



ORDER FORM

STORE HOURS : MONDAY – FRIDAY 10AM -6PM

NAME _____ PHONE NUMBER _____

PICK UP OR DELIVERY* _____ DATE OF EVENT _____

TIME OF PICK UP/DELIVERY _____ DELIVERY LOCATION _____

METHOD OF PAYMENT - CASH CREDIT CARD HOSPITAL DEBIT **PAYROLL IIT**

WHOLE PIZZA

ITEM	PRICE	QTY	TOTAL
CHEESE	11.99		
PEPPERONI	12.99		
SAUSAGE	12.99		
VEGGIE	13.99		
MEATZA	17.99		

LABRETTI HOT/COLD SANDWICH

ITEM	PRICE	QTY	TOTAL
MEDITERRANEAN	3.99		
KOREAN PORK	4.49		
PESTO CHICKEN	4.99		

SALAD

ITEM	PRICE	QTY	TOTAL
ROSEMARY CHICKEN DIJON	3.99		
BACON CHICKEN BLUE CHEESE	4.99		
CRAN WALNUT CHICKEN GOUDA	4.99		
STRAWBERRY GOAT CHEESE WALNUT	5.99		

ITEM	PRICE	QTY	TOATAL
BOTTLED SODA	1.65		
BOTTLED WATER	1.55		
3-PACK COOKIE	0.99		

SUB-TOTAL \$ _____

TAX 10.5% \$ _____

TOTAL \$ _____

*No delivery charge; minimum order of \$25.00. Please email completed form to

Caroline Williams at wicaroli@musc.edu & Sonia Scott at scoso@musc.edu.