Sever(s)-

Event date-

Linen(s)-

Misc-

Chalkboard Message:

Tables: (Gift, Cake, check -in)

Menu

Beverages: (Open bar/pitchers, checks)

Time Room Event Exp.Guest Final count

Name-

Phone Number-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deposit Date and Manager-

The Post Office Pub

1 Ray St

Grafton Ma 01536

508-839-6106