



FAX ORDER FORM

Date: _____

Customer Information
Name
Company Name
Street Address
City, State, Zip
Phone
Email Address

Order Information
Date Requested
Special Instructions

QTY	DESCRIPTION

Orders for party trays must be placed through kitchen staff only
 An invoice will be generated from this order
 This order will be placed in accordance with menu prices and special instructions listed above
 We will notify customer ASAP if we are unable to fulfill the order for any reason
 Notify customer of order pickup times between 5pm and 6:30pm, Mon. - Fri