DOC`S GROUP ORDER FORM FAX TO: 419-775-7776

Order Name _____ Phone number _____

Pick-up time _____ OR Delivery time _____

Deliver To _____

Directions and/or special instructions _____

***PLEASE NOTE*: We suggest that you call ahead to find out what our delivery or pick-up schedule is for the day.**
On orders for up to 25 people, please fax your order at least 24 hours in advance.
On orders for over 25 people, please fax your order at least 48 hours in advance. THANK YOU!

NAME	SANDWICH: specify whole or half SALAD: specify small or large	SOUP Cup or Bowl	Extra items and/or special instructions