

**Cake Order From
Phone or Fax**

(Please Print all Information)

Order Date _____

Name _____
(First and Last)

Phone _____

Type of Cake _____

of People _____ Size _____ Layers _____

Type of Filling _____

Type of Icing _____

Greeting:

Special Decoration/s and Instructions

<p>Due Out (Office use only)</p> <p>Day: _____</p> <p>Date: _____</p> <p>Time: _____</p> <p>Paid: _____</p>
--

Base Size/Price

Layer/Size	7"	9"	10"	1/4 Sheet	1/2 Sheet	Full Sheet
Serving	(6-8)	(8-10)	(12-14)	(12-14)	(44 - 50)	(80 - 100)
3	\$30.00	\$38.00	\$45.00	\$56.00	\$84.00	\$160.00

Ordered By: Phone _____ Fax _____

Credit Card information for Phone or Fax Orders

Card (Please Circle) Master Card Visa

Name on Card _____

Exp Date: _____

Signature _____

Acct: Number _____

Code on back of card _____