

PORK # \_\_\_\_\_

Whole Half



D & M Meats  
1301 20 Road  
Fruita, CO 81521  
(970)858-3333

Weight: _____
Total = _____
Date In _____
Date Cut _____

Owner name and phone: \_\_\_\_\_

Customer Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

Called \_\_\_\_\_  
Called \_\_\_\_\_  
Called \_\_\_\_\_

# Chops/Pkg \_\_\_\_\_  
Thickness \_\_\_\_\_  
Sausage \_\_\_\_\_ lb. Pkgs  
Fresh Grind \_\_\_\_\_ lb Pkgs  
Roasts \_\_\_\_\_ lb

Loin Chops	
Pork Chops	
Pork Steak	
Country Ribs	
Spare Ribs	
Pork Butt	
Picnic	
Hocks Fresh How Many _____	
Fresh Ham How Many _____	
Fresh side _____ lb pkgs	
Fresh Ham Steaks #/Pkg _____	
Fresh Ground Pork	
Stew Cubes	
Sausage _____ B _____ HB _____ I _____ HI _____ M _____	

Total Bags \_\_\_\_\_

Customer Signature \_\_\_\_\_

By signing above I acknowledge I have received from D & M Meats The above-mentioned product in full and all bags are in my possession upon my leaving their facility.

**Smoking Instructions**

Hocks	How Many _____
Ham	How Many _____ Size _____
Ham Steaks	How Many _____
Bacon	How Many _____ lb Pkgs
	Sliced Medium Thick

Hanging Weight _____ X .75	\$ _____
Slaughter Fee (\$55/pig)	\$ _____
Sausage (\$.50/lb)	\$ _____
Cure \$1.50/lb _____	\$ _____
<b>Total Due</b>	<b>\$ _____</b>

Were SRM's disposed of properly YES NO  
Were SRM's denatured YES NO