Beef Processing Sheet

Miller Charm Farm LLC, 137 St Peters Road, Tamaqua PA 18252, Phone: (570)386-4387
Prices Subject to change without notice

Name: _____ Phone #: _____ Date: _____

Clerk: _____ Whole Steer **OR** Half Steer **OR** Hind Quarter **OR** Front Quarter **OR** Split Half (Extra Fee $15 each)

VAC SEAL: No OR Yes, (Steaks/pk: ___ Bones/pk: ____) ***Steak Thickness:*** _____ ***Roast lb.***_____

MCF Steer: ____ ***OR*** *Their Steer:* ____ (Label Name: _____) Weight of Steer: _____

Front Quarter *Highlite Choice,*	***Initial Check*** *MCF Use Only*
Chuck Roast	
Chuck Steak	
OR Grind	
Shoulder Roast ***OR*** Grind	
Standing Rib Roast	
Ribeye Steaks	
OR Boneless Ribeye	
w/Short Ribs	
Skirt Steak ***OR*** Grind	
Shin meat ***OR*** Grind	
Brisket ***OR*** Grind	

Ground Beef *Highlite Choice*	***Initial Check*** *MCF Use Only*
1 lb. ***OR*** 1.5 lb. ***OR*** 2 lb.	

Patties: *Highlite Choice & Give Amount*	***LBS.***	***Initial Check*** *MCF Use Only*
¼ lb. ***OR*** 1/3 lb. (Extra Fee of $.60/lb.)		

Cubes *Highlite Choice & Give Amount*	***LBS.***	***Initial Check*** *MCF Use Only*
1 lbs. OR 2 lbs.		

Organs *Highlite Choice*	***Initial Check*** *MCF Use Only*
Heart	
Liver	
Tongue	
Ox Tail	
Soup Bones	
Suet	

Hind Quarter *Highlite Choice*	***Initial Check*** *MCF Use Only*
T-Bone	
OR NY Strip Steak and Tenderloin	
Sirloin Steak	
Sirloin Tip Steak	
Sirloin Tip Roast	
Top Round Steak	
London Broil Roast	
Bottom Round Roast	
Rump Roast	
OR Chipsteak Lbs: (Extra Fee $1.00/lb.)	
Eye Roast	
Eye Steaks	
OR Grind	
Flank Steak ***OR*** Grind	
Shin Meat ***OR*** Grind	

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Special Instructions:

BOX WEIGHTS

Cost Worksheet:

MCF Steer: $_____ x _____ lbs. $_____

OR

Their Steer:

$150/head Slaughter Fee (Additional$40 if over 1500 lbs.) $ _____

Processing Fee $.45 x _____ lbs. $ _____

Additional Fees:

Split Half $15 $ _____

Vacuum Sealing $.50 x _____ lbs. $ _____

Patty Fee $.60 x _____ lbs. $ _____

Chipsteak $1.00 x _____ lbs. $ _____

Aging Fee $15 x _____ # of days (TBD by Randy) $ _____

Extra Freezer Storage $10 x _____ # of Days (TBD by Randy) $ _____

(Prices subject to change without Notice)

Called: _____/_____/_____ ***TOTAL COST: $ _____***

Initial/Date/Time

Date Picked Up: _____ Customer's Signature: _____ Clerk's Initials: _____

MCF is not responsible to pay if your animal is rejected by USDA during slaughter