Order Form

CONTACT US | EMAIL ORDER TO: **info@CateringAndMore.com** FAX ORDER TO: **510.483.6855**

MIRAGLIA CATERING

Company Name: _____ Contact Name: _____

Phone Number: _____ Fax: _____ Email: _____

Delivery Date: _____ **Serve Time**: _____ [***NOT*** *arrival time – we will specify delivery window when order is confirmed*] # of Guests: _____

Delivery Address: _____ City: _____

Floor and/or Room Number/Name: _____ Location Name (if other than company name above): _____

Onsite Contact (if other than self): _____ & Phone Number: _____

If you have not ordered a delivery from us to this location before, please fill out the following (otherwise skip to PRESENTATION):

Check One: ◯ Office ◯ Warehouse ◯ Residence ◯ Other (specify): _____

Is there elevator access? ◯ yes ◯ no Where should the delivery vehicle park? _____

BUFFET PRESENTATION STYLE: Check One: ◯ Upscale Disposable ◯ Go Greener Option (requires pickup)

If ordering hot items please check one: ◯ No Chafers ◯ Disposable Chafers @ 10.00 each ◯ Standard Chafers @ 10.00 each (requires pickup)

PLATES, etc: Compostable ware is standard on all meals. Check here to substitute: ◯ black plastic (no extra charge) ◯ China, Stainless, Linen Napkin "Board Room" Package (extra charge)

MENU:

Quantity	Item/Menu Name	Quantity	Item/Menu Name

SPECIAL INSTRUCTIONS/NOTES:

BILLING:

◯ I have an established account with Miraglia. I understand that the terms are Net 10 days and there is a 1.5% per month finance charge on all past due amounts.

Please bill me at: ◯ my billing address on file ◯ other: _____

◯ Please charge the full amount to my credit card. Name as it appears on Card: _____

Card Type: ◯ Visa ◯ M/C ◯ AX | | | | | | | | | | | | | | | | Card Number | | | | | Exp. (MM/YYYY) Security Code: _____

Billing Address on Card, including zip: _____

I have read, understand, and agree with MIRAGLIA's policy regarding count changes, cancellation fees, and payment as specified in the delivery catalog.

SIGNATURE REQUIRED for FAX: _____

for Email: ☐ Check this box to acknowledge acceptance of policy as specified **SUBMIT FORM**

PEASE SIGN ABOVE AND FAX TO US AT **510.483.6855** OR EMAIL TO **info@CateringAndMore.com**. MIRAGLIA will check availability, process your order, sign and confirm below, and return it to you. ***Order is NOT confirmed until you receive this form back with the signed confirmation below.***

CONFIRMATION OF ORDER:
Miraglia to Complete

Delivery Date: _____ Delivery Window: Delivery will arrive between _____ and _____

Notes: _____

Confirmed By: _____ Date Confirmed: _____

Thank you

All of us at Miraglia Catering look forward to providing you with the best service possible!