



# LUNCHBOX MENU

REGULAR-\$10     ULTRA-\$12

QTY:

<input type="checkbox"/>	PITA:	1/2 WRAP:	CHIPS:	SIDE: <small>(ULTRA)</small>	COOKIE:
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	MODIFICATION: (CHOOSE OR FILL IN)		UTENSILS:		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

  

<input type="checkbox"/>	PITA:	1/2 WRAP:	CHIPS:	SIDE: <small>(ULTRA)</small>	COOKIE:
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	MODIFICATION: (CHOOSE OR FILL IN)		UTENSILS:		
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	MODIFICATION: (CHOOSE OR FILL IN)		UTENSILS:		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

  

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	MODIFICATION: (CHOOSE OR FILL IN)		UTENSILS:		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SUBTOTAL: .....

ADDITIONS/ADJUSTMENTS: .....

GRAND TOTAL: .....

## The CALIF.CHICKEN CAFE

### Invoice Form

Invoice #

Email form to CATERING@CALIFCHICKENCAFE.COM

Pick Up     Deliver

#### GUEST INFORMATION

Name: .....

Email: .....

Phone: .....

Company: .....

Event: .....

Event Date: .....

Arrival Time: .....

Delivery Address: .....

Delivery City & Zip: .....

#### PAYMENT INFORMATION

All catering orders must be paid for at time of order. Call the store if you would like to pay with credit card over the phone. To pay in cash, please visit the store.

CASH     CC     OTHER .....

CC & Picture ID must be shown upon receipt of food.

Cardholder Name .....

Billing Address, City & Zip .....

Last 4 Digits:.....  
.....

By entering my name below, I certify that I am authorized to instruct Calif. Chicken Cafe to charge the full amount of this catering order to the credit card indicated and that all charges will be paid for in full.  
Cancellation policy-see FAQ's and Policies on our website.

Enter Name Above .....

Instructions: .....

#### ADDITIONS / ADJUSTMENTS / STAFF USE ONLY

Location: .....

Phone: .....

Manager: .....

Order Taker: .....

Delivery Fee: .....

Adjustment:                      X PERCENT DISC. ....

Misc: .....

Misc: .....

TOTAL ADDITIONS/ADJUSTMENTS .....