

Continuation of Event Organizer Application ♦ Name of Booth(s) / Organization(s)

(Organizer completes this form and totals each column)

Name of Booth(s) / Organization(s)	Count of Facilities/Booths (Refer to each Temporary Food Facility Application)				
	Existing Permit Holder	Profit	For Profit Donating	Non-Profit	Non-profit (Nonperishable)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
Total Count For Each Category:					
FOR DEPARTMENT USE ONLY					
Total Count For Category x \$130					
Total Count For Ea. Category (fee not waived) x \$130					
GRAND TOTAL COLLECTED:					