EQUIPMENT/SUPPLY REQUEST			
Today's Date:			
Event Day/Date Requested:			Time:
Requested by:			Phone:
Group/committee:			
# of people attending:			
Location/Room:			
Hot Cups()	Cold Cups() 9 oz() 12 oz()		Bowls ()
Dinner Plates ()	Dessert Plates ()		Napkins Lunch/Dinner Size ()
Tablecloths Paper() Cloth <i>(Requires 10 day advan</i> ()number of round (, . <i>.</i>		
Reg. Coffee ()	Decaf Coffee ()		Tea()
Hot Chocolate() Plastic Flatware: Forks()	Knives()	Spoons ()
Additional requests:			

St. Edith Church

*****OFFICE USE***** Request rec'd by: Date: Original to Christian Service () 734-464-1222 x309 Copy to Parish Office file: () 464-1222 Copy to Originator: () Rev. 11/01/2017