

**MILLIKEN MEAT PRODUCTS LTD.**3447 Kennedy Road, Unit 1  
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DATE: \_\_\_\_\_

FROM: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

TEL: \_\_\_\_\_ FAX: \_\_\_\_\_

P.O. No. \_\_\_\_\_ PERMIT No. \_\_\_\_\_

DATE TO BE PREPARED BY: \_\_\_\_\_

FELINE DIET <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
CARNIVORE DIET <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
CANINE DIET <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
CHUNK DIET <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
NUCKLE BONE <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
SHANK BONE <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
FEMUR BONE <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
SHOULDER BONE <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE
NECK BONE <input type="checkbox"/>	WEIGHT	CARTONS	LOT No.	PRICE