NAME: _____ CELL PHONE: _____

TAG #: _____ DATE: _____

LOINS: WHOLE_____ BNLS BUTTERFLIED_____ BONE-IN PORK CHOPS_____
Pork Chops   (Needs to be 100# +)   **TYPE:** _____

HAMS: STEAKS_____ CUTLETS_____ ROAST_____ TRIM_____ **WEIGHT:** _____
Bone-in or BNLS   Bone-in or BNLS   Bone-in or Hide on

 # OF LUGS: _____

SHOULDERS: ROAST_____ CUTLETS_____ TRIM_____

SHIP / PICKUP

COUNTRY STYLE RIBS_____

CAPE FOR MOUNT
YES OR NO

SPARE RIBS_____ **GROUND PORK**_____
Split or Whole

TAXIDERMIST_____

SAUSAGE: PAN SAUSAGE_____ REG SPICY **CHORIZO**_____

SMOKED SAUSAGE: REG_____ JAL/CHZ_____ JAL_____ CHZ_____
Pure Pork OR Beef

 # OF ANIMALS: _____ *DEPOSIT:* _____