REFRESHMENT ORDER FORM

Applicant's Name   :   Designation :

K/C/D/I   :   KULLIYYAH OF LANGUAGES AND MANAGEMENT

Programme Name   :

Organiser   :

Date/Day of Event   :

Venue   :

Name of operator   :

Type of services: :   *Buffet/Packed food/Pre set/Served

No	Details of Menu	No. of Pax	Price (RM)	Total
			TOTAL	**RM**

Applicant's Signature :   Approval by the K/C/D/I approving Authority :

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                                                    (Signature & Official Stamp)