Name:				<b>~</b>	^ —
Phone #			MB/C	JU	AΙ
Date:					
Return customer YES / NO		<b>4</b>		ngers19	
1 What size of roasts (Lbs)	2 3 4 5 Other	<b>UNGERMEATS</b>	330141		1-326-3813
2 Steak thickness (Inch)	1/2" 3/4" 1" 1-1/4" 1-1/2"	17 Arrival date:	C	ut Date:	
з Steaks per pack	2 3 4 5 6	Circle one:	Inspected	Uninspecte	:d
4 Chops thickness (Inch)	1/2" 3/4" 1" 1-1/4" 1-1/2"	Circle one:	Custom	Retail	
5 Chops per pack	2 3 4 5 6	Circle one:	Whole	Side	Boneless
6 Ground pkg size (Lbs)	1 1.5 2 5	18 Dressed weight: (LBS)			
7 Soup bones YES or NO		19 SAUSAGE			
		# VARIETY	LBS	Price	Total \$
8 LEG (CIRCLE ONE)	11 <b>LOIN</b> (CIRCLE ONE)		20		
WHOLE	WHOLE		15		
CUT IN HALF	CHOPS - BONE IN		25		
STEAKS	☐ GROUND/SAUSAGE		20		
GROUND/SAUSAGE					
10 RACK (CIRCLE ONE)	12 <b>SHANK</b>				
CHOPS	SHANK				
HALF RACK	GROUND/SAUSAGE				
9 <b>SHOULDER</b> (CIRLCE ONE)	12 STEW				
ROASTS	STEW				
STEAKS	GROUND/SAUSAGE				
☐ GROUND/SAUSAGE				TOTAL:	
		20 # of Ground Lamb Pkgs			
		TRIM: lbs			
		21 Customer approval signature (required fo	r order to be filled)		
		22 Initials			
		Order taken by	Packaging Initial	s	
		Cutters initials	Scanned Initials		
		23 Invoicing - (Office use only)	l l		
		Completion date:			
		Called date:			
		Dressed weight:	@	/Lb =	
		Vacpac:	@	/Lb =	
		Ready to Eat:	@	/Lb =	1
		Cure & Smoke:	@	/Lb =	
		Trim added:	@	/Lb =	
		Sausage:			
		Butcher charge:			
		Subtota	1		
		GS			
Payment: Cash / Cheque / Credit / Debit	Pick up date:	TOTA			

CUT & WR	AP/	Cl	JRED/	1	GF	ROUNE	)	SAUSAGE		E
DOG BON	ES	SM	10KEE	)	ſ	PORK				
# of Cart #	Initial	# of →	Cart #	Initial	# of _	Cart #	Initial	# of →	Cart #	Initial
Boxes		Boxes			Boxes			Boxes		
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<b>→</b>		<b>→</b>	•		T	•		<b>→</b>		
<b>→</b>		<b>→</b>	•		Τ	•		<b>→</b>		
<b>→</b>		<b>→</b>	•		I	•		<b>→</b>	•	
<b>→</b>		<b>→</b>	•		1	•		<b>→</b>	•	

Notes

Total Box Cou Boxes → Cart	
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