



ATTN: MONICA FAX# 586-566-0208, PHONE # 586-566-8700

SCHOOL NAME _____

ADDRESS _____

CITY/ZIP CODE _____

PHONE # _____

CONTACT PERSON _____

REQUESTED PICK UP DATE _____

ORDER:

\$25.00 _____

\$50.00 _____

\$100.00 _____

TOTAL _____ less 5% _____

**LOCATION PICK-UP:
MACOMB TOWNSHIP, CLINTON TOWNSHIP, WARREN
“I NEED 24 HOUR NOTICE”**