

NAME: _____ DATE _____

FARM LABEL NAME: (IF USING YOUR OWN LABEL) _____

ADDRESS: _____

TEL# _____ CELL # _____ EMAIL: _____

WHITE WRAP _____ OR VACUUM PACKED _____

WE DO NOT PRINT THE WEIGHTS OF PACKAGES ON YOUR PACKAGES

Ground Veal: How much in a Package? _____

Veal Stew Meat: How much in Package? _____

Steaks: How thick? _____

Loin Chops: How thick? _____ How many in a package _____

Front 1/4:

Shoulder:

Shoulder Chops: Yes _____ or No _____

Shoulder Roast: Yes _____ or No _____

Roast: Bone-In _____ or Boned & Rolled _____

Or Shoulder Ground and Stew Meat: Yes _____ or No _____

Osso Buco (Veal Shanks) : Yes _____ or No _____

Veal Rib Chops: _____ or Rack of Veal _____

Veal Breast: _____ or Stew and Ground _____

Or Veal Short Ribs: Yes _____ or No _____

Veal Cutlets: Yes _____ or No _____

Hind 1/4:

Osso Buco (Veal Shanks): Yes _____ or No _____

Veal Loin Steaks _____ or Cutlets _____

Veal Top Round Steaks _____ or Veal Round Roast _____ or Veal Cutlets _____

Remaining Veal Round: Veal Cutlets _____ or Roasts _____ or Ground _____

Do you want all the bone? Yes _____ or No _____

Do you want: Heart, Liver, Tongue, Kidneys and Sweet Breads? Yes _____ or No _____

Picking up of processed meat: Monday thru Friday 8 am- 4 pm, Saturday 8 am to 12 pm (noon). NO PICKUP ON SUNDAYS. If you come after hours, you will be asked to come back.

TAG # _____
BAGS _____ OR
BOXES _____
Boxes will be packed around 50 lbs