



MEATWORKS
GOAT CUT SHEET
(774) 319-5616
bookings@meatworkswestport.com

ORDER # (Leave Blank): _____

CHOP THICKNESS: 1.25" _____ 1.5" _____

FARM: _____

ROAST WEIGHTS: 2-3# _____ 3-4# _____ 4-5# _____

ANIMALS: _____

NECK

CHECK ONE: **0927** NECK ROAST _____ **0926** NECK SLICES _____ **0019** STEW MEAT BONE-IN _____

SPECIAL INSTRUCTIONS:

SHOULDER & SHANKS

CHECK ONE: **0920/0916** BONE-IN ROAST _____ **0922/0918** BONE-IN CHOPS _____ GRIND _____ **0010** SHANKS: YES _____ NO _____

SPECIAL INSTRUCTIONS:

RIB

CHECK ONE: **0942** BONE-IN ROAST _____ **0948** BONE-IN CHOPS _____ GRIND _____

SPECIAL INSTRUCTIONS:

LOIN & SIRLOIN

CHECK ONE: **0954/0981** BONE-IN ROAST _____ **0955/0983** BONE-IN CHOPS _____ GRIND _____

SPECIAL INSTRUCTIONS:

BREAST

CHECK ONE: **0007** WHOLE _____ **0004** BONELESS ROLLED _____ **0008** SPARE RIBS (IF BONELESS): YES _____ NO _____

SPECIAL INSTRUCTIONS:

LEG

CHECK ONE: **0964** WHOLE _____ **0979** CENTER ROAST _____ **0980** CENTER SLICES _____ GRIND _____

SPECIAL INSTRUCTIONS:

ORGAN MEAT

0010 HEAD **0020** LIVER **0040** HEART **0050** KIDNEY

SPECIAL INSTRUCTIONS:

GRIND							
5000 1-LB PKG ____		5001 2-LB PKG ____		5003 5-LB PKG ____		SAUSAGE ____	
<i>Fresh Sausage Options (circle choices)</i>	<i>Bulk (+\$1.30/#)</i>	<i>Links (+\$2.50/#)</i>	<i>Patties 4oz. (+\$2.50/#)</i>	<i>Pounds Requested</i>	<div>- Organ meat only included if it passes USDA inspection at slaughter.</div> <div>- Meatworks will make reasonable efforts to cut animals to producer specifications provided on cut sheets, however, Meatworks reserves the right to make cutting decisions at the butcher's discretion based on the size of the animal, the species, desired finished product, and other relevant factors at the time of cutting without producer notification.</div> <div>- As part of our mission to sustainably use all parts of the animals we process, we reserve the right to save or utilize any animal byproduct not requested by the producer and otherwise to be sent to rendering.</div> <div>- Special cuts requested by the producers that are not on our cut sheets will be subject to \$3.30/# surcharge</div> <div>- Minimums apply to all value-added services. If minimums are not met, ground will be sent as bulk.</div> <div>- Cut sheets required at time of animal drop-off. If cut sheet is not submitted at drop-off, customer will be subject to a \$50 fee. Meatworks will not follow up with you regarding cut-sheets that are not submitted. If there has been no cut sheet submitted by the time the animal is to be processed, Meatworks will use our standardized cut sheet for the order.</div> <div>- Please write any additional requests in margins in each primal section.</div> <div>Additional Notes:</div>		
MAPLE BREAKFAST*	5022	5082	5042				
TRADITIONAL BREAKFAST*	5021	5081	5041				
SWEET ITALIAN*	5024	5084	5044				
HOT ITALIAN*	5023	5083	5043				
CHORIZO*	5028	5088	5048				
BRATWURST*	5026	5086	5046				
* 50 pound minimum per selection							
CUSTOMER NAME				FARM NAME			
PHONE #		# OF ANIMALS	PEN #	KILL DATE	ORDER #		
LOT #/CARCASS ID (S)							
EMAIL CONTACT							
<div>By signing you agree to our Terms of Service.</div> <div>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.</div>							
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							
INTERNAL USE ONLY	Recieved:		Highlighted & Copied:		Input:		
<div>This institution is an equal opportunity provider and employer.</div> <div>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.</div>							