GAME

UNGERMEATS

CIRCLE ONE: GOOSE   BEAR   OTHER _____

Ungers1903.ca
33014 Road 31E Mitchell, MB
204-326-3813

Name:

Phone #

Date:

Return customer   YES / NO

1 **What size of roasts (Lbs)**   2   3   4   5   Other _____

2 **Steak thickness (Inch)**   1/2"   3/4"   1"   1-1/4"   1-1/2"

3 **Steaks per pack**   2   3   4   5   6

4 **% of Pork Trim in Sausage/Ground**   20%   30%   40%   50%   ____ Other

5 **Ground pkg size (Lbs)**   1   1.5   2

6 **Scraps**   YES   or   NO

7 **Harvester #: _____**

8 **Special notes:**

Arrival date: **Cut Date:**

Circle one: Whole   1/4's   Boneless

Circle one: Fresh   Frozen

16 **Dressed weight:** (LBS)   Approx Boneless weight:_____ lbs

17 **SAUSAGE** | | | **Production Use Only** | | |

priority #	VARIETY	Batch Size	Game Trim (lbs)	Pork Trim (lbs)	Price	Total $
	Farmer Sausage	20				
	Pepperoni Sticks Mild / Med / Hot	15				
	Honey Garlic Sticks	15				
	Garlic Sausage	25				
	Breakfast Sausage	15				
			Total:	**Total:**		

9 **SHOULDER**
☐ ROASTS
☐ GROUND/SAUSAGE

10 **LOIN (BACKSTRAP)**
☐ ROASTS
☐ STEAKS
☐ GROUND/SAUSAGE

11 **TENDERLOIN**
☐ WHOLE
☐ GROUND/SAUSAGE

12 **HIP**
☐ ROASTS
☐ STEAKS
☐ GROUND/SAUSAGE

14 **STEW**
☐ STEW

(5% of Dressed weight permitted (over 5% is extra charge)

Circle One: 1   1.5   2   (lbs/PKG)

# of PKGS: _____

15 **GROUND**
☐ *GROUND* (No Pork)

# of PKGS: _____

☐ *GROUND W/ PORK*

# of PKGS: _____

18 **Customer approval signature** (required for order to be filled)

Cutters initials	Packaging Initials
Order taken by	Scanned Initials

19 **Invoicing:**

Completion date:	
Called date:	
Dressed weight:	@ /Lb
Butcher charge:	
Cleaning charge:	
Small cut overage:	
Sausage total:	
Trim added:	@ /Lb
Other:	
Subtotal	
GST	
TOTAL	

13 **TRIM** (production use only)

DEER TRIM: _____ LB

UM PORK TRIM: _____ LB

OWN PORK TRIM: _____ LB

UM BEEF TRIM: _____ LB

Payment: Cash / Cheque / Credit / Debit   Pick up date:

CUT & WRAP/ DOG BONES			GROUND			SAUSAGE		
# of Boxes →	Cart #	Initial	# of Boxes →	Cart #	Initial	# of Boxes →	Cart #	Initial
→			→			→		
→			→			→		
→			→			→		
→			→			→		
→			→			→		
→			→			→		

NOTES:

Total Box Count

Boxes → Cart	Initial
→	
→	
→	
→	
→	
→	
→	