

GUEST LIST ORGANIZER

Guest Name: _____ Phone: _____ Email: _____

Number Invited: _____

Address: _____

Date Invitation Sent: _____ Response: Yes/No Confirmed No. _____

Guest Name: _____ Phone: _____ Email: _____

Number Invited: _____

Address: _____

Date Invitation Sent: _____ Response: Yes/No Confirmed No. _____

Guest Name: _____ Phone: _____ Email: _____

Number Invited: _____

Address: _____

Date Invitation Sent: _____ Response: Yes/No Confirmed No. _____

Guest Name: _____ Phone: _____ Email: _____

Number Invited: _____

Address: _____

Date Invitation Sent: _____ Response: Yes/No Confirmed No. _____

Form Provided by:  www.guamdiner.com | Phone: 477-8059 | Fax: 472-5980

