



**NFS
LAMB**

(240) 807-9361

3521 Chestnut Ridge Rd Grantsville MD 21536

Customer Name _____

Phone _____

Date _____

Lamb ID (Office will fill out) _____

Name of Farm or Farmer _____

1/2 lamb Whole lamb

notes & special instructions:

LEG (check one)

- | | |
|--|--|
| <input type="checkbox"/> WHOLE (boneless) | <input type="checkbox"/> WHOLE (bone in) |
| <input type="checkbox"/> CUT IN HALF (boneless) | <input type="checkbox"/> CUT IN HALF (bone in) |
| <input type="checkbox"/> SHANK ROAST & SIRLOIN CHOPS | |

SHOULDER

- | | |
|---|--|
| <input type="checkbox"/> WHOLE (boneless) | <input type="checkbox"/> WHOLE (bone in) |
| <input type="checkbox"/> CUT IN HALF (boneless) | <input type="checkbox"/> CUT IN HALF (bone in) |
| <input type="checkbox"/> CHOPS | <input type="checkbox"/> STEW |
| | <input type="checkbox"/> GROUND |

RIBS (check one)

- WHOLE RACK RIBLETS GROUND

LOIN

How thick would you like your chops? 3/4" 1" 1 1/4" 1 1/2"

How many chops to a pack? _____

RACK (check one)

- CHOPS ROAST FRENCHED CROWN

SHANK (check one)

- WHOLE GROUND

REMAINING BONES

- I WANT THEM I DON'T WANT THEM

GROUND

- 1# packs 2# packs