

Lemay and Sons, Beef **Lamb Cutting Sheet**
Fax (603) 657-7101

Lamb _____ Process Whole _____

Leg: Whole _____ Half _____ Bone In _____ Boneless _____ Other _____

Loin: Chops _____ Thickness _____ # per pkg. _____ Other _____

Shoulder: Roasts - Bone in _____ Boneless _____ # lbs _____

Or Sliced Or Stew Or Ground Meat Shanks _____ Yes / No

Rib: Chops _____ Thickness _____ # per pkg. _____

Rack o' Lamb _____ lbs. Per item _____ Other _____

Trimmings: **Ground** _____ **or Sausage Bulk** _____ **or Sausage Links** _____

Vacuum Packaging **Yes / No** (Extra Charge)

Custom Labeling (For Resale) **Yes / No** Farm Name _____

Save:	Hide	Yes / No
	Kidney	Yes / No
	Kidney Fat	Yes / No
	Liver	Yes / No
	Heart	Yes / No
	Bones	Yes / No

Name _____ Telephone _____

Address Required _____

INCOMING DATE/ORDER DATE _____