



INVOICE # \_\_\_\_\_.

Order: ( 805) 485-3111 Ext 2112

1800 Solar Dr. 3rd Floor Oxnard, CA 93033

**REQUEST TO CHILD NUTRITION FOR CATERING —BREAKFAST / ALA CARTE/ DRINKS ORDER FORM**

# Of People Expecting: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Date Needed: \_\_\_\_\_

School or Department: \_\_\_\_\_ Event Location: \_\_\_\_\_ Rm: \_\_\_\_\_

Person Requesting: \_\_\_\_\_ Event Time: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

**Required: Account # to be billed:**

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**Drinks:**

\_\_\_\_\_ Coffee Service for 25 people = \$25.00

\_\_\_\_\_ Cases of Water 16.9 oz. = \$12.00)

\_\_\_\_\_ Coffee Service for 50 people = \$50.00

\_\_\_\_\_ Seasonal Spa Water for 25 people = \$17.00

\_\_\_\_\_ Milk/ Juice (choose type) = \$0.50 per person

\_\_\_\_\_ Agua Fresca for 25 people = \$25.00

**BREAKFAST (includes disposable paper products)**

(serving size may vary)	# of people	Total
<b>Rio Royal Breakfast</b>	_____ @ \$10.00 / Person	_____
<b>Rio Continental Breakfast</b>	_____ @ \$7.50 / Person	_____
<b>Yogurt Parfait Bar</b>	_____ @ \$5.50 / Person	_____
<b>Heart Healthy Oatmeal Bar</b>	_____ @ \$5.50 / Person	_____

**ALA CARTE (includes disposable paper products)**

(serving size may vary)	Serves 12-15 people	Total
<b>Bagels with Cream Cheese</b>	_____ @ \$22.00 / Doz.	_____
<b>Breakfast Bread / Muffins</b>	_____ @ \$24.00 / Doz.	_____
<b>Veggie or Fruit Platter</b>	_____ @ \$25.00 / Platter	_____
<b>Crackers &amp; Cheese</b>	_____ @ \$22.00 / Platter	_____
<b>Snack Platter</b>	_____ @ \$22.00 / Platter	_____

\*Prices subject to change. \*\* Orders require a 2 week notice. Delivery Fee \$30.00

Please submit order to Rosie Gutierrez .

**TOTAL COST** \_\_\_\_\_.