



George St Store  
Shop 1  
151 George St  
Brisbane 4000  
Phone : 3003 0969  
Fax: 3003 0917  
ABN22188757663

# Application for Corporate Catering

**Firm, Company Name** \_\_\_\_\_

**Main Reception Address** (this must be the main reception address for your entire dept even if this location is in a separate building, we require this address for your admin file)

Reception Level \_\_\_\_\_ Reception Building Number \_\_\_\_\_

Reception Phone \_\_\_\_\_ Reception Fax \_\_\_\_\_

Reception Email \_\_\_\_\_

**Accounts Person Name** .....  
Phone Number .....Fax Number.....  
Email .....

## **Delivery Address information-**

**Contact Name** \_\_\_\_\_

**Level** \_\_\_\_\_ **Building Number** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Reception Fax** \_\_\_\_\_

**Email** \_\_\_\_\_

Method of Payment(circle) EFT Cr Card Chq. CASH

Frequency of payment Nett (circle) 7 OR 10 Days