

Harvest Boxes

Please submit your order by 11 am: **Monday, July 13th**

To place an order please call 517-679-6309 or email nina@eatredhaven.com

Your Name_____

Telephone_____

E-Mail Address_____

_____ **Gar Treasures Produce Box** \$30

_____ **½ Gallon Whole Milk** \$4

_____ **Kaleidoscope Produce Box** \$24

_____ **½ Gallon Chocolate Milk** \$4

_____ **Bushel Peck Produce Box** \$26

_____ **½ Gallon Lemonade** \$4

_____ **Meat Box** \$32

_____ **½ pint Whipping Cream** \$2

_____ **Dairy Box** \$22

_____ **1 pint Buttermilk** \$3

_____ **Rose Wine & Cheese Box** \$35

_____ **1 pound Butter** \$5

_____ **Red Wine & Cheese Box** \$35

_____ **6 oz Meat Sticks** \$4.50

_____ **White Wine & Cheese Box** \$35

_____ **1 # hot italian lamb** \$10.50

_____ **Coffee Box** \$18

_____ **1 # sweet italian lamb** \$10.50

_____ **whole chicken** \$18

_____ **1 pound bacon** \$9

Pick Time: **Thursday, July 16th**

_____ 11:30-1:30

_____ 2:00-4:00

_____ 4:30-7:00

Credit Card Number_____

Expiration Date_____ CVV_____ Billing Zip Code _____

Signature of Card Holder _____

Optional Gratuity _____

Total_____ (applicable taxes may apply)

Family Meals July 16-18

To allow us enough time to order and prepare your meal, please submit your order at least 3 days before your pick up date.

To place order please call 517-679-6309 or email nina@eatredhaven.com

Your Name _____

Telephone _____

E-Mail Address _____

_____ **BBQ Platter** \$60 (small)

_____ **BBQ Platter** \$150 (large)

_____ **Fish Stew** \$50 (small)

_____ **Fish Stew** \$140 (large)

_____ **Tofu Banh Mi** \$40 (small)

_____ **Tofu Banh Mi** \$105 (large)

_____ **Quiche** \$38 (small)

_____ **Quiche** \$76 (large)

Dessert Sampler Pack

_____ **pick 4** \$24

_____ **pick 6** \$32

_____ chocolate layer cake

_____ blueberry empanada

_____ ice cream sundae

Orders will be served hot and can be picked up 5:00-8:00pm

Preferred Pick Up Time: _____

_____ Thursday, July 16th

_____ Friday, July 17th

_____ Saturday, July 18th

Credit Card Number _____

Expiration Date _____ CVV _____ Billing Zip Code _____

Signature of Card Holder _____

Optional Gratuity _____ **Total** _____ **(applicable taxes will apply)**