Catering Contract Worksheet

Requestor Name			_	
Name of Organization			_	
Billing Name			_	
Billing Address				
Estimated Number of Guests	** F	** Final Guarantee of Guests		
Event Date	Event Day		Serving T	ïme
Event Location				
Event will be (Circle One)	Breakfast		Lunch	Dinner
Menu			Requestor Will Provide	Culinary Arts Will Provide
		Tables		
		Chairs		
		Tablecloths Color:		
		Linen:	-	
		Napkins Color:		
		Linen:		
		Centerpiece Head Table	Yes	No
		rieda rabie	No. of persons: Table	
			Line Buffet	
		Paper Mats	Yes	No
			Yes	No
attendance at a mandatory for this procurement. Fix				
of your proposal.				
				_
In accordance with the required proposal is accepted, to furnish				their
accordance with the attached co			and Submitted III	