

Corporate Order Form

To order please complete the form below

Email: orders@calzoneandco.com.au Fax: 02 8021 7964

Upon receipt of your request our staff will contact you confirming your order.

CONTACT DETAILS

COMPANY / NAME: _____

CONTACT NAME: _____ CONTACT NUMBER: _____

ADDRESS: _____

SUBURB: _____ POSTCODE: _____

PHONE: _____ FAX: _____

DELIVERY DETAILS

COMPANY / NAME: _____

CONTACT NAME: _____ CONTACT NUMBER: _____

ADDRESS: _____

SUBURB: _____ POSTCODE: _____

PHONE: _____ FAX: _____

ORDER DETAILS

Please specify your order requirements (min order 25 units)

Calzone Type	Unit Cost	Qty	Total
Classic	\$5.00/unit		
Vegetarian	\$6.50/unit		
Smoked Provola & Ham	\$6.50/unit		

Please specify order date/frequency:

One time only: _____ (Day/Date)

Weekly: Mon Tue Wed Thur Fri

Fortnightly: Mon Tue Wed Thur Fri

Preferred delivery time (upon availability): _____

Free delivery in the Sydney CBD. Preferred delivery time will be prioritized although time of delivery may vary without notice. For delivery outside of Sydney CBD, a delivery fee applies based on location of function and size of order.

PAYMENT DETAILS

Please choose your most convenient payment option (one only)

COD – Cash on Delivery

CREDIT CARD (via PayPal)

Type: Master Card Visa

NAME AS IT APPEARS ON CARD:

CARD NUMBER:

EXPIRY: _____ / _____ (mm/yy)

SIGNATURE: _____

Credit Card Charge Authorisation

I, _____, authorize Calzone & Co. to apply the invoiced charges to the credit card indicated on this form and for PayPal to be used as a merchant facility. The charges are for the purchase of calzone and will be invoiced at delivery.

BANK TRANSFER

Calzone & Co. Bank Details:

St George Bank

BSB No: 112 - 879

ACCOUNT No: 456 345 285

A/C NAME: Calzone & Co.

Invoices must be paid within 7 days from the date of issue.