



Christmas Catering by Kapnos Kouzina

Credit Card Authorization Form

**BE SURE TO COMPLETE BOTH PAGES TO COMPLETE YOUR ORDER AND EMAIL TO EAT@KAPNOSKOUZINA.COM.
ALL ORDERS MUST BE PLACED 72 HOURS BEFORE DESIRED PICKUP DATE.**

Name: _____

Email: _____

Phone Number: _____

Celebrate the holidays with a little less stress by letting the Kapnos Kouzina team do all the cooking.

This menu is available from December 23rd-24th, 2018.

**prices do not include tax

Item	Price	Number to order	Total \$ (indicate dollar amount)
SPREADS (1 Pint with flatbread crisps, serves 4-6)			
tzatziki yogurt, cucumber, dill, citrus	\$14		\$
tyrokafteri feta, smoked manouri cheese, grains of paradise	\$16		\$
taramosalata carp roe, cauliflower	\$14		\$
hummus chickpea, tahini, sultan chutney	\$14		\$
melitzanosalata smoked eggplant, red peppers, walnuts, feta	\$16		\$
favosalata yellow lentils, scallions, black garlic	\$14		\$
stone baked flatbread garlic oil	\$3		\$
crudité carrot, cucumber, kohlrabi	\$4		\$
SAVORY			
House Made Challah (1 loaf seves 6-8)	\$12		\$
Maroulosalata apple, walnuts, pomegranate, tahini vinaigrette (serves 6-8)	\$19		\$
Braised Greens lamb bacon, chickpeas (serves 6-8)	\$28		\$
Whole Smoked Lamb Shoulder quinoa tabbouleh, tzatziki, harissa	\$75		\$
Florina honey glazed root vegetables, parsnip puree (serves 6-8)	\$33		\$
Smoked Brisket Kapama spiced tomato sauce (serves 6-8)	\$45		\$
Fourno Potatoes oregano lemons & olive oil (serves 6-8)	\$33		\$
Smoked Chicken lemon honey sauce HALF/WHOLE (serves 3-4/ 6-8)	\$16/ \$30		\$
Smoked Pork Shoulder (serves 8-10)	\$69		\$
DESSERT			
Baklava (serves 6-8) walnuts, almonds, vanilla creme anglaise	\$34		\$
			\$
			TOTAL AMOUNT:
			\$



Please complete in full to secure your order. All orders will be charged to the credit card on file with the addition of 6% Food Tax and 5% Service Fee.

Name: _____

Email: _____

Phone Number: _____

Would you like your order **WARM** OR **HOT** upon pick-up? _____ (reheating instructions will be included)

Preferred pick-up date and time: (please check date & circle desired window for pickup)

- Sunday, December 23rd : 10am-12pm OR 2pm-4pm
- Monday, December 24th: 10am-12pm OR 2pm-4pm

Credit Card Number: _____

Name on Card: _____

Billing Address: _____

Expiration Date: _____

Additional Gratuity (\$ or %): _____

Signature of Cardholder _____

I hereby authorize the following amount be applied to my credit card. All information is kept confidential and used only for the purposes as noted.

Payment Information:

All orders must be secured by a valid credit card. You can choose to charge to the card we have on file, or modify your payment method at the time of pick up. All orders must be cancelled with 48 hour notice from pick up-time. For cancellations within 48 hours, credit card may be charged the full or partial amount of the order.