

Cool Springs Lamb/Goat Cut Sheet

GOAT OWNER

Name: _____

Address: _____

Phone: _____

GOAT BUYER

Name: _____

Address: _____

Phone: _____

| CUTS | WHOLE | HALF | CHOPS | STEW | GROUND | BONELESS? Y/N |
|---------------------------------|-----------------|------|-------|--------|--------|------------------|
| 1. LEG | | | | | | |
| 2. LOIN | | | | | | |
| 3. RIB <small>(Rack)</small> | | | | | | |
| 4. NECK | | | | | | |
| 5. SHOULDER | | | | | | |
| 6. SHANK | | | | | | |
| 7. BREAST | | | | | | |
| CHOPS PER PACKAGE: | CHOP THICKNESS: | | | HEART | | |
| | | | | LIVER | | |
| | | | | KIDNEY | | |
| ADDITIONAL INSTRUCTIONS: | | | | | | |

