

Pork Cutting Form

Name: _____ Date: _____

Address: _____ City _____

Zip _____ Phone _____

Whole / Half Please circle 1

Pork Chops-Y/N _____ thickness _____ per pkg

Pork Steak-Y/N _____ thickness _____ per pkg

Roasts-Y/N _____ lbs ea Ribs-Y/N Neck Bones-Y/N

Hocks-Y/N Smoked- Y/N Lard-Y/N Liver-Y/N

Trim-Brats-Y/N Breakfast sausage-Y/N Links/Bulk

Maple Links or Bulk Y/N

Ground pork-Y/N Bacon or Side Pork (Circle one)

Ham-Y/N -Smoked or Raw- Packaged in - $\frac{1}{4}$ - $\frac{1}{2}$ - whole or steaks

Received From: _____

Notes: _____