



EVENT PROPOSAL
1300 Factory Place #101
Los Angeles, CA 90013
Phone: 213.996.6000

EVENT NAME: LOCATION:
EVENT DATE: CONTACT:
START/END TIME: PHONE #:
GUEST COUNT: EMAIL:

FAMILY STYLE MENU

1st Course

peperu - soft cheese stuffed sweet and spicy peppers, grana padano, arugula oil
ortolana - field greens, spring onions, radicchio, dates, goat cheese, champagne vinaigrette
cremosella - creamy mozzarella, spring kale~pea tendrils salad, green beans, ligurian olive oil

2nd Course

prosciutto - parma prosciutto 24 months, lightly fried sage dough, stracciatella
tradizionale - crescenza, arugula, ligurian olive oil

3rd Course

casonzei - pork sausage & beef filled egg-pasta, brown butter, pancetta, sage, parmigiano
porchetta - slow roasted pork belly, aromatic herbs, braised fennel, carrots, red onions, celery
pesce - sautéed fish of the day, seasonal vegetables
cavoletti - charred brussels sprouts, ligurian olive oil, lemon zest
patate novelle - oven roasted yukon-gold potatoes, spicy thyme-rosemary ligurian olive oil

Dessert

pane - warm bread pudding, caramel-banana sauce, vanilla gelato
saracena - mascarpone mousse, espresso-soaked buckwheat cake, toffee crunch

All food is subject to market availability

Food Only: \$75.00 per person

Large Party Minimum spend: \$125 per person for groups on Fridays & Saturdays
Beverages charged upon consumption

- + 20% service charge
+3% event coordination fee
+9.5% sales tax

Please select your style of service for the following:

Water Service: HOUSE FILTERED TAP BOTTLED SPARKLING BOTTLED STILL

Coffee & Tea Service for dessert: OFFER DO NOT OFFER

PRESELECTED WINE BOTTLES OFFERED UPON ARRIVAL: Yes NO

IF SELECTED YES, PLEASE INCLUDE YOUR CHOSEN WINES:

COCKTAILS: MENU AVAILABLE NO COCKTAILS AVAILABLE

- Please only check this box if other beverages upon guest request are not permitted
check this box if you'd like the final bill to be brought to the table for review
check this box if you'd like the final bill to be charged to the card on file without review

Allergies:

Deposit due: \$ _____ (50% deposit)

Card Holder's Name: _____

Credit Card Number: _____

Expiration Date: _____

CVC Code: _____

Card Type: _____

Card Billing Address: _____

Card Holder's Phone Number: _____

Signature: _____

DEPOSIT

A 50% deposit of the total estimated bill is due when the event confirmation is submitted. Our receipt of your deposit confirms your event. Until the deposit and event confirmation are received, the date is not confirmed. Remaining estimated balance is due the day of the event.

CANCELLATION

In the event of a cancellation, we will refund your deposit in full given 14 business days' notice. A 50% refund will be issued with between 13 – 6 days' notice. **In the event of a cancellation within 5 days of the event, no refund will be issued.**

CORKAGE POLICY

Corkage \$30 a bottle (750 mL) for the first two bottles, \$60 for every bottle after that. Limit of 1 bottle per guest. Cannot be any wines on our list.

METHOD OF PAYMENT

We accept American Express, MasterCard, and Visa. Payment is due in full on the date that services are rendered.

ATTENDANCE GUARANTEES

The final bill is based on the confirmed number of guests attending the event or the actual number of guests in attendance, whichever is greater. **Final guest count must be confirmed 3 business days prior to the event.**

TIME ALLOTTED

Parties are booked for a 2.5 hour time slot. There is a \$5 per person charge per 5 minute period beyond the allotted time period.

CREDIT CARD INFORMATION AND CONFIRMATION

Please fill out the requested information above. We will use your credit card information to reserve your event date.

THE AUTHORIZED SIGNATURE WILL ACT AS A WILLING AGREEMENT OF THE TERMS STATED ON THIS EVENT PROPOSAL. Changes may be made after the signed agreement is received. In that case the most recent proposal shall be considered the terms to which we will adhere. We will only charge your credit card at the end of the party or in the event of a cancellation unless we are instructed by you to use another credit card account or form of payment.

Print name _____ Date _____

Signature: _____