



CAKE FOR: **METHUEN** OR **SALEM**

Name: _____ **Pick up Date:** _____

Phone # _____ Time of Pick up(after noon): _____

SIZE: 8inch (serves 12-15) _____ 10 inch (serves18-20) _____

1/4 sheet (serves 25-30) _____ 1/2 sheet (serves 35-40) _____

Male or Female Age: _____

Flavors: _____

Message: _____

BASIC Colors/design: _____

Center Fillings: **\$4.00** (8 or 10 inch cake) **\$8.00** (1/4 or 1/2 sheet cake)

Crumb (Free) ____ Fudge\$4 ____ \$8 ____ Strawberries\$4 ____ \$8 ____

Candy/Other: _____ \$4 ____ \$8 ____

Simple art work additional \$4.75. Must provide a basic picture as it is hand drawn. **Detailed images must be approved by cake decorator.** _____

Special Instructions: _____

Order taken by: _____ Date taken: _____

Packed by: _____ Completed by: _____

Cake price: _____

Center filling: _____

Art work: _____

Other: _____

Total: _____

Print and bring to chosen location for pick up. Must order 48 hours prior to pick up date.