

ATTACHMENT B- VENUE WORKSHEET

Client Information

Name of Client

FI 843

CATERING

Outside Vendors (cont.)

EQUIPMENT RENTALS

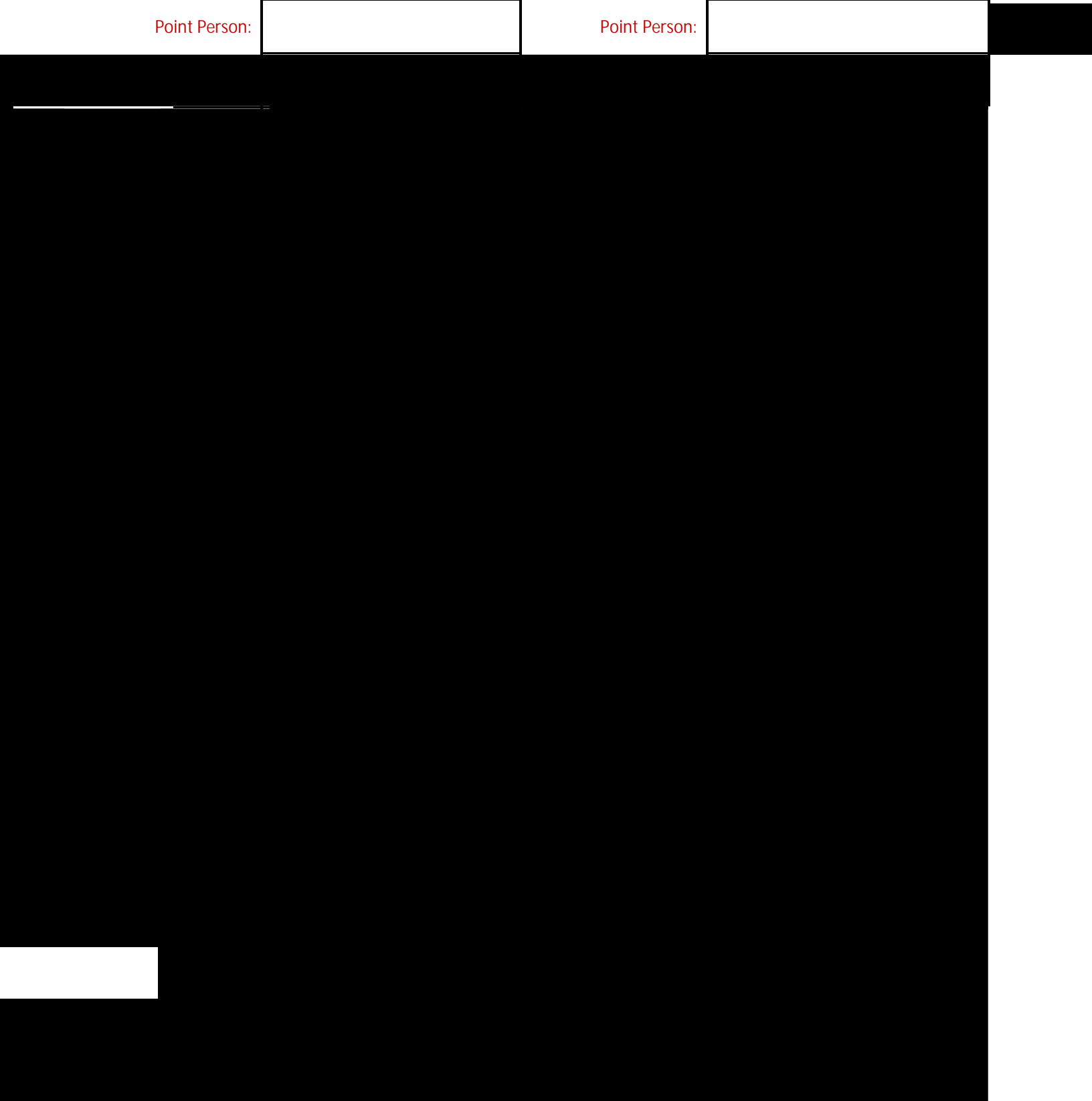
Company Name:

Point Person:

AUDIO VISUAL

Company Name:

Point Person:



Event Timeline

Time	Event	Location
AM PM		
PM	PM	