



Order your HoneyBaked Ham or Turkey for your Holiday or New Year's Eve Parties. Orders must be received by Friday, December 14, 2018, by 5 pm, and enjoy these savings:

| Quantity | Size of Honeybaked Ham or Turkey | Special CCEA Pricing | Average Counter Pricing | CCEA Pricing Savings |
|----------|----------------------------------|----------------------|-------------------------|----------------------|
| — | 4 lb Boneless Half Ham | \$40.00 | \$43.61 | \$3.61 |
| — | 9 lb Boneless Whole Ham | \$80.00 | \$87.21 | \$7.21 |
| — | 8 lb Honey Baked Ham (Bone In) | \$55.00 | \$61.97 | \$6.97 |
| — | 9 lb Honey Baked Ham (Bone In) | \$60.00 | \$69.26 | \$9.26 |
| — | 10 lb Honey Baked Ham (Bone In) | \$65.00 | \$76.55 | \$11.55 |
| — | Smoked Turkey Breast | \$26.00 | \$28.10 | \$2.10 |
| — | Roasted Turkey Breast | \$26.00 | \$28.10 | \$2.10 |
| — | 10-12 lb Roasted Whole Turkey | \$42.99 | \$42.99 | -- |
| — | 10-12 lb Smoked Whole Turkey | \$42.99 | \$42.99 | -- |
| — | 10-12 lb Cajun Whole Turkey | \$42.99 | \$42.99 | -- |

NEW

Sweet Treats

| | | | |
|---|---------------------------|---------|---------|
| — | New York Style Cheesecake | \$14.99 | \$14.99 |
| — | Red Velvet Cake | \$21.99 | \$21.99 |
| — | Southern Pecan Pie | \$10.99 | \$10.99 |
| — | Apple Walnut Carmel Pie | \$10.99 | \$10.99 |

ORDER TOTAL

\$ _____

TO PLACE AN ORDER: Complete entire order form and fax 702-866-6134 or email to aammons@ccea-nv.org. Please note that no order will be placed without a **completed order** form, which must be **RECEIVED by CCEA no later than 5:00 p.m., Friday, December 14th**. Method of payment is payroll deduction *only* — *deduction will take place on the January 10, 2019 paycheck*. **QUESTIONS:** Call Angela Ammons at 702-473-1014.

***** ORDER PICK UP: *****

Teachers Health Trust (Sedway Room) 2930 E. Rochelle Dr, LV 89121
Thursday, December 20th from 3:00 p.m. to 6:00 p.m.

CCEA is not responsible for any unclaimed orders.
Payroll deduction will still take place on unclaimed orders.

PAYROLL DEDUCTION AUTHORIZATION FORM

I authorize CCEA to deduct from my January 10, 2019 paycheck for the total purchase amount \$ _____

Member Name: _____ Last 4 Digits of SS#: _____

Personal Email _____ Phone: _____

Member Signature: _____ Date: _____