

**CINDER BUTTE MEAT COMPANY**  
**541-548-6328**  
**197 N.E. O'NEIL ST. REDMOND, OR. 97756**

<b>NAME:</b>		<b>PHONE:</b>	
ADDRESS		GROWER:	
EMAIL ADDRESS		GROWER PHONE:	
KILL DATE	C/W DATE	HANGING WEIGHT	CURE NO.

**HOG CUTTING INSTR:**    **WHOLE** \_\_\_\_\_ **½** \_\_\_\_\_      **WRAP FOR** \_\_\_\_\_ **NO. OF PEOPLE**

<b>PORK CHOPS</b>	1/2" <input type="checkbox"/> 3/4" <input type="checkbox"/>	1" <input type="checkbox"/> 1 ¼" <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>BABY BACK RIBS</b> <small>(most of chops will be boneless)</small>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>SHOULDER ROAST</b>	2# <input type="checkbox"/> 3# <input type="checkbox"/>	4# <input type="checkbox"/> 5# <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>PORK STEAKS</b> <small>(or leave as part of shoulder roast)</small>	1/2" <input type="checkbox"/> 3/4" <input type="checkbox"/>	1" <input type="checkbox"/> 1 ¼" <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>SPARE RIBS</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>HAM</b>	SMOKED/CURED YES <input type="checkbox"/> NO <input type="checkbox"/>	CUT HAMS IN 1/2's <input type="checkbox"/> 1/4's <input type="checkbox"/> WITH STEAKS <input type="checkbox"/>	GRIND <input type="checkbox"/>
<b>HAM HOCKS</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>		
<b>BACON</b>  1# <input type="checkbox"/> 1 ½# <input type="checkbox"/> 2# <input type="checkbox"/>	SMOKED/CURED YES <input type="checkbox"/> NO <input type="checkbox"/>	SLICED THIN    REG    THICK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	REGULAR <input type="checkbox"/>  PEPPERED <input type="checkbox"/>
<b>SAUSAGE</b>  1# <input type="checkbox"/> 1 ½# <input type="checkbox"/> 2# <input type="checkbox"/>	BREAKFAST <input type="checkbox"/> SWT ITALIAN <input type="checkbox"/> SAGE <input type="checkbox"/>	C.B. BLEND <input type="checkbox"/> HOT ITALIAN <input type="checkbox"/> FRESH GROUND <input type="checkbox"/>	MAPLE <input type="checkbox"/> CHORIZO <input type="checkbox"/> G.S.J <input type="checkbox"/>

**SPECIAL INSTRUCTIONS**

**C**  
**T**