

# JIRAH FOOD SERVICE REQUEST

Date of Request	Date of Activity
	From _____ To _____ Time of Activity
Ministry _____	Contact _____
Ministry Signature _____	Phone _____
Activity _____	Email _____
Request for: Breakfast _____	Total People _____
Luncheon _____	
Dinner _____	
Snacks _____	
Other _____	
	<b>(Paper goods must be guaranteed 2 days prior to function)</b>
	<b>(Food must be guaranteed 5 days prior to function)</b>
Activity Location _____	
Reserved on Church Calendar? _____ Yes _____ No	
Seating Arrangements _____	
Note: Any necessary work orders will be sent by Jirah	
Menu Suggestions _____	

PAPER GOODS NEEDED: (list quantity)	
9-inch Plates _____	12-ounce Cups _____
6-inch Plates _____	8-ounce Cups _____
12-ounce Bowls _____	6-ounce Cups _____
Forks _____	Tablecovers _____
Spoons _____	Roll Towels _____
Knives _____	Garbage Bags _____
Dinner Napkins _____	Other _____
Cocktail Napkins _____	_____

FOOD ITEMS NEEDED: (list type and quantity)	
Meat (A) _____	Dessert (A) _____
(B) _____	(B) _____
Vegetables (A) _____	Water (A) _____
(B) _____	Other Drinks (B) _____
Fruit (A) _____	Other (A) _____
(B) _____	(B) _____
Dairy (A) _____	(C) _____
(B) _____	(D) _____

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

To be filled out by Jirah Only	
Cost Per Person _____	Total Cost _____
Department Head Approval _____	Explanation _____
	Date _____