



# MEATWORKS PORK CUTTING INSTRUCTIONS

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HOURS OF OPERATION 7:00AM TO 4:00PM

LIVESTOCK RECEIVING HRS MON-FRI 1:30PM TO 3:30PM SUNDAY 12:00PM TO 1:00PM

CUSTOMER NAME			FARM NAME	
PHONE #	# OF ANIMALS	PEN #	KILL DATE	ORDER #
ANIMAL ID (S)/LIVE WEIGHT				
LOT #/CARCASS ID (S)				
THICKNESS: 1"__ 1.25"__ 1.5"__ ROAST WEIGHTS: 2-3LBS__ 3-4LBS__ 4-5LBS__				
<b>PORK SHOULDER *IF YOU SELECT SMOKE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
CHECK ONE: 3168 WHOLE SKIN-ON__ 3172 ARM ROAST__ GRIND__ SMOKE__				
SPECIAL INSTRUCTIONS:				
<b>PORK BUTTS *IF YOU SELECT SMOKE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
CHECK ONE: 3184 ROAST__ 3186 BLADE STEAKS__ 3198 COUNTRY-STYLE RIBS__ SMOKE__ GRIND__				
SPECIAL INSTRUCTIONS:				
<b>PORK HAMS *IF YOU SELECT SMOKE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
CHECK ONE: 3402 CENTER CUT ROAST__ 3404 CENTER CUT STEAKS__ SMOKE__ GRIND__				
SPECIAL INSTRUCTIONS:				
<b>PORK BELLY *IF YOU SELECT SMOKE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
CHECK ONE: 3427 WHOLE SKIN-ON__ SMOKE__ 3468 SPARE RIBS YES__ NO__				
SPECIAL INSTRUCTIONS:				
<b>PORK LOINS *IF YOU SELECT SMOKE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
CHECK ONE: (RIB/LOIN/SIRLOIN): 3268/3266/3328 BI ROASTS__ 3298/3313/3338 BI CHOPS__ SMOKE__ GRIND__				
SPECIAL INSTRUCTIONS:				
<b>GROUND PORK *IF YOU SELECT SAUSAGE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED</b>				
5400 1-LB PKG__ 5401 2-LB PKG__ 5403 5-LB PKG__ SAUSAGE__ (50 LB MINIMUM PER SAUSAGE BATCH)				
SPECIAL INSTRUCTIONS:				
<b>PORK ORGAN MEAT *ALL ORGAN MEAT PASSING USDA INSPECTION WILL BE PACKED AND SAVED FOR CUSTOMER</b>				
CHECK ONE: 4005 JOWLS SKIN-ON__ SMOKE__ GRIND__ 4020 LIVER 4040 HEART 4050 KIDNEY 4090 PIGS FEET 3511 HOCK__ SMOKE__ GRIND__				
SPECIAL INSTRUCTIONS:				
<b>COMMENTS:</b>				

**\*\*\*IF CUT SHEET IS NOT TURNED IN AT TIME OF DROP OFF YOU WILL BE CHARGED A \$25 ADMIN FEE**

**\*\*\*SPECIAL INSTRUCTIONS MAY RESULT IN ADDITIONAL FEES DEPENDING ON LABOR AND PACKAGING INVOLVED**

**\*\*\*MINIMUMS APPLY FOR ALL VALUE ADDED SERVICES**

**VALUE ADDED SERVICE INSTRUCTIONS (CHECK AND/OR CIRCLE CHOICES)**

**FRESH SAUSAGE OPTIONS  
50 LB MINIMUM PER BATCH**

	<b>BULK</b>	<b>LINKS</b>	<b>4-OZ PATTY</b>
	<b>ADD \$.75/LB</b>	<b>ADD \$1.75/LB</b>	<b>ADD \$1.25/LB</b>
BREAKFAST	5421	5481	5441
MAPLE BREAKFAST	5422	5482	
HOT ITALIAN	5423	5483	
SWEET ITALIAN	5424	5484	
CHORIZO	5428	5488	
FRESH KIELBASA	5427	5487	
BRATWURST	5426	5486	

**SMOKED SAUSAGE OPTIONS ADD \$2.25/LB**

**CHECK ONE:**

NATURAL CURE (100 LB MINIMUM ADD \$.50/LB)

  


CONVENTIONAL CURE

SMOKED KIELBASA	3487
SMOKED ANDOUILLE	3488

**SPECIAL INSTRUCTIONS:**

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**SMOKED BACON OPTIONS ADD \$2.25/LB  
2 PICNIC, BUTT, BELLY MINIMUM**

**CHECK ONE:**

NATURAL CURE (100 LB MINIMUM ADD \$.50/LB)

CONVENTIONAL CURE

  


SMOKED PORK BULK JOWL	3944
SMOKED PORK SLAB BACON	3090
SMOKED PORK JOWL, SLICES	3946
SMOKED PORK SLICED BACON	3919
SMOKED PORK COTTAGE BACON	3566
SMOKED PORK LOIN CANADIAN-STYLE BACON	3659

**SMOKED HAM/LOIN OPTIONS ADD \$2.10/LB  
2 PICNIC, BUTT, HAM, LOIN MINIMUM**

**CHECK ONE:**

NATURAL CURE (100 LB MINIMUM ADD \$.50/LB)

CONVENTIONAL CURE

  


SMOKED PORK SHOULDER ROLL	3565
SMOKED PORK SHOULDER PICNIC WHOLE	3569
SMOKED PORK SHOULDER PICNIC HALF	3570
SMOKED PORK HOCK	3589
SMOKED PORK LOIN ROAST	3629
SMOKED PORK LOIN CHOPS	3630
SMOKED PORK LOIN RIB CHOPS	3640
SMOKED HAM WHOLE	3670
SMOKED HAM SHANK PORTION	3729
SMOKED HAM RUMP PORTION	3703
SMOKED HAM CENTER ROAST	3741
SMOKED HAM CENTER SLICE	3743

I attest that all livestock referenced by this document and delivered to Meatworks was/were born, fed, and raised in the USA. I further attest to adhering to the required withdrawal time for any medication that has been administered to my animal(s) prior to slaughter. I understand that unacceptable levels of drug residues detected in edible tissues collected at time of slaughter may result in traceback, quarantine, and potential fines or jail time.

**CUSTOMER SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**YOU WILL BE CALLED AS SOON AS PRODUCT IS READY FOR PICK UP**

This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).