

# Catering Request

24-Hours Advance Notice Required on All Catering Orders  
 Please sign this request and fax to 312-701-0891.  
 Questions? Please call us at 312-701-0890.



**1st & fresh**  
 CATERING  
 eat well. meet well.

<b>Order Information</b> Company Name _____ Contact Name _____ Address _____ City, State, ZIP _____ Credit Card No. ____   ____   ____   ____ Exp. ____   ____ Phone ( ____ ) ____ - ____ Fax ( ____ ) ____ - ____ Email Address _____	<b>Event Date</b> _____
	<b>Location</b> _____ <input type="checkbox"/> DCTC <input type="checkbox"/> PROC
	<b>Type</b> <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Break <b>Setup</b> <input type="checkbox"/> Standard <input type="checkbox"/> China Number of Guests _____
<b>Service Information</b> Delivery Time _____ <input type="checkbox"/> AM <input type="checkbox"/> PM Pickup Time _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	

Quantity	Item Name / Description	Package	Platter
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
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_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

**Special Instructions/Comments**

Send e-mail confirmation

**On-Site Contact** \_\_\_\_\_  
Required if different from contact name listed above