

CATERING LUNCH BOX ORDER FORM



Service Date	Service time	Service Location	No. PAX	Price p.m. 10% VAT excluded	Specifications of the confirmed menu

INVOICING: The service invoice will be headed as follows:

INVOICING ADDRESS		Shipping invoice address:		
V.A.T. or TAX ID:	e-mail:	Tel./fax:		

Deadline for orders :

May 10th 2016 or if it is requested customized bags April 18th 2016.

To define order you will receive a contract with notes and sales condition.

date and Signature _____

GERIST S.R.L. - GESTIONE RISTORAZIONE

Sede legale e Uffici: P.zza Eugenio Artom, 12 - 50127 FIRENZE; tel.: 055 32.66.711 – fax 055 32.66.880

e-mail ufficio amm.ne: amministrazione@gerist.it

Ufficio Commerciale: Via Giovanni Fabroni, 74 -76/A - 50134 FIRENZE; tel.: 055 46.33.692; fax 055 46.33.708

INTERNET: <http://www.gerist.it> indirizzo e-mail: info@gerist.it

Cap. sociale € 44.200 i.v. – Codice Fiscale e Partita I.V.A.: 03521670483

REA FI n° 367083 – Registro Imprese Firenze n° 03521670483

Sotto la direzione e coordinamento della Società CAMST Soc. Coop a r.l.