FAX ORDER FORM

Please call to confirm order.



Expiration Date:

S = SMALL **R** = REGULAR **L** = LARGE

SANDV	VICI	$_{\rm Hes}$ V	W = Wh	ite WW = V	Whole Wheat RP = Rosemar	y Parmesan	CHIPS	5			SALAI	DS			
QTY		SIZE	BF	READ	SANDWICH TYPE	SPECIAL INSTRUCTIONS		FLAVOUR /	LAVOUR / TYPE			TYPE OF SALAD			
		SR	_				1				1				
		SR	_				2				2				
		SR	_				3				3				
		SR	_				4				4				
		S R L				DESSERTS				SOUPS					
		SRL						FLAVOUR /	FLAVOUR / TYPE			TYPE OF SOUP	CUP or BOWL	QTY	
		SR	_				1				1		СВ		
		SR	-				2				2		СВ		
		SR	-				3				3		СВ		
		SR	-				4				4		СВ		
REAL D	EAL	SUBS					DRIN	KS							
QTY			SIZE		SANDWICH TYPE	SPECIAL INSTRUCTIONS		FLAVOUR / TYPE	SIZE or BOTTLE	QTY	CUST	OMER INFORMAT	ION		
		1	S R				1 S M L B			Contact					
		2	S R						SMLB		Phone				
		3	S R				3		SMLB		Fax				
		4	SR				4		SMLB		Comp				
PLATTERS AND PARTY SUBS												Address			
QTY		PARTY SUE	SUB TRA	BREAD	SANDWICH TYPE			SPECIAL INST	RUCTIONS						
	1	3ft 6f	SR	L							Picku	p 📄 or Delivery 🛛			
	2	3ft 6f	SR	L							Date				
	3		Bft 6ft S R L						Timea.mp.m.						
	4	3ft 6f	SR	L											
Visit www.quiznosyorkmills.com for menu											PAYMENT METHOD				
Fax your order to 416 386 1627											CASH DEBIT (Pickup only)				
	•											VISA MASTERCARD			
riease	ease call 416 386 0003 to confirm your order											Acct #:			