

Northern Illinois University
HSC Campus Catering Hot Sandwich Buffet Form

Department Name: _____ Date of Event: _____

Client Name: _____ Phone #: _____

Guest count: _____ Start Time: _____ End Time: _____

Fax #: _____ Account Number: _____

Set up Location time: _____ Equipment pick up: _____

Hot Sandwich Buffet

\$17.00 P/P

HSC Disposable Service -- Cloth and skirting included on food and beverage tables

Italian Beef w/ Sweet Peppers on a French roll - Mozzarella Cheese & Giardinera

Grilled Chicken Breast w/ Whole Grain Bun – Lettuce and Tomatoes

Holmes Pasta Salad, Coleslaw, Potato Salad, Potato Chips

Beverages: Coffee, Decaf, Ice Tea, Lemonade, Ice Water

NUMBER of GUESTS _____ x \$17.00 P/P = Estimated Total \$ _____

[Fill In the Blanks if Required]

Additional Linens: Tables clothed and skirted _____ @ \$30.00 each.

Tables clothed for guests (rounds, cocktail rounds, 6 ft. or 8 ft. tables) _____ @ \$6.00 each

Today's Date _____ Customer Signature _____

(Office use only: Order Guaranteed By: _____)

Service Agreement: Total above is an estimate. Actual total will be billed after service due to event's additional needs or requests.

Sales tax will be waived with advance presentation of valid tax exemption letter. (NIU exemption letters already on file.)