HPC Kitchen Inventory Form

ensure that there is inventory available when your event takes place.

Event Date:

Dinnerware/Tables

Sturdy Dinner Plates

Dessert Plates

Location:

Item*

Bowls

Cups

Foam Cup (Hot and Cold)			
12 oz. Clear Plastic Cold Cup			
16 oz. Clear Plastic Cold Cup			
Plastic Tablecloths – rectangle			
Plastic Tablecloths – round			
Plastic Utensils (spoons, knives, forks)			
Napkins			
Foil Pans – standard size			
Foil Pans – smaller size			
Centerpieces (Specify style)			
Please note any additional comments Condiments			Annua Halandad
Item	Approx. # Needed	Item	Approx. # Needed
Creamer		Coffee (reg & decaf)	
Coffee stirrers		Coffee filters	
Salt/Pepper shakers		Sugar/sweetener packets	
Individual butter packets		Condiment cups with lids	
Tea bags		Leftover containers	
Salad dressing(s)		Lemonade/iced tea	
Gloves for serving		Dishwashing soap	
Additional information (inclu	ıding any specia	l requests)	

Please complete this form and turn it in to the church office 2 weeks prior to your event

_____ Contact Number: _____

Approx. # Needed | Additional Notes

Event Name: _____ Contact Name: ____

*NOTE: The room setup form must be completed so that facilities can set up the tables/chairs.

Please check the items below that are required for your event and enter the approximate number needed. This will

Has the room setup form* been completed and turned in to the office? Yes _____ No ____