

**Smokin' Joe's Catering Service Estimate Worksheet**

Fax to (718) 948-3340

Please wait for the beep to start your Fax

To enable us to properly provide an accurate estimate for your event we would appreciate if you would provide answers for the following questions.

Today's Date: \_\_\_\_\_

Contact Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_ FAX \_\_\_\_\_

Best Time / Method to Contact: \_\_\_\_\_

Event Type: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Event Location (City, State): \_\_\_\_\_

Approximate Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Number of: Adults \_\_\_\_\_ Children \_\_\_\_\_ Approximate Age Range of Children \_\_\_\_\_

Service Type: Drop-Off \_\_\_\_\_ Buffet \_\_\_\_\_ Sit-Down \_\_\_\_\_ Other \_\_\_\_\_

Menu Preferences:

Appetizers: \_\_\_\_\_

Main Course Selection(s), Package Type, Additions, Substitutions: \_\_\_\_\_

Accompaniments/Side Dishes: \_\_\_\_\_

Dessert: \_\_\_\_\_

Beverage Requirements: \_\_\_\_\_

Special Dietary Requests: \_\_\_\_\_

Services: Waiter/Waitress \_\_\_\_\_ Bartenders \_\_\_\_\_ China, Glass, Flatware, Linen \_\_\_\_\_

Tents, Tables, Chairs \_\_\_\_\_ Set-Up/Breakdown \_\_\_\_\_ Location Suggestions \_\_\_\_\_

Budgetary Considerations: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_