MOOSE

UNGERMEATS

Ungers1903.ca
33014 Road 31E Mitchell, MB
204-326-3813

Name:

Phone #

Date:

Return customer YES / NO

1 **Burger cow** YES or NO

2 **As many steaks and roasts as possible** YES or NO

3 **What size of roasts (Lbs)** 2 3 4 5 Other _____

4 **Steak thickness (Inch)** 1/2" 3/4" 1" 1-1/4" 1-1/2"

5 **Steaks per pack** 2 3 4 5 6

6 **Ground pkg size (Lbs)** 1 1.5 2 5 10 50

7 **Soup bones** YES or NO

8 **Scraps** YES or NO

Arrival date: **Cut Date:**

Circle one: **Inspected** **Uninspected**

Circle one: **Custom** **Retail**

Circle one: **Whole** **Side** **Front** **Hind**

21 **Dressed weight:** (LBS)

22 **SMALL CUTS:**

(5% of Dressed weight permitted (over 5% is extra charge)

	Lb/Pkg	# of Packages	Total
☐ **Stew**			
☐ **Minute steaks**			
☐ **Stir fry**			

_____ x 0.05 = _____

Dressed weight X 5% = Total allotment

FRONT QUARTER

9 ***BLADE*** *(Bone In)*
- ☐ ROASTS
- ☐ STEAKS
- ☐ 1/2 ROAST 1/2 STEAK
- ☐ GROUND

10 ***CROSS RIB***
- ☐ ROASTS
- ☐ STEAKS
- ☐ 1/2 ROAST 1/2 STEAK
- ☐ GROUND

11 ***PRIME RIB***
- ☐ ROASTS - BONE IN
- ☐ ROASTS - BONELESS
- ☐ PRIME RIB STEAKS
- ☐ RIBEYE STEAKS
- ☐ GROUND

12 ***RIBS***
- ☐ SHORT RIBS
- ☐ MAUI 1/2" STRIPS
- ☐ GROUND
- ☐ OTHER *(see special notes)*

13 ***BRISKET***
- ☐ WHOLE
- ☐ HALF
- ☐ GROUND

14 ***FLANK***
- ☐ STEAK
- ☐ WHOLE
- ☐ GROUND

HIND QUARTER

15 ***LOIN***
- ☐ T-BONE
- *or*
- ☐ STRIPLOIN
- ☐ TENDERLOIN*(see below)
- ☐ GROUND

***TENDERLOIN** (CHECK ONE)
- ☐ STEAKS
- ☐ WHOLE

16 **SIRLOIN BUTT**
- ☐ ROASTS
- ☐ STEAKS
- ☐ TRI TIP
- ☐ GROUND

17 **SIRLOIN TIP**
- ☐ ROASTS
- ☐ STEAKS
- ☐ GROUND

18 **INSIDE**
- ☐ ROASTS
- ☐ STEAKS
- ☐ ROULADEN
- ☐ GROUND

19 **OUTSIDE**
- ☐ ROASTS
- ☐ STEAKS
- ☐ GROUND

20 **EYE**
- ☐ ROASTS
- ☐ STEAKS
- ☐ GROUND

23 **SAUSAGE & BURGERS**

#	VARIETY	LBS	Price	Total $

24 **# of Ground Beef Pkgs** _____ PKGS (Production use only)

25 **Special notes:**

26 **Customer approval signature**
(required for order to be filled)

Cutters initials	**Packaging Initials**
Order taken by	**Scanned Initials**

27 **Invoicing:**

Hang time:

Completion date:

Called date:

Dressed weight: @ /Lb

Butcher charge:

Small cut overage

Sausage/Burger total

Trim added @ /Lb

Hang charge

Subtotal

GST

TOTAL

Payment: Cash / Cheque / Credit / Debit

Pick up date:

CUT & WRAP/ DOG BONES			GROUND			SAUSAGE		
# of Boxes →	Cart #	Initial	# of Boxes →	Cart #	Initial	# of Boxes →	Cart #	Initial
→			→			→		
→			→			→		
→			→			→		
→			→			→		
→			→			→		
→			→			→		

NOTES:

Total Box Count

Boxes →	Cart	Initial
→		
→		
→		
→		
→		
→		
→		