

Bulk Catering Delivery Verification Sheet

Event Name:

Event Date:

Delivery Address:

Contact Person:

Contact Number:

Order Number:

Delivery Time:

Order Details

| Item | Quantity | Notes | Verified |
|------|----------|-------|----------|
| | | | |
| | | | |
| | | | |
| | | | |

Notes / Special Instructions:

Delivered By:

Received By:

Date: