

Name:	Notes:
Phone:	Email:
Event Date:	Event Location & Time:
Pick-up Date & Time (check):    Tuesday    Wednesday    Thursday    Friday    Saturday Specify Date: _____ Pick-up Time (specify between 10am – 6pm): _____	

Qty	Item	Details	Price
	1pc Box Dark Chocolate Truffle	<b>Select:</b> Box Color (check):    Red /    Cream /    Aqua OR Custom Color Exterior: _____ & Interior: _____ OR Custom Design If providing your own custom design/logo for boxes, please use the dimensions 1.75"x1.75" for size and email a PDF and AI file to yourchocolatefamily@chocolea.com Custom colors & custom designs need to be secured 4 weeks prior to pick up date and will be charged a one-time \$75 customization fee.  Flavor: _____ Select from Every Day Favorite List (www.chocolea.com/truffles) Notes:	\$2.99
	2pc Box Dark Chocolate Truffles	<b>Select:</b> Box Color (check):    Red /    Cream /    Aqua /    Coral OR Custom Color Cover: _____ & Base: _____ OR Custom Design If providing your own custom design/logo for boxes, please use the dimensions 3"x2" for size and email a PDF and AI file to yourchocolatefamily@chocolea.com Custom colors & custom designs need to be secured 4 weeks prior to pick up date and will be charged a one-time \$75 customization fee.  Flavors: _____ Select from Every Day Favorite List (www.chocolea.com/truffles) Notes:	\$4.99
	9pc Box Dark Chocolate Truffles	Flavors: _____ _____ Select from Every Day Favorite List (www.chocolea.com/truffles) Notes:	\$19.99
	20pc Box Dark Chocolate Truffles	Flavors: _____ _____ Select from Every Day Favorite List (www.chocolea.com/truffles) Notes:	\$39.99
	Oreo	Individually wrapped dark chocolate covered Oreos Flavor (check):    Original /    Mint /    Peanut Butter  Notes:	\$2.49
	Other		

<b>For Choco le'a Crew Use:</b> Order Checklist: <input type="checkbox"/> Get all info: (Name, Email, Phone, P/U Date, Order Details, CC PMT etc.) <input style="background-color: yellow;" type="checkbox"/> <b>Approved by manager</b> <input type="checkbox"/> Confirm with customer that we can fulfill order <input type="checkbox"/> Request/Assign loyalty card to customer <input type="checkbox"/> Set aside Oreo flavors/boxes/packaging and label with reserve sign <input type="checkbox"/> Add supplies needed to shopping list <input type="checkbox"/> Add to Producteev <input type="checkbox"/> Enter customer's phone# & info into Square Royalty Program. <input type="checkbox"/> Invoice or charge customer <input type="checkbox"/> Add order to invoice folder <input type="checkbox"/> Confirm payment and send receipt to confirm order <input type="checkbox"/> Order prepped in refrigerator	\$75 Customization Fee	
	Tax	
	Subtotal	
	<b>Total Amount Due</b>	
	50% Deposit Due	
	Payment Method/Date Processed/Receipt Sent	
	Remaining Balance Due	
	Payment Method/Date Processed/Receipt Sent	

Custom Order Guidelines

- For freshness, we produce to order, so please place custom orders **4 weeks** prior to the pick-up date.
- All digital files for custom box designs or custom color sections need to be received **4 weeks** prior to the pick up date.
- Customization requests must be approved prior to placing order.
- There is a \$200 minimum order for custom orders.
- Please provide a minimum 50% deposit or pay in full is to secure your order.
- An additional \$75 customization fee will be added to all custom colors/designs to cover set up printing costs.
- Payments can be made
  - 1) Credit card over the phone (808.371.2234)
  - 2) Email credit card information below (yourchocolatefamily@chocolea.com)
  - 3) Pay in person with credit card or cash at our shop (Manoa Square – 2909 Lowrey Ave.)
  - 4.) Credit Card via emailed invoice.
- **All orders must be refrigerated or kept in a cool AC environment to preserve the optimal quality and appearance of the freshly made chocolates.**

By signing this agreement, I agree to the Custom Order Guidelines as described above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*After submitting this form, a chocolate crew member will respond  
within 2 business days for confirmation and verification. Thank you!*

**Payment Information or Date Invoice Sent:** \_\_\_\_\_

Name on card: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_ Security Corde: \_\_\_\_\_