED	TOTAL
Beverages:			
Coffee, Decaf Coffee, Tea	\$1.75	x	
16.9 oz. Bottled Water	\$1.25	x	
20 oz. Assorted Vitamin Water/Snapple	\$1.50	x	
Carafe of Apple Juice	\$4.00	x	
Carafe of Orange Juice	\$4.00	x	
Carafe of Cranberry Juice	\$4.00	x	
Pastries:			
Assorted Danish	\$1.25	x	
Muffins	\$1.50	x	
Mini-Bagels with Cream Cheese	\$1.25	x	
Additional Options:			
Assorted Granola Bars	\$.75	x	
Cookies (Variety)	\$1.25	x	
SUB TOTAL			

If you would like to include an item not listed, please check with Cindy for availability and price.

LUNCHEON OPTIONS

Please selection one Option per event. You will also need to complete the Luncheon Selection Guide.

OPTION	PRICE	AMOUNT ORDERED	TOTAL
Option 1	\$10.00	x	
Sandwich (Single or variety platter) Side Salad Dessert Beverage			
Option 2	\$10.00	x	
Main Entrée Salad Bread or Rolls Dessert Beverage			
Option 3	\$10.00	x	
Hand-Tossed Pizza Tossed Salad Dessert Beverage			
Option 4	\$12.50	x	
Hot Entrée Tossed Salad Bread or Rolls Dessert Beverage			
SUB TOTAL			

GRAND TOTAL :

HFM BOCES Food Services Division

LUNCHEON SELECTION GUIDE

OPTION 1

Please select the types of foods you would like to complete Option 1.

Sandwich Meat:	<input type="checkbox"/> Ham <input type="checkbox"/> Turkey <input type="checkbox"/> Roast Beef <input type="checkbox"/> Tuna Salad <input type="checkbox"/> Seafood Salad
Sandwich Bread:	<input type="checkbox"/> Hard Rolls <input type="checkbox"/> Croissants <input type="checkbox"/> Wheat Berry Bread <input type="checkbox"/> Marble Bread
Side Salad:	<input type="checkbox"/> Tossed <input type="checkbox"/> Pasta <input type="checkbox"/> Macaroni <input type="checkbox"/> Cole Slaw <input type="checkbox"/> Potato <input type="checkbox"/> Ambrosia
Dessert:	<input type="checkbox"/> Assorted Cookies <input type="checkbox"/> Mini Cheesecakes <input type="checkbox"/> Cream Puffs

OPTION 2

Please select the types of foods you would like to complete Option 2.

Main Entrée Salad:	<input type="checkbox"/> Grilled Chicken Caesar <input type="checkbox"/> Grilled Sirloin <input type="checkbox"/> Chef <input type="checkbox"/> Antipasto
	<input type="checkbox"/> Bread <input type="checkbox"/> Rolls
Dessert:	<input type="checkbox"/> Assorted Cookies <input type="checkbox"/> Mini Cheesecakes <input type="checkbox"/> Cream Puffs

OPTION 3

Please select the types of foods you would like to complete Option 3.

Hand-Tossed Pizza: (Serves 8)	<input type="checkbox"/> Cheese <input type="checkbox"/> Pepperoni <input type="checkbox"/> Mushroom <input type="checkbox"/> Sausage <input type="checkbox"/> White Broccoli <input type="checkbox"/> Fresh Basil and Tomato
Dessert:	<input type="checkbox"/> Assorted Cookies <input type="checkbox"/> Mini Cheesecakes <input type="checkbox"/> Cream Puffs

OPTION 4

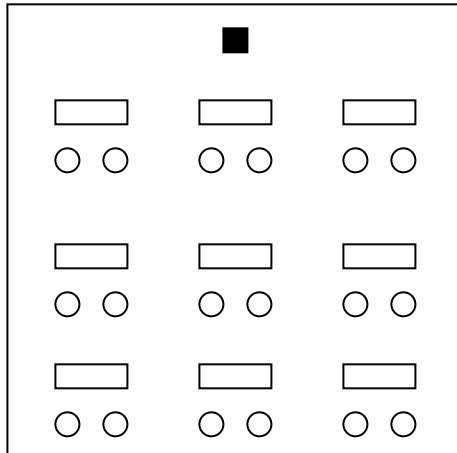
Please select the types of foods you would like to complete Option 4.

Hot Entrée:	<input type="checkbox"/> Chicken Parmesan with Penne <input type="checkbox"/> Stuffed Shells with Meatballs <input type="checkbox"/> Grilled Chicken with Broccoli (Served with Pasta Alfredo) <input type="checkbox"/> Macaroni and Cheese <input type="checkbox"/> Baked Ziti with Meat Sauce
	<input type="checkbox"/> Bread <input type="checkbox"/> Rolls
Dessert:	<input type="checkbox"/> Assorted Cookies <input type="checkbox"/> Mini Cheesecakes <input type="checkbox"/> Cream Puffs

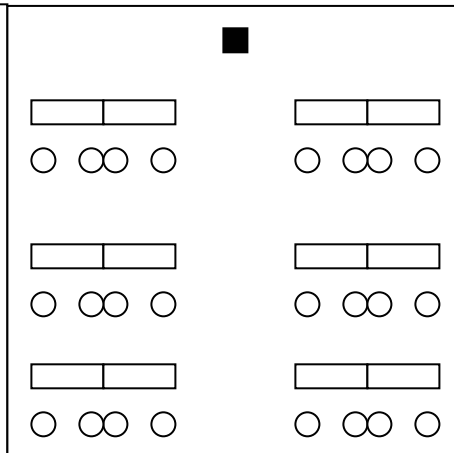
If you would like to include an item not listed, please check with Cindy Fratianni for availability and price.

Room Setup Options

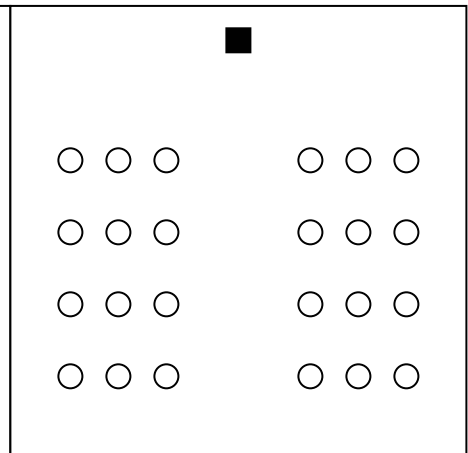
Setup A: Rows w/ tables #1



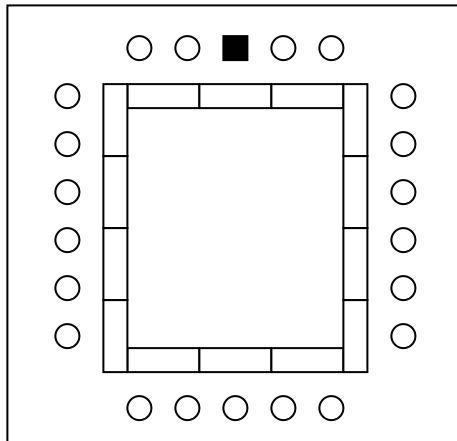
Setup B: Rows w/ tables #2



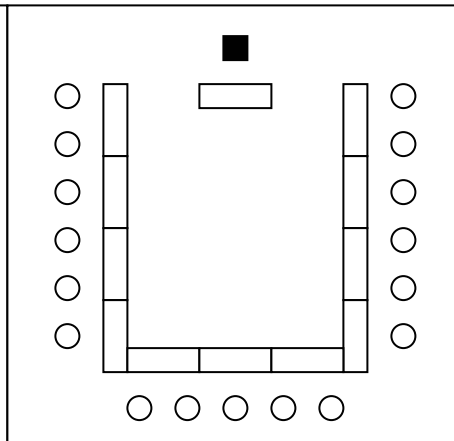
Setup C: Rows w/out tables



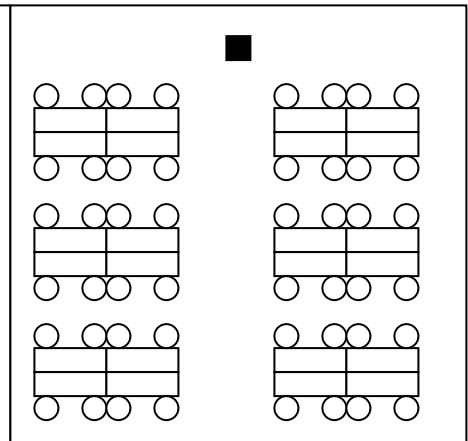
Setup D: Square/Rectangle



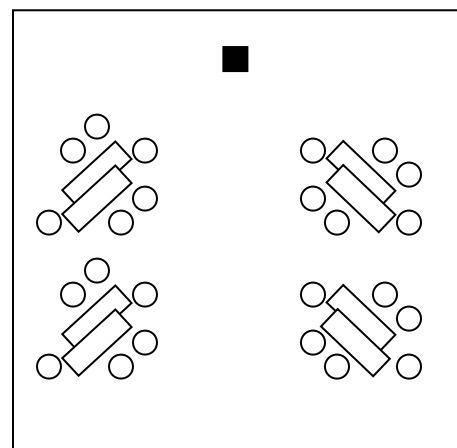
Setup E: Horseshoe



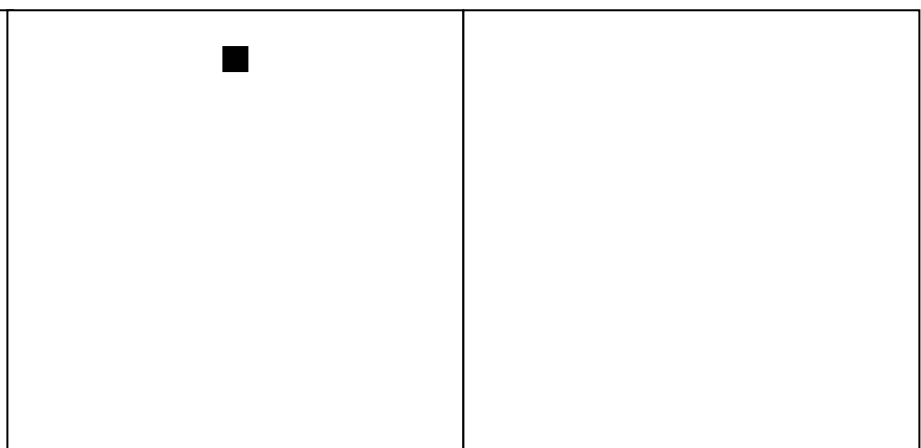
Setup F: Table Groups #1



Setup G: Table Groups #2



Setup H: Empty Room



- Please provide additional information as necessary, such as: Number of participants; Participants per table group; Placement of aisles...

Key:  = Table  = Chair  = Lecturer (Included only as point of reference)