

FREE
Business
Design

YOUR STORE NAME HERE

123 Main Street
YOUR TOWN, STATE and ZIP
Phone 123-4567

NAME		DATE ORDERED	DATE NEEDED
ADDRESS		TAKEN BY	
CITY, STATE, ZIP		PHONE	
OCCASION		NO. OF SERVINGS	
TYPE OF CAKE		SIZE/SHAPE	
FROSTING		FILLING	
DESCRIPTION			
DECORATIONS/SPECIAL INSTRUCTIONS			
<input type="checkbox"/> PICK-UP <input type="checkbox"/> DELIVER	DAY, TIME	PRICE	
DELIVER TO:		SPECIAL CHARGES	
		TAX	
		TOTAL	
		DEPOSIT	
		BALANCE DUE	
CUSTOMER SIGNATURE			



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Thank You