

# BEEF ORDER - *SIDE*

Name: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Options:**

Beef (circle one):

- More steaks
- More roasts
- Half steaks & half roasts

- \*\* Choose between:      Eye Steaks                      **OR**      Eye of Round Roast  
 \*\* Choose between:      Sirloin Tip Steaks            **OR**      Sirloin Tip Roast  
 \*\* Choose between:      Round Steaks                   **OR**      Top Round Roast

Steak	Thickness	# per package
T-Bone	_____ inch	_____
Sirloin	_____ inch	_____
Sirloin Tip	_____ inch	_____
Rib	_____ inch	_____
Blade	_____ inch	_____
Round	_____ inch	_____
Minute	_____ inch	_____

Roast	# of lbs.
Prime Rib	_____
Steak Roast	_____
Short Rib	_____
Blade	_____
Eye of the Round	_____
Sirloin Tip	_____

Other	
Hamburger	Lean <b>OR</b> Regular & _____ lbs per package
Patties	Seasoned <b>OR</b> Regular
Bones for Soup	YES or NO
Braising Ribs	YES or NO
Shank	YES or NO
Dog Bones	YES or NO

Date Ordered: \_\_\_\_\_  
 Total Pounds: \_\_\_\_\_ lbs X \$ \_\_\_\_\_ per lb.  
 Deposit: \$ \_\_\_\_\_ (date of deposit) \_\_\_\_\_  
 Date Picked Up: \_\_\_\_\_