EATSTREET? SLICE? UBER? Time Order placed:	Grinders & Pizz	
Business Name or Home:	Eau Claire, Est. 1997 www.mancinoseauclaire.com	
Address:	(715) 835-4100 ph. / (715) 835-9509 fax (CA) Hospital / University / Clinic /Othe	
City:	Department:Door#/ Entra	
Phone:	Floor #:Parking Lot:_	
Slice Code or Ext: First & Last	CONTACT-FREE REQUESTED? (Incl.	
Name:	Special Instructions or Directions:	
	_	
	_	
	_	
	-	
	Ask residential customers to leave a	
	driveway &/or sidewalks cleared for	
	access to their home!	
	<u>PAYMENT</u>	
	**Ask ahead re: GRATUITY for <u>Credit</u> "We are CONTACT-FRE	
	O Cash (Change Needed? Yes / r	
Circle E.S. SLICE UBER NOTE: \$0.15 charge per place setting (i.e. 20 x P/N/F/K = \$3.00)	O By Invoice (must ask SS/ma	
Plates & Napkins # Forks & Knives #	O Credit Card ** TIP amount	
Total Due \$	Card #	
Rung In? Yes / No	EXP: CVV: Billing Z	

Time:

Day:

Date:



if faxing order!)

Hognital	/ Imirroreity	Clinic /Other	Information
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CONTACT-FREE REQUESTED? (Include instructions below)
Special Instructions or Directions:
Ask residential customers to leave a light on & keep
driveway &/or sidewalks cleared for quicker & safer
access to their home!
**Ask ahead re: GRATUITY for Credit Card deliveries "We are CONTACT-FREE!"
O Cash (Change Needed? Yes / no \$)
O By Invoice (must ask SS/manager & T/E?)
O Credit Card ** TIP amount \$
Card #
EXP: CVV: Billing Zip: