Catering Request

E.U.S.D. Nutrition Services, 2310 Aldergrove Ave, Escondido CA 92029
760-432-2331 Fax 760-735-2876

Event Name _____ **Date Needed:** _____

Time Needed: _____ **# of Attendees:** _____

School / Location: _____

Contact Name: _____ **Contact Number:** _____

Method of Payment: ☐ Cash ☐ Check ☐ Account number (check one)

Account Number: _____

Items Needed:	Qty	Price	Total Amt:	Comments:
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
			$ 0.00	
Delivery Charge		$ 30.00	$ 0.00	
Set Up Fee for This Event		$ 25.00	$ 0.00	
Clean Up Fee for This Event		$ 25.00	$ 0.00	
Service Fee During Event		$ 25.00	$ 0.00	
Table Cloth		$ 6.00	$ 0.00	
Total of all items:			$ 0.00	

All prices include labor, paper products and sales tax

Special Instructions:

_____

_____

_____

_____

Approval Section:

ASB Advisor **Date** **Signature of Administrator / Principal** **Date**

ASB Treasurer **Date** **Signature of Site Cafeteria Manager** **Date**

Please provide a minimum of 72 hours notice, some items may require up to 2 weeks to receive.
Items requested will go to Nutrition Services to be picked up by you.