CNE FOOD BUILDING | FOOD PRODUCTS DELIVERY MANIFEST

DATE	FREQUENCY	EXPECTED TIME OF DELIVERY	CONCESSIONAIRE BOOTH NAME (please ensure you list all booths associated with your delivery)	ON-SITE CONTACT & CELL NUMBER	DELIVERY COMPANY	DESCRIPTION OF PRODUCTS	QТY	COLD	FROZEN	нот	DRY GOODS
	CHECK THE ONE THAT APPLIES	e.g. 08:45	e.g. ALPHA SPROUTS CO.	e.g. JAMIE CLASS 416-222-000	e.g. CISCO	e.g. Assorted Vegetables, Bread	8 Skids	Check One	Check One	Check One	Check One
	Hourly Daily							YES	YES	YES	YES
	Weekly Bi-Weekly							NO	NO	NO	NO
	Hourly Daily							YES	YES	YES	YES
	Weekly Bi-Weekly							NO	NO	NO	NO
	Hourly Daily							YES	YES	YES	YES
	Weekly Bi-Weekly							NO	NO	NO	NO