



MAIL ORDER FORM

Morrisons Pastry
www.morrisonspastry.com

Date _____

NAME _____

BILLING ADDRESS: _____

_____ ZIP CODE _____

TELEPHONE: _____

CREDIT CARD TYPE: Master Card Visa CHECK ENCLOSED

CREDIT CARD #

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CARD CV2 # _____ EXPIRATION DATE _____ AMOUNT \$ _____ USD

SHIP TO: SAME AS BILL TO: (NAME) _____

(ADDRESS) _____

_____ ZIP CODE _____

(TELEPHONE) _____

Email Address _____

PLACE YOUR ORDER BY • TELEPHONE • FAX • MAIL • EMAIL

OUR OFFICE HOURS ARE 8:00 AM – 3:00 PM EST (Monday thru Friday)

Mail: **Morrisons Pastry**
49-01 Maspeth Ave
Maspeth, NY 11378

Tel Orders: **(718) 326-2200 & Questions**

Fax Orders: **(718) 326-0330**

Email: sales@morrisonspastry.com

<i>Loaf Flavors</i> (4 lb. Yogurt Loaf Pre-cut 16)	<i>Item #</i>	<i>Quantity</i>
Iced Lemon Yogurt Loaf	810	
Marble Yogurt Loaf	805	
Plain Yogurt Loaf	814	
Chocolate Yogurt Loaf	809	

UPS Service Monday and Tuesday only!

Cost: 1 Loaf \$ 24.95

Buy 3 Loaves Get 4th Loaf Free

COST INCLUDES SHIPPING AND HANDLING