

FAX ORDER TO: 305-444-8408



CIRCLE ONE: DELIVERY PICK-UP BY _____

ADDRESS _____ **SUITE** _____

PHONE _____ **Attn:** _____

PAYMENT FOR DELIVERY: CASH or CREDIT

ACCT # _____ **EXP** _____ **BILL ZIP** _____

sandwiches	Bread type: white or whole wht	Combo, yes / no	Side Selection	Beverage Selection	Notes

pastas, salads or hot plates

Item	Pasta type: Regular or whole wht	Salad Combo yes / no	Sauce Selection	Dressing	special intructions

pizza, sides & desserts

Item	Toppings		special intructions