FOOD TO YOU *FAX ORDER FORM*

Fax Number: 800-951-0880

(photo copy for additional forms)

Order online at www.foodtoyou.com

DO YOU NEED?

Plates ☐ No ☐ Yes Qty_____ x 15¢ ea.

Silverware ☐ No ☐ Yes Qty_____ x 15¢ ea.

Delivery Day & Date: _____ Time: _____ AM or _____ PM

1. Company Name: _____ Contact: _____

2. Delivery Address: _____

3. City: _____ Zip Code: _____ Cross Street: _____

4. Phone No.: Day: _____ Ext.: _____ Evening: _____

5. Restaurant Name: _____

ORDER		
Qty	**Item#**	**Item Description**

(USE SEPERATE SHEET FOR ADDITIONAL ITEMS. ONE SHEET PER RESTAURANT.)

METHOD OF PAYMENT: ☐ **CASH** ☐ **CHECK** ☐ **VISA / MC** ☐ **AMEX** ☐ **DISC**
☐ **BILLING ACCOUNT** (with prior approval)

Credit Card No: _____ Exp. Date: _____

Name on the Credit Card: _____

Special Delivery Instructions: _____

(As soon as we receive your order we will call you back with your total.)