



Cake Order Form

Customer name: _____

Address: _____

Phone number : _____

Date for Pick-Up: _____

Time: _____

Available Fillings

<u>Mousses</u>	<u>Chocolate</u>	<u>Fruits</u>
Raspberry _____	Chocolate Mousse _____	Raspberry _____
Lemon _____	Chocolate Fudge _____	Blueberry _____
Mango _____	Chocolate Pudding _____	Pineapple _____
Vanilla _____	Chocolate Whip Cream _____	Peach _____
Strawberry _____	Chocolate Dobash _____	Strawberry _____
Yogurt _____	Chocolate Ganache _____	Black Cherry _____
Dulce de Leche _____	Chocolate Cannoli _____	

<u>Combinations</u>	<u>Classics</u>	<u>Buttercream</u>
Fresh Straws in W.C. _____	Tiramisu _____	Mocca _____
Mixed Fruit in Custard _____	Cannoli _____	Chocolate _____
Fresh Bananas in Custard _____	Custard _____	Hazelnut _____
Fresh Straws in Custard _____	Chocolate Pudding _____	Maple Walnut _____
Fresh Bananas in W.C. _____	Italian Custard _____	Coffee _____
Fresh Straws in Choc. _____	Whipped Cream _____	Vanilla _____
Wild Berries in Chantilly _____		

Sheet Cakes

Sheet cakes consist of two layers of sponge & one layer of filling.

You can order extra: 1/2 Sheet _____

3/4 Sheet _____

Full Sheet _____

Cake options:
 Vanilla: _____
 Chocolate: _____

Layered Cakes

Layered cakes consist of three layers of sponge and two fillings.



Cake List

Square Cakes

<i>Size</i>	<i>10" Sq.</i>	<i>1/2 Sheet</i>	<i>3/4 Sheet</i>	<i>Full Sheet</i>			
<i>Servings</i>	20-25	30-40	50-60	70-80			
Mark your selection here ---->							

Round Cakes

<i>Size</i>	<i>7" rd.</i>	<i>9" rd.</i>	<i>10" rd.</i>	<i>12" rd.</i>	<i>14" rd.</i>	<i>16" rd.</i>	
<i>Servings</i>	6-8	14-16	20-25	25-30	35-40	45-50	
Mark your selection here ---->							

Napolean

<i>Size</i>	<i>8" sq.</i>	<i>1/2 Sheet</i>	<i>3/4 Sheet</i>	<i>Full Sheet</i>			
<i>Servings</i>	8-10	30-40	50-60	70-80			
Mark your selection here ---->							

Please fax it either to: Port Jefferson (631) 473-7709 or East Norwich (516) 624-8702
 If you have any question feel free to contact us at Port Jefferson (631) 473-7900 or East Norwich (516) 624-8900
 Thank you for your business!

To be used only by Dortoni staff:

Method of Payment	Cash <input type="text"/>	Check <input type="text"/>	C.C. <input type="text"/>
	Type of C.C. Visa <input type="text"/>	MC <input type="text"/>	Amex <input type="text"/>
	Number <input type="text"/>		Expiration: <input type="text"/>
		Total: <input type="text"/>	

Special Instructions:

Inscriptions:

Name: _____

Occasion: _____

Age: _____

Toys: _____

Other: _____

Other: _____

Other: _____