CATERING ORDER FORM

Store #: _____ Date Required: _____

Order Taken By: _____ Customer Name: _____

Date Ordered: _____ Customer Phone: _____

Platter Ordered	Retail $	Qty	Sub-Total	Instructions

48 hours notice for all orders.

Order Totals & Payment:	
Sub Total	
GST/HST	
PST/Food Prep Tax	
Total	
Deposit/Method	
Credit Card #	
Expiry Date (M/Y)	

FORTINOS®

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**one copy for customer*