



Party Tray Order Form

PICK UP DATE: _____

HOT: READY TO SERVE

PICK UP TIME: _____
(NLT 6:00 PM)

COLD: WITH REHEATING INSTRUCTIONS

CUSTOMER INFORMATION:

NAME: _____

PAYMENT: _____

PHONE: _____

OTHER INFORMATION: _____

SPECIAL INSTRUCTIONS: _____

DATE ORDER PLACED: _____

ORDER RECEIVED BY: _____

ORDER DETAILS:

COOK DEPARTMENT	# OF ITEMS	SIZE	ITEM(S)	SPECIAL PREP INSTRUCTIONS
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

SEE REVERSE

