

Farm Name: _____
 Contact Person: _____
 Email: _____
 Phone Number: _____

**Cut Sheets with missing Information
 cannot be matched to bookings.
 Please fill out Farm Name, Contact
 Person, Email, and Phone Number.**

Office Use Only

Lot Number: _____
 Total # Chicken: _____
 Label Type: _____

☐ Made ☐ Added to Production Folder

NUMBER OF WHOLE CHICKENS _____ NUMBER OF CUT CHICKENS _____

☐ Whole Chicken

_____ # of Chicken Spatchcock

_____ # of Chicken Halved

CUT OPTIONS:

PACKAGING FOR CUT OPTIONS:

Breasts

of Chicken

_____ ☐ Split Breasts
 _____ ☐ Boneless Breasts
 _____ ☐ Boneless Skinless Breasts

☐ 5pks ☐ 3pks ☐ Special Instructions: _____
☐ 5pks ☐ 3pks ☐ Special Instructions: _____
☐ 5pks ☐ 3pks ☐ Special Instructions: _____

Thighs

of Chicken

_____ ☐ Quarters
 _____ ☐ Thighs
 _____ ☐ Boneless Thighs
 _____ ☐ Boneless Skinless Thighs
 _____ ☐ Ground with Skin

☐ 6pks ☐ 4pks ☐ Special Instructions: _____
☐ 6pks ☐ 4pks ☐ Special Instructions: _____
☐ 6pks ☐ 4pks ☐ Special Instructions: _____
☐ 6pks ☐ 4pks ☐ Special Instructions: _____
☐ 1 lb.

_____ ☐ Ground

☐ 1 lb.