BUKO PIE ORDER FORM

Pie orders must be confirmed at least 48 hours before desired pick up time.

Confirmation requires the form below to be completed in its entirety, though a different form of payment is acceptable at the time of pick up.

Size

Price

(Each)

Qty

Total

BUKO PIE			9" pie	\$45		
young coconut, coconut cream, streusel			6-8 ppl			
PAYMENT INFORMATION	<u>DN</u>	CARD TYPE:	VISA	AN	IEX	_ MASTERCARD
NAME: (as it appears on card)						
BILLING ADDRESS:						
CARD NUMBER:						
EXPIRATION DATE:	SECURITY CODE:					
CONTACT TELEPHONE:						
	to collect payment card listed above added to your ch	ed, certify that all the i nt for all the charges i e. I certify that I am th eck to help cover the c ur staff. If you would li	indicated herein, inc ne authorized signer ost of health care be	cluding sales tax, r of the credit ca enefits we offer to	by processing a procession a processing a processing a processing a processing a procession a pr	charge to the credit A 4% charge will be
PICK UP INFORMATION						
PICK UP DATE:						
PICK UP TIME:						

ORDER TAKEN BY: ___