

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone #: \_\_\_\_\_

Hanging Weight: \_\_\_\_\_  
 Date of Drop off: \_\_\_\_\_  
 Email: \_\_\_\_\_

Steak thickness 3/4 1 1 1/4 Other \_\_\_\_\_ Roast size# \_\_\_\_\_  
 How many in package \_\_\_\_\_  
 Burger Size 1# 1 1/2 # 2 # Other \_\_\_\_\_ Circle: Heart, Liver, Tongue

**BEEF** 2026  
**Front Quarter**

Chuck:	Roast _____ Steak _____	Stew/Kebob/Stir fry Meat Size# _____	# of Packs _____
Rib:	Rib Roast _____ lbs. _____ B/I or Boneless Boneless Rib Steak _____ Bone In Rib Steak _____	Bone In Shank Steaks Neck Bones Dog/Marrow Bones Knuckle Bones OxTail Skirt Steak Hanger Steak Flat Iron Suet	Yes _____ No _____ Yes _____ No _____
Shoulder:	Roast _____ Shoulder Steak _____	Brisket	Whole _____ Halves _____ No _____
Loin:	T-Bone & Porterhouse _____ Or Strip steak _____	Flank Short Ribs Butt Flap Tri Tip	Yes _____ No _____ Yes _____ No _____ Yes _____ No _____ Yes _____ No _____
Tenderloin:	Roast _____ Steak _____		
Sirloin:	Roast _____ Steak _____		
Sirloin Tip:	Roast _____ Steak _____		
Top Round:	Roast _____ Steak _____		
Bottom Round:	Roast _____		
Eye of Round:	Roast _____ Steak _____		

**Special Requests:**

Top Round: Roast \_\_\_\_\_  
Steak \_\_\_\_\_

Bottom Round: Roast \_\_\_\_\_

Eye of Round: Roast \_\_\_\_\_  
Steak \_\_\_\_\_

**# Patties/Links**

**# of Boxes:**

**\*Reminder – Storage Fee – After 3 business days of being notified of your products completion, pick up is required. If you do not pick up then a \$20 per day fee is assessed.\***