

On Top of the Palms

Direct Bill Form

Phone: (813) 974-3573

Forward by e-mail only to: catering@admin.usf.edu

Reservation Date & Time: _____

Invoice to the attention of: _____

Mail Pt: _____ Phone # _____

Email Address: _____

Invoice to Department: _____

Dining Guest Name/Group: _____

Dining Guest Phone Number: _____

Business Purpose: _____

BILLING: (Please circle one): NET 30 OR GIK
(If GIK, contact must be authorized user of GIK account.)

Guest Count _____ @ \$9.00 Per Person = \$ _____

Plus 18% Gratuity _____ Total \$ _____

Signature _____