

MEATWORKS LAMB CUTTING INSTRUCTIONS

(774) 319-5616 / travis@meatworkswestport.com HOURS: 7:00AM - 3:30PM LIVESTOCK RECEIVING HRS:

FIVE LAMBS PER CUT SHEET \$100 CHARGE FOR EACH ADDITIONAL CUT SHEET

MON	- THUR 1:00PM - 3:00I	PM SUN 12:0	00PM - 1:00PM		COTSHEET
CUSTOMER NAME			FARM NAME	<u> </u>	
PHONE #	# OF ANIMALS	PEN#	KILL DATE	ORDER #	
EMAIL CONTACT	•	•	•	·	
LOT #/CARCASS ID (S)					
	CUTTING & PACKAGIN	G FEES DOUB	LE WITH SPECIAL REQU	ESTS.	
Meatworks will make reasonable cutting decisions at the butcher's	s discretion based on the size of		pecies, desired finished prodi		
ENTIRE LAMB					
CIRCLE ONE: 2927 STEW ME	EAT BONE-IN YES / NO	CHECK ONI	E: 2926 SMALL CHUNKS	3019 LAR	GE CHUNKS
LAMB NECK					
CHECK ONE: 2927 NECKRO	AST 3019 STEW ME.	AT BONE-IN_	_		
LAMB SHOULDER					
CHECK ONE BLADE/ARM: 2	2920/2916 BI ROAST 29)22/2918 BI CH(OPS GRIND 30	10 SHANK YES	NO
LAMB RIB					
CHECK ONE: 2942 BI RIB RO	DAST 2948 BI RIB CHC	PPS GRIN	ID		
LAMB LOIN					
CHECK ONE (LOIN/SIRLOIN): 2954/2981 BI LOIN ROAS	Γ 2955/298	33 BI LOIN CHOPS C	GRIND	
LAMB BREAST					
CHECK ONE: 3007 WHOLE_	3004 BNLS ROLLED	_ (IF BNLS)	3008 SPARE RIBS		
LAMB LEG					
CHECK ONE: 2964 WHOLE_	2979 LEG CENTER RO.	AST GRI	ND		
GRIND *IF YOU SELECT SA	USAGE THE VALUE-ADDE	ED SERVICE SA	ECTION MUST BE COMP	PLETED	
5200 1-LB PKG 5203 5-L	B PKG SAUSAGE				
LAMB ORGAN MEAT *ORG	AN MEAT PASSING USDA IN	SPECTION			
CIRCLE ONE: YES / NO	2020 LIVER 2040 HEAR	T 2050 KIDN	IEY		

VALUE ADDED SERVICE INSTRUCTIONS (CIRCLE CHOICES)

BULKULBY LIGH

FRESH SAUSAGE OPTIONS ADD ADD 50 LB MINIMUM PER BATCH \$1,20/LB \$2,20/LB

Signature Blends

BREAKFAST	5221	5281
HOT ITALIAN	5223	5283
SWEET ITALIAN	5224	5284
CHORIZO	5228	5288
**MAPLE BREAKFAST	5222	5282
**BRATWURST	5226	5286

^{**}While supplies last**

*\$50 FEE FOR CUT SHEETS NOT TURNED IN AT TIME OF DROP OFF **CUTTING & PACKAGING FEES DOUBLE WITH SPECIAL REQUESTS.** *MINIMUMS APPLY FOR ALL VALUE ADDED SERVICES

By signing you agree to our Terms of Service.

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 PLEASE SCHEDULE PICK UP WITHIN 5 DAYS OF BEING NOTIFIED TO AVOID CHARGES

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, 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.