

BEVERAGE REQUEST FORMRequest(s) must be received 15 business days prior to the Event date.**Office/Department Information**

Employee name:		Employee email:	
Department requesting:			
Office #: 601-	Alternative #: 601-	Fax #: 601-	


Delivery Location/Instructions: (give name of building and floor):**Event Information**

Event date:	Event location:
Event name:	
# of participants:	# of products:

SELECT PREFERRED BEVERAGE (24 bottles per case)

<input type="checkbox"/> Pepsi # of cases _____	<input type="checkbox"/> Diet Sierra Mist # of cases _____	<input type="checkbox"/> Mountain Dew # of cases _____	<input type="checkbox"/> Mug Root Beer # of cases _____
<input type="checkbox"/> Starry # of cases _____	<input type="checkbox"/> Dr. Pepper # of cases _____	<input type="checkbox"/> Sunkist # of cases _____	<input type="checkbox"/> Lipton Brisk w/lemon # of cases _____
<input type="checkbox"/> Hawaiian Punch # of cases _____	<input type="checkbox"/> Sunkist Peach # of cases _____	<input type="checkbox"/> Diet Pepsi # of cases _____	<input type="checkbox"/> Ginger Ale (Canada Dry) # of cases _____
<input type="checkbox"/> Sunkist Grape # of cases _____	<input type="checkbox"/> Sunkist Strawberry # of cases _____	<input type="checkbox"/> Sunkist Peach # of cases _____	<input type="checkbox"/> Other # of cases _____

JSU Tiger Water (please contact Dining Services @ 601-979-2561)*Please return ALL unused CASES to Contractual Services, Reddix Hall, Suite 321.***Department Use Only**

<input type="checkbox"/> Approved Total # of cases _____	Signature: _____	Date: _____
<input type="checkbox"/> Disapproved 	<input type="checkbox"/> less than 15 days	<input type="checkbox"/> annual allotment depleted
<input type="checkbox"/> reduce request(s)		
Comments: _____		