



www.daylightdonutop.com

ORDER FORM

EMAIL: DAYLIGHTDONUTOP@GMAIL.COM

Deadline for ordering: 5:00 p.m. on the day before pickup.

Name _____

Company _____ Address _____

Phone _____ Fax _____

Date & Time Ordered _____ Date & Time You'll Pick Up _____

Pick up your order: Daylight Donuts
14852 Metcalf Ave., Overland Park, KS 66223
(913) 283-7383; After hours - (614) 352-7135

Store Hours:
Mon – Fri: 6:30 am to 1:00 pm
Sat: 6:30 am to 12:00 pm
Sun: 6:30 am to 10:30 am

CREDIT CARD ACCEPTED – Complete Authorization form attached or provide information to store for processing

QTY.	CATERING COMBOS	PRICE
<input type="checkbox"/>	Classic Donuts by the Dozen A one-dozen box of our Classic - Raised or Cake donuts	\$12.79*
<input type="checkbox"/>	Daylight Dozen Eight Classic donuts, Four Fancies	\$15.69*
<input type="checkbox"/>	Specialty Dozen An assortment of Classics (5), Fancies (4) & Rolls (3)	\$19.59*
<input type="checkbox"/>	96 oz. Roasterie Coffee-to-Go (includes 8#-12oz cups with sugar & creamer)	\$19.99* <small>*plus tax</small>

A LA CARTE

PRODUCT	QTY.	PRICE EA.	TOTAL
Glazed Donut		\$1.30	
Chocolate Iced Donut w/ Sprinkles		\$1.30	
Strawberry Iced Donut w/ Sprinkles		\$1.30	
Blueberry Cake Donut		\$1.30	
Chocolate Cake Donut		\$1.30	
Red Velvet Cake Donut		\$1.30	
Old Fashioned Cake Donut		\$1.30	
Glazed French Cruller		\$1.30	
Long John - Chocolate		\$1.90	
Long John – Maple		\$1.90	
Twist – Cinnamon Sugar		\$1.90	
Twist - Glazed		\$1.90	
Maple Bacon Long John		\$2.40	
Lettered Donuts -		\$1.99	

PRODUCT	QTY.	PRICE EA.	TOTAL
Bismarck – Jelly		\$1.90	
Bismarck – Boston Creme		\$1.90	
Bismarck – Holland Creme		\$1.90	
Filled Long John		\$2.40	
Apple Fritters		\$2.40	
Pinecone		\$2.40	
Cinnamon Roll		\$2.40	
Heart Donuts		\$1.99	
Boozy Donuts - Filled		\$2.99	
Boozy Donuts, dozen; ; \$14.99 ½ dz		\$29.99	
Donut Holes (Glazed); \$1.49 ½ dz		\$2.99	
Donut Holes (Cake); min. 5 dozen		\$4.99	

SUBTOTAL	
SALES TAX	
TOTAL (CASH, CHECK, OR CREDIT CARD AT TIME OF ORDER)	

Message for Lettered Donuts/Special Instructions: _____

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card):	_____
Card Number:	_____
Expiration Date (mm/yy):	_____
Cardholder ZIP Code (from credit card billing address):	_____

I, _____, authorize _____ to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date