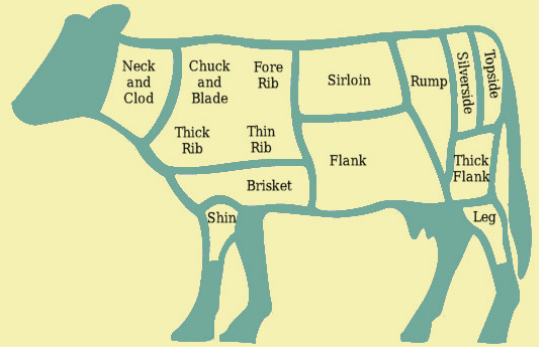


Beef Cut Order Form

Scan, email, fax, mail, or give the butcher shop this form filled out.



1/4 Beef 1/2 Beef Whole Beef

Name _____
 Phone _____
 Beef Seller's Name (if different) _____
 Beef Seller's Phone _____
 Scheduled Delivery Date for Kill _____

| HAMBURGER POUNDS PER PACKAGE | FAT FOR RENDERING | STEW MEAT POUNDS PER PACKAGE |
|---------------------------------|--------------------------|---------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| ORGAN MEATS | | OTHER | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------|------------|
| Y | N | Y | N | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Liver | Short Ribs |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Heart | Soup Bones |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tongue | Brisket |

Prime Roast pounds _____
 Chuck Roast Pounds _____
 Arm Roast Pounds _____
 Rib/T-Bone Thickness _____
 How many per package _____
 Sirloin Steak Thickness _____
 Steaks per package _____
 Round Steak *plain* *cubed*
or hamburger

Tri-Tip Steak *or* Tri-Tip Roast
 Top Round *plain* *cube* *roast*
 Sirloin Tip *plain* *cube* *roast*
 Bottom Round *plain* *cube*
or roast
 Eye of Round *plain* *cube*
or roast
 Flat Iron Steaks Yes *or* No
 Flank Steak *plain* *cubed*
or hamburger