

FSU COCA-COLA BEVERAGE DONATION REQUEST FORM

Please complete the information below for review/approval and email to obs@fsu.edu.
 Submit orders at least two (2) weeks prior to the requested date to ensure fulfillment.

Note: This form is for Florida State University entities ONLY. For all outside vendors, request donations [here](#).

Event Information

Requestor Name: _____ Today's Date: _____

Event Title: _____

Event Date: _____ Start Time: _____

Delivery Location: _____

Requested Delivery Date: _____

Organization/Department Requesting Donation: _____

Approximate number of people served: _____

Product Type:

12oz Can 12oz Bottle 2 Liter Other, please specify: _____

Trailer(s) Needed: No Yes # Needed _____

On-Site Contact Information

On-site Contact Name: _____

On-site Contact Phone: _____

Indicate how many cases of the following product are requested:

<i>Product Name</i>	<i>Number of Cases</i>	<i>Product Name</i>	<i>Number of Cases</i>
Cherry Coke		Gold Peak Sweet Tea	
Cherry Coke Zero		Gold Peak Unsweet Tea	
Coca-Cola		Minute Maid Fruit Punch	
Coca-Cola Zero Sugar		Minute Maid Lemonade	
Diet Coke		Powerade Fruit Punch	
Dasani		Powerade Grape	
Dasani Sparkling Berry		Powerade Mountain Berry Blast	
Dr. Pepper		Powerade Mountain Berry Blast Zero	
Diet Dr. Pepper		Seagrams Ginger Ale	
Fanta Grape		Sprite	
Fanta Orange		Sprite Zero	
Other (Please Specify)	<i>Number of Cases</i>	Other (Please Specify)	<i>Number of Cases</i>



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OFFICE OF BUSINESS SERVICES