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|-----------------|
| Carcass ID#: |
| Producer Name: |
| 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 lamb or stew.

___ Ground Lamb or ___ Stew Meat

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|--|
| ___ Shoulder Roast Bone-In or Boneless or ___ inch Shoulder Chops |
|--|

| |
|--|
| ___ Arm Roast or ___ inch Arm Chops |
|--|

___ Shanks

___ Sliced Neck

___ Whole Rib **or** ___ Riblets

| |
|---|
| ___ Rib Rack or ___ inch Rib Chops |
|---|

| |
|--|
| ___ Whole Short Loin or ___ inch Loin Chops |
|--|

| |
|-----------------------------------|
| ___ Whole Leg Bone-In or Boneless |
|-----------------------------------|

OR

| |
|---|
| ___ Shank Half Leg Roast OR ___ inch Leg Chops |
| AND |
| ___ Sirloin Half Leg Roast OR ___ inch Sirloin Chops |

___ **WHOLE LAMB**

___ **STANDARD WRAP**

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

___ **VACUUM PACKAGING** (additional charge)

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

Ground Lamb or Stew Meat will be vacuum sealed in 1 pound packages

| | |
|----------------------|--------------------|
| For Office Use Only: | |
| Boxes of Cuts | Date/Initials |
| Boxes of Grind | Date/Initials |
| Extra Boxes | Date/Initials |
| | |
| Live Weight | Hot Carcass Weight |

Once you have been notified that your order is ready, you will have 7 business days to pick up before storage fees are assessed. Thank You

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|--|
| Varieties: Tongue _____ Liver _____ Heart _____ Kidney _____ |
| Pelt yes/no |