CLIENT INCORN	ATION	
CLIENT INFORM	ATION	
Name:	Anele Patriarca	
Company:	Home Guaranty Corporation	
BOOKING INFOF	RMATION	
Date:	(Friday) December 16, 2016	
Time:	5:30pm	
	*ready by 4:30pm	
No. of guests:	250 pax	
Venue:	HGC Function Hall 5th floor, Jade	
	Building, 335 Sen. Gil Puyat Ave.,	
	Makati City	
Project/Event:	HGC's 2016 Thanksgiving	Bistro109 Catering Company
Theme / Motif:	,	
	1	#32 Bagong Calzada St. Brgy Ususan, Taguig City
Setup Time:	At least 4 hours before start of event	
		TIN# 213-952-708-000

.

.

Menu	COCKTAIL MENU	
	<u>SET A</u>	
	Php 642 per person + 10% Service Charge	
	∞ Pasta ∞	
	Spaghetti, Garlic and Shrimp Aglio Olio	
complimentary	served with Soft Butter Rolls	
	∞ Entree ∞	
	Beef and Cheddar Burger	
	Chicken Lollopop with Spicy Honey Dip	
on-stie frying required	Parmesan Fish and Chips with Tomato and Basil Dip	
	Pork Sisig in Crispy Wanton	
	∞ Carvery ∞	
	Roast Beef with Mushroom Gravy	
	∞ Dessert ∞	
	Banoffee Tartlets	
	Chocolate Éclair	
	Drinks: Free-flowing Iced Tea and Assorted Soda (Coke, Sprite, Royal) Brewed Coffee (served in paper cups)	
Package Inclusion	1. Waiters	
	Walters Illuminated Glass Buffet (whitel light) and Skirted Bar Set-up with Purified Drinking Water	
	10 illuminated cocktall tables (white light) with sheer black linen with Floral Centerpiece (see peg)	
	10 wooden cocktail tables with black linen and black ribbon with Floral Centerniece (see peg)	
	12 sets 10-seater round table with black linen + floral centerplece (with white seat cover)	
Total Package Price		
	P642 x 250 pax Php160,500.00	
	10% Service Charge Php14,330.36	
	Php174,830.36	

Terms & Conditions:	1 Please confirm our continue and all co
conditions;	Please confirm our services and all requirements at least 1 week prior the event date. If separate food or drinks are to be brought in by the client or guests, kindly specify in this contract to facilitate the necessary preparations. Additional handling
	fee may be charged. 3. Our standard catering services is good for 5 hours event time. Overtime fee may
	be charged. The client shall be responsible for securing any permits needed for the set-up from the venue administrator.
	10% Reservation Fee. 50% Down payment at least 1 week prior the event date. Remaining balance may be settled on the day of event.
	 Cash, Check or Deposit is accepted. BPI Bank: Bistro 109. CA Account #: 4155805566. Please e-mail a copy of the deposit slip so we may check if payment was credited to our account.
	Additional monetary gratuity or "tip" shall be subject the company's centralized grautity fund.
	 For any questions, please call us at telefax: 6428123 or e-mail us at bistro109catering@gmail.com
	10. Plated service should be advised beforehand and may incur additional fees. We are not liable for any delays that may incur due to uncoordinated plated service. On-the-spot and/or uncoordinated plated service will incur additional fees.
	Party venues that will not allow Bistro 109 to use the service elevator or venues that do not have elevators entail additional logistical fees. Additional fees will depend on number of pax booked by client.
	***Should there be any changes or adjustments in this contract, the CUSTOMER shall inform the caferer of such at least 3 days before the date of the event. Postponement made due to natural calamities and other irrepressible event shall not forfeit the down payment regardless the aforementioned stipulation. In addition, the catering service date shall be adjusted subject to the availability of the caterer and the customer. Cancellation of catering service shall be subject to cancellation costs.
onforme	
	Please be advised that food must be consumed within 3 hours of display in the buffet. We are not liable for any contamination once food is packed and taken bene. We are also not liable for food & drinks we did not prepare.
	If you find the above agreeable, pleased sign of the circumstance between the circumstance of the circumst
	conforme: Skypk Lat. 26 RPUZ
	(Printed name over signature)
	Date:
	Designation:
	Contact details:
	Tel #:
	Fax #:
	E-mail:
	Payment Details:
	Billing Addressed To:

.

.

Mode of Payment:
Terms:
Billing to be received by (Name of Person):
Official Receipt Addressed To:
O.R to be received by (Name of Person):

Prepared by:

Clarissa L. Almeda Sales & Marketing Manager