

10 Room Supply List

✓ Check off only those supplies needed.

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| Event Name: _____ Date: _____ Host Name: _____ Telephone #: _____ All items not covered by this list must be ordered by the host and included in the event's expenses. | <input type="radio"/> small desert plates <input type="radio"/> Small bowls <input type="radio"/> Beverage napkins <input type="radio"/> Luncheon napkins <input type="radio"/> 8 oz coffee cups <input type="radio"/> 12 oz water cups |
| <input type="radio"/> Clear forks <input type="radio"/> Clear knives <input type="radio"/> Clear spoons | <input type="radio"/> Placemats what color _____ <input type="radio"/> Roll of plastic tablecloths |
| <input type="radio"/> Aluminum foil <input type="radio"/> Clear plastic wrap | <input type="radio"/> Hand soap <input type="radio"/> Hand Sanitizer |
| <input type="radio"/> Large take home containers <input type="radio"/> Small take home containers | <input type="radio"/> Ice buckets <input type="radio"/> Ice buckets saucers <input type="radio"/> Pitchers <input type="radio"/> oven thermometers |
| <input type="radio"/> Clorox wipes <input type="radio"/> Vinegar to clean grill <input type="radio"/> Dish soap <input type="radio"/> Dishwasher detergent <input type="radio"/> Dishwasher (Finish) | <input type="radio"/> Coffee <input type="radio"/> Decaffeinated coffee <input type="radio"/> Tea <input type="radio"/> Decaffeinated Tea <input type="radio"/> Non refrigerated coffee cream <input type="radio"/> Sugar <input type="radio"/> Sugar substitute <input type="radio"/> Salt <input type="radio"/> Pepper |

Your order must be submitted a minimum of 10 days prior to your event. If within 10 days, please call Pat Wiencke at 772-807-1332