



Request Form - Catering

(please complete Legibly & send on One page via fax:323.345.5880 or email:catering@kogibbq.com)

START times: 12pm,12:30pm,1pm, 6pm,6:30pm,7pm or 10:30pm

CLOSED: on all major Holidays, Sundays & Mondays

EVENT NAME:

EVENT DATE, DAY, TIME:

CLIENT (Must include Person's name who will be signing):

CONTACTS NAME:

CONTACT'S E-MAIL:

CONTACT'S PHONE # (Mobile/day of event):

ALTERNATE #: (please specify)

FAX #:

ADDRESS (billing):

ADDRESS (event location):

ATTENDANCE (must be confirmed (written & verbal) no later than 3 bus. days prior):

MENU (cost & description):

PARKING ARRANGEMENTS:

(please do not write below this line, for office use only)

___/___ Event day & date	sale:	\$ _____
I, P, C Event placed on Kogi™ Calendar	15%sc:	\$ _____
___/___ cal. Contract & CC auth. Form sent	9.75%tax:	\$ _____
___/___ Contract received (executed)	total:	\$ _____
___/___ Countersigned contract sent	travel:	\$ _____
___/___ cal. Deposit received \$ _____	grand total:	\$ _____
___/___ cal. Paid in Full, Balance due: \$ _____		

CC on File: YES or NO

___/___ Details --> Event Contact & Truck Manager: _____

Special notes to TM: Menu, Maps, Parking, etc _____

___/___ Event follow up: _____

15% Service Charge: \$ _____ c \$ _____ yo / ak

Notes: _____

