

# SUBWAY TO GO MEAL

## REGIONAL CADET SUPPORT UNIT (PACIFIC)

To: \_\_\_\_\_ @subwaycatering.com

**Contact Information – For J4 Use Only**

Department Contact Name: <b>Canadian Armed Forces</b>	Department Contact Email:	Department Contact Number:
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**Order Information**

Restaurant Store #:	Pick-up Date:	Pick-up Time:
Restaurant/Store Address:		PST Exempt #: <b>1000-5001</b>
Corps / Squadron:	Pick-up Person:	Pick-up Person's Cell:
Notes:		

**Sandwich Order Information**

*(Subs will be built with options listed below. Provide specific dietary requirements in notes section)*

12" Subs	Bread	Type	Cheese	Veg	Dressing (on side)	Chips	Cookies	Water
<b>Quantity Required:</b>	9 Grain Wheat	Turkey	American	Lettuce Cucumbers Green Peppers Black Olives	Mayo Mustard	Various	Various	Bottled Water
<b>Quantity Required:</b>	9 Grain Wheat	Ham	American	Lettuce Cucumbers Green Peppers Black Olives	Mayo Mustard	Various	Various	Bottled Water
<b>Quantity Required:</b>	9 Grain Wheat	Cold Cuts	American	Lettuce Cucumbers Green Peppers Black Olives	Mayo Mustard	Various	Various	Bottled Water
<b>Quantity Required:</b>	9 Grain Wheat	Veggie Delight	American	Lettuce Cucumbers Green Peppers Black Olives	Mayo Mustard	Various	Various	Bottled Water

Notes:
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**For J4 Use Only:**

Financial Code: \_\_\_\_\_  
(Supporting Documents Attached)

Date Ordered: \_\_\_\_\_ Ordered By: \_\_\_\_\_

Order Number: \_\_\_\_\_ Cost: \_\_\_\_\_