RANDALLS MEATS & CATERING EVENT FORM

Day:_____ **Date:**_____

Contact person:_____
Type of event:_____
Contact phone:_____
Address of event:_____

Expected # of guests:_____ Final # _____
Pickup ___ Delivery:___ Deliverer:_____

Leave time:_____ Arrival time:_____
Meal time:_____

Who will go to event:- DJ___ Dennis___
Tony___ Arica___ Becki____ Other_____
Other___ _____ Other_____

Dishes:
Will be brought back: ____ Pickup_____
Who will pick up? _____
Pick up when? _____

Equipment needed:

___ chafers	___ chafing pans
___ sternos	___ electric roasters
___ serving utensils	___ coffee pots
___ bev. Cambros	___ food caddy
___ cambros	___ can opener
___ punch fountain	___ table coverings
___ hot mitts	___ dish towels
___ steak knives	___ plastic silver
___ real silver	___ Foil
___ garbage bags	___ plastic cups
___ styro cups	___ china dishes
___ paper plates	

On truck check off:

Meat ___	Tableware___
Potato___	Condiments____
Salad ___	Bill____
Dessert ___	Bread___
Veggie___	Other_____
Utensils___	Other_____

Grilling on site_____

MEAT:	#
	$
POTATO:	#
	$
VEGGIE:	#
	$
BREAD:	#
	$
SALADS:	#
	$
DESSERTS:	#
	$
BEVERAGES:	Gal.
TRAYS:	
	$