



GROCERY ORDER FORM

Call To Order: 715-423-9750

Fax To Order: 715-424-3634

Email Order: WGFSDelivery@gmail.com

INSTRUCTIONS

Make a list of the grocery items you want
Write a detailed description of each item, including:

- ✓ Item Name milk, bread, fish, crackers
- ✓ Item Type whole milk, whole grain bread
- ✓ Brand Nabisco, Kellogg
- ✓ Packaging 16oz. can, loaf, 6-pack, small box

DELIVERY

- We will call to setup a date/time. Tuesdays, Wednesday & Fridays
- In order to guarantee delivery, please return this form no later than 12 hours prior to desired delivery time.

CHARGES - Contact Store for specifics

Requested Delivery Date: _____ **Time:** _____

We will call to confirm a date/time. Tuesdays, Wednesday & Fridays

Name _____

Street _____

City _____ **Zip** _____

Home Phone _____

Mobile Phone _____

Email _____

Credit Card # Store will Call and verify cost & payment info

Special Delivery Instructions:

If items are unavailable, would you prefer a substitution? Yes No

Produce		
QTY	Product	Description
	Apples	
	Asparagus	
	Avocados	
	Bananas	
	Beans	
	Beets	
	Blueberries	
	Broccoli	
	Cabbage	
	Cantaloupe	
	Carrots	
	Carrots (Baby)	
	Cauliflower	
	Celery	
	Cherries	
	Corn	
	Cucumbers	
	Eggplant	
	Garlic	
	Grapefruit	
	Grapes (specify color)	
	Green Beans	
	Honeydew Melon	
	Lemons	
	Lettuce (specify variety)	
	Lettuce Bag (specify variety)	
	Limes	
	Mushrooms (specify variety)	
	Nectarines	
	Onions	

Produce Continued		
QTY	Product	Description
	Oranges	
	Organics	
	Peaches	
	Pears	
	Peas	
	Peppers (specify color)	
	Pineapple	
	Plums	
	Potatoes (specify variety)	
	Raspberries	
	Spinach	
	Squash	
	Strawberries	
	Sweet Potatoes	
	Tomatoes (specify variety)	
	Watermelon	
	Zucchini	

Breads & Grains		
QTY	Product	Description
	Bagels	
	Biscuits	
	Bread (specify variety)	
	Buns (specify variety)	
	Cakes (specify variety)	
	Croissants	
	Donuts (specify variety)	
	French Bread	
	Italian Bread	
	Muffins (specify variety)	

Bath & Health		
QTY	Product	Description
	Antacid: (specify variety)	
	Bandages:(specify variety)	
	Bar Soap: (specify variety)	
	Bath Tissue:(specify variety)	
	Conditioner:(specify variety)	
	Cough Drops:(specify variety)	
	Dental Floss	
	Deodorant:(specify variety)	
	First Aid Cream	
	Hydrogen Peroxide	
	Feminine Pads: (specify variety)	
	Mouthwash: (specify variety)	
	Pain Reliever:(specify variety)	
	Pantiliners:(specify variety)	
	Rubbing Alcohol	
	Shampoo: (specify variety)	
	Shaving Cream:(specify variety)	
	Tampons:(specify variety)	
	Toothbrush	

Household		
QTY	Product	Description
	Air Freshener: (specify variety)	
	Bleach: (specify variety)	
	Broom: (specify variety)	
	Dishwasher: (specify variety)	
	Dish Soap:(specify variety)	
	Dryer Sheets: (specify variety)	
	Facial Tissues: (specify variety)	
	Furniture Polish:(specify variety)	
	Glass Cleaner: (specify variety)	
	Laundry Detergent:(specify variety)	
	Mop: (specify variety)	
	Napkins: (specify variety)	
	Paper Cups: (specify variety)	
	Paper Plates: (specify variety)	
	Paper Towels: (specify variety)	
	Room Deodorizer: (specify variety)	
	Sponge	
	Toilet Bowl Cleaner	
	Toothpicks	
	Batteries: (specify variety)	
	Lightbulbs: (specify variety)	

Additional Items: