



Café Vista Catering Request and Invoice

3939 Thirteenth Street • Riverside, CA 92502 • Phone (951) 826-6640 • FAX [951] 826-6978

Catering services are provided for groups of ten or more. If you have less than ten attendees, special arrangements will need to be made. Submit complete and signed form no later than five business days prior to event date, along with a copy of the meeting agenda, flyer, sign-in sheet, or an e-mailed copy of the meeting notification. **Final count and catering form must be received three days prior to event to ensure service. Order cannot be confirmed or provided without funding information and signature.** Payment must be made before or on the day of the event from outside agencies by check, credit card, or cash. If you have any questions, please contact Café Vista at (951) 826-6640.

Event Information:

Date of Event: _____ Time of Event: _____
 Meeting Name: _____
 Number of People Attending: _____ Room Location: _____
 Set-up Time: _____ Pick-up Time: _____ Food Set-up Location: _____
 Special Instructions: _____ Inside Outside
 Other: _____

Catering Services Selection(s)	CAFÉ VISTA USE ONLY			
	Quantity	Unit	Price	Cost
				-
				-
				-
				-
Subtotal				-
Other				
Sales Tax				-
Total				-

Note: Meal reimbursement is allowed for internal in-service activities/training sessions with division head prior approval. For staff planning sessions which includes a meal, the Superintendent's prior approval is required.

Billing Information: RCOE Internal

Contact Name: _____ Phone: _____ Cell: _____ Fax: _____
 Division: _____ Department: _____

Fund	School	Resource	Year	Goal	Function	Object	%	Total Price

Billing Information: External Agencies

Contact Name: _____ Phone: _____ Cell: _____ Fax: _____
 Agency Name: _____ Department: _____
 Address/Site: _____ Billing: Credit Card Cash Check

If paying by Credit Card, please call Café Vista at (951) 826-6640 on or before your event date with the Card No., Expiration Date, and Security Code. Payment must be made before or on the day of the event from outside agencies by check, credit card, or cash.

Signature: _____
 Division Head/Designee Date

Approved by: _____
 Food Services Supervisor Date