

Carcass ID#:
ProducerName:
Customer Email:

Customer Name:
Customer Phone#:
Customer Address:

Place a check mark in front of the desired cuts; any cuts left blank will go into the ground goat or stew.

___ Ground Goat **or** ___ Stew Meat

___ WHOLE GOAT

___ Shoulder Roast <i>Bone-In or Boneless</i> or ___ inch Shoulder Chops

___ Arm Roast or ___ inch Arm Chops
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___ STANDARD WRAP

Ground goat, stew, boneless chops and roasts less than 2 pounds will be complimentary vacuum packaged. All other cuts will be double paper wrapped.

___ Shanks

___ Sliced Neck

___ VACUUM PACKAGING

Instead of double paper wrap on bone-in chops and roasts over 2 pounds

___ Whole Rib **or** ___ Riblets

___ Rib Rack or ___ inch Rib Chops

Circle preferred weight of packages:

Ground Goat or Stew 1 pound packages

___ Whole Short Loin or ___ inch Loin Chops
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For Office Use Only:	
Boxes of Cuts	Date/Initials
Boxes of Grind	Date/Initials
Extra Boxes	Date/Initials
Date Complete/Invoiced	Initials
Date Customer Notification	Initials
Live Weight	Hot Carcass Weight

___ Bone-in Whole Leg or
___ Boneless Whole Leg
___ Shank Half Leg Roast or
___ inch Leg chops

AND

___ Sirloin Half Leg Roast or
___ inch Sirloin Chops

Once you have been notified that your order is ready, you will have 14 days to pick up. Thank You

Varieties: Tongue _____ Liver _____ Heart _____ Kidney _____
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