BONE IN CUTTING INSTRUCTIONS

Date _____

Customer Name _____
Address _____
_____
Phone # _____
Cell # _____

Beef kill # _____
Weight _____
Whole _____ or Half _____
Price per pound _____
Extra charges _____
boxes used _____
Delivery charge _____

Cuts	**Thickness (in) or size (lb)**	**# steaks per package**
T-Bones		
Sirloin steak		
round steak		
sirloin tip steak		
flank steak Yes___ No___		
rump roast		
pikes peak roast		
rib steak		
or rib roast		
chuck roast		
and/or		
chuck steak		
pot roast		
ground beef		
specialty cuts		

skirt steak Yes ___ No ___
brisket Yes ___ No ___
Stew meat Yes ___ No ___
short ribs Yes ___ No ___
soup bones Yes ___ No ___
beef shanks Yes ___ No ___

heart Yes ___ No ___
liver Yes ___ No ___
tongue Yes ___ No ___
ox tail Yes ___ No ___

Note: an extra charge will be added for specialty cuts. _____
Note: an extra charge will be added for any item changes. _____
Note: there will be no portion control on locker beef orders.

Comments: _____

Order taken by : _____

Total charges: _____