

Smith Valley Meats Lamb Cut Sheet

****Cut sheet must be filled out when lamb is brought in****

Customer _____ Date Brought in ___/___/___

Tag # _____ Phone # & Email _____

Complete Address: _____

Cuts/: **Weight/No. Per PK**

Leg Of Lamb _____

Rack of Lamb _____

Lamb Chops _____

Lamb Burger _____

Lamb Sirloin steaks _____

Lamb Shoulder Roast _____

Lamb Shanks _____

Lamb Chuck Roast _____

Lamb Shoulder Chops _____

Soup Bone _____

Stew _____

Cuts: **Weight/No. Per PK**

Kabobs _____

Rack of Ribs _____

Shoulder Steaks _____

Heart _____

Kidney _____

Liver _____

Tongue _____

Oysters _____

Inventory: Yes or No

(\$5 charge for inventory. Please specify how many sheets and how they are to be divided).

Extra Notes:

