

BEEF CUT INSTRUCTIONS



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Contact Name: _____
Address: _____
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PLEASE EXPECT 3 WEEKS FOR PROCESSING

FOR OFFICE USE ONLY		
WHOLE	HALF	SPLIT HALF
Producer Name _____		
Kill Date: _____	CXS ID#: _____	
Cut Date: _____	CXS Weight: _____	

VARIETY MEATS (These will only be available if the plant is notified at time of slaughter.)

<p><u>OX TAILS</u></p> <input type="checkbox"/> No <input type="checkbox"/> Yes	<p><u>TONGUE</u></p> <input type="checkbox"/> No <input type="checkbox"/> Yes	<p><u>HEART</u></p> <input type="checkbox"/> No <input type="checkbox"/> Yes	<p><u>LIVER</u></p> <input type="checkbox"/> No <input type="checkbox"/> Yes
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Under each **bold heading** please check the box as to which cuts to keep.
 If the box is left unchecked that cut will go to ground beef.

CHUCK

<p><u>Chuck Roll</u></p> <input type="checkbox"/> Chuckeye Roasts <input type="checkbox"/> Grind	<p><u>Shoulder Clod</u></p> <input type="checkbox"/> Chuck Roasts <input type="checkbox"/> Grind	<p><u>Flatiron</u></p> <input type="checkbox"/> Steaks <input type="checkbox"/> Grind	<p><u>Mock Tender</u></p> <input type="checkbox"/> Roasts <input type="checkbox"/> Grind	<p><u>Other</u></p> <input type="checkbox"/> Brisket Flat <input type="checkbox"/> Short Ribs <input type="checkbox"/> Soup Bones
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RIB

<p><u>Boneless Rib</u></p> <input type="checkbox"/> Ribeye Steaks <input type="checkbox"/> Prime Rib Roast Qty: _____ LBS: _____ <input type="checkbox"/> Back Ribs	OR	<p><u>Bone-in Rib</u></p> <input type="checkbox"/> Rib Steaks <input type="checkbox"/> Rib Roast Qty: _____ LBS: _____	<p><u>Other</u></p> <input type="checkbox"/> Skirt Steaks <input type="checkbox"/> Short Ribs
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LOIN

<p><u>Strip Loin & Tenderloin</u></p> <input type="checkbox"/> NY Strip Steaks <input type="checkbox"/> Tenderloin Steaks <input type="checkbox"/> Beef Loin Roast Qty: _____ LBS: _____ <input type="checkbox"/> Tenderloin Roast Qty: _____ LBS: _____	OR	<p><u>Short Loin</u></p> <input type="checkbox"/> T - Bones	<p><u>Top Sirloin</u></p> <input type="checkbox"/> Steaks <input type="checkbox"/> Sirloin Cap Roast <input type="checkbox"/> Coulette	<p><u>Bottom Sirloin</u></p> <input type="checkbox"/> Tri-Tip Roast <input type="checkbox"/> Ball Tip Roast <input type="checkbox"/> Flap	<p><u>Other</u></p> <input type="checkbox"/> Flank Steaks
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ROUND

<p><u>Inside</u></p> <input type="checkbox"/> Tenderized Cube Stk <input type="checkbox"/> Grind	<p><u>Bottom Round</u></p> <input type="checkbox"/> Roasts <input type="checkbox"/> Grind	<p><u>Knuckle</u></p> <input type="checkbox"/> Grind	<p><u>Eye of Round</u></p> <input type="checkbox"/> Roasts <input type="checkbox"/> Grind	<p><u>Other</u></p> <input type="checkbox"/> Stew Meat → _____ total lbs.
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WORK INSTRUCTIONS

<p><u>Steak Thickness</u></p> <input type="checkbox"/> Default = 1" <input type="checkbox"/> Other = _____"	<p><u>Roast Size</u></p> <input type="checkbox"/> _____ lbs avg. size 3-4 lb.	<p><u>Ground Beef</u></p> <input type="checkbox"/> 1 lb. <input type="checkbox"/> 1.5 lb. <input type="checkbox"/> 2 lb.	<p><u>Patties (extra)</u></p> <input type="checkbox"/> No <input type="checkbox"/> Yes →	<p>1 # Packages \$1.50 lb.</p> _____ Total lbs.
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COMMENTS: