



Khesar Gyalpo University of Medical Sciences of Bhutan

Requisition Form (Catering Services)

To,
The Administrative Officer
Khesar Gyalpo University of Medical Sciences of Bhutan

Date: ____/____/____

Selection of Package :(Please tick inside the box)	No. of Head(s):	Purpose/Remarks
<input type="checkbox"/> Special Lunch		
<input type="checkbox"/> Simple Working Lunch		
<input type="checkbox"/> High Tea & Snacks		
<input type="checkbox"/> Standard Tea & Snacks		
<input type="checkbox"/> Simple Tea & Snacks		
<input type="checkbox"/> Others (Specify as per Quotation)		
.....		
.....		
.....		

Date: _____

Time: _____

Venue: _____

Duration of Meeting: _____

Name: _____ Designation: _____ Signature: _____

Remarks:

Administrative Officer
(Sign/Seal/Date)

N.B (The requisition for should reach the Administration Section at least three days before for any meetings/workshops/events) Administration Section is not liable for delay in delivering the catering services due to late or last minute submission of requisition.