



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

CIRCLE ONE: WHOLE - or - A / B

ORDER # (Leave Blank): \_\_\_\_\_

STEAK THICKNESS: 1.25" \_\_\_ 1.5" \_\_\_

FARM: \_\_\_\_\_

ROAST WEIGHTS: 2-3# \_\_\_ 3-4# \_\_\_ 4-5# \_\_\_

ANIMALS: \_\_\_\_\_

**VEAL SHOULDER**

CHECK ONE: **3048** ROAST \_\_\_ **3050** CHOPS \_\_\_ GRIND \_\_\_

**VEAL BLADE**

CHECK ONE: **3033** ROAST \_\_\_ **3035** CHOPS \_\_\_ GRIND \_\_\_

**VEAL RIB**

CHECK ONE: **3218** RIB ROAST \_\_\_ **3222** RIB CHOPS \_\_\_ GRIND \_\_\_

**VEAL BREAST**

CIRCLE ONE: **3069** BREAST YES / NO

**VEAL LOIN**

CHECK ONE: **3070** LOIN ROAST \_\_\_ **3071** LOIN CHOPS \_\_\_ GRIND \_\_\_

**VEAL LEG**

CHECK ONE: **3467** LEG ROAST \_\_\_ **3466** CUTLETS \_\_\_ GRIND \_\_\_

**VEAL BONES**

CIRCLE ONE: **3636** OSSO BUCCO YES / NO **1365** MARROW BONES YES / NO **3644** SOUP BONES YES / NO

**ORGAN MEAT \*ALL ORGAN MEAT PASSING USDA INSPECTION**

**3011** TONGUE **3090** OXTAIL **3020** LIVER **3040** HEART **3045** KIDNEY **3046** SWEETBREADS **3047** CHEEKS

**Special Instructions:**

\_\_\_\_\_

**GRIND** \*IF YOU SELECT PATTIES OR SAUSAGE THE VALUE-ADDED SERVICE SECTION MUST BE COMPLETED

**BULK GRIND:** 5100 1-LB PKG \_\_\_ 5103 5-LB PKG \_\_\_ - or - PATTIES \_\_\_ SAUSAGE \_\_\_ PACK AS TRIM \_\_\_

PATTY SIZES: ALL PATTIES \$1.10/#	8 OZ	6 OZ	4 OZ	ADDITIONAL NOTES:	
	5112	5111	5110		
POUNDS REQUESTED: (50 POUND MINIMUM)				- Carcasses >30 MO will be boneless. Neck bones will not be available. - If you select BI Sirloin Steaks, you will not receive a cap roast. - Organ meat only included if it passes USDA inspection at slaughterer - 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. - 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 <b>not</b> requested by the producer and otherwise to be sent to rendering. - Special cuts requested by the producers that are not on our cut sheets will be subject to \$3.30/# surcharge - Minimums apply to all value-added services. If minimums are not met, ground will be sent as bulk. - <b>Cut sheets required at time of animal drop-off.</b> If cut sheet is not submitted at drop-off, customer will be subject to a \$50 fee. <i>Meatworks will not follow up with you regarding cut-sheets that are not submitted.</i> 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.	
SAUSAGE OPTIONS (CIRCLE CHOICES)	BULK \$1.30/#	LINK \$2.50/#	4oz. PATTIES \$2.50/#		POUNDS REQUESTED
MAPLE BREAKFAST*	5122	5182	5142		
TRADITIONAL BREAKFAST*	5121	5181	5141		
SWEET ITALIAN*	5124	5184	5144		
HOT ITALIAN*	5123	5183	5143		
CHORIZO*	5128	5188	5148		
BRATWURST*	5126	5186	5146		
*50 POUND MINIMUM FOR EACH OPTION					

<b>CUSTOMER NAME</b>			<b>FARM NAME</b>	
<b>PHONE #</b>	<b># OF ANIMALS</b>	<b>PEN #</b>	<b>KILL DATE</b>	<b>ORDER #</b>
<b>EMAIL CONTACT</b>			<b>LOT #/CARCASS ID (S)</b>	

**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**

<b>INTERNAL USE ONLY</b>	Received:	Highlighted & Copied:	Input:
--------------------------	-----------	-----------------------	--------

*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).*