



372 STATE STREET
 SALEM, OR 97301
 503-378-7515

BOX LUNCH ORDER FORM

THIS ORDER FORM IS FOR BOX LUNCHES ONLY. PLEASE CALL IF YOU WOULD LIKE TO PLACE AN ORDER FROM THE RESTAURANT MENU.

| NAME | SANDWICH/SALAD | SIDE SALAD/CHIPS | BEVERAGE |
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DELIVERY OR PICK-UP DATE: _____

DELIVERY OR PICK-UP TIME: _____

CONTACT PERSON: _____

COMPANY NAME: _____

DELIVERY ADDRESS: _____

SUITE/OFFICE NUMBER: _____

PHONE: _____ **FAX:** _____

PAYMENT METHOD: CASH CHECK VISA/MC AMEX

CREDIT CARD No: _____

CHECK No: _____

EXPIRATION DATE: _____

* DELIVERY COST BASED ON DISTANCE.