

NEK PROCESSING**Custom / Commercial / Farmers Brand**

Name: _____

Hanging Weight: _____

Phone #: _____

Address: _____

Date of Drop off: _____

Email: _____

Roast size# _____

Steak & Chops $\frac{3}{4}$ ___ 1 ___ 1 $\frac{1}{4}$ ___ Other _____

How many in package: _____

Circle: Heart, Liver, Tongue, Kidney, Tail
Head & Feet (notify at drop off)**PORK****2026**Shoulder: Roast ___ **Smoked** ___

Leaf Lard Yes ___ No ___

B/I or Boneless Steak ___ Grind ___

Back Fat Yes ___ No ___

Butt: Roast ___ **Smoked** ___ Grind ___

B/I or Boneless Steak ___ Country Style Ribs ___

Hocks Yes ___ **Smoked** ___ No ___Loin: Roast ___ **Smoked** ___
Chops ___ Boneless ___

Tenderloin Yes ___ No ___

Sirloin Cutlets Yes ___ No ___

Bacon: **Smoked** ___
Fresh ___ Whole ___ Slab ___ Sliced ___

Ribbs Yes ___ No ___

Sliced: Regular ___
Other ___Jowls Yes ___ **Smoked** ___

Sliced ___ Whole ___ Grind ___

Ham: B/I or Boneless
Smoked ___
Fresh ___
Whole ___
Cut in Half ___
Steaks ___
Grind ___

Sausage Size: 1# ___ 2# ___ Other ___

Grind: Fine ___ Coarse ___

* Please choose
1 seasoning per pig*

Seasoning Plain ___ Breakfast ___ Maple Breakfast ___

Sweet ___ Bratwurst ___ Kielbasa ___

Hot ___ Chorizo ___

of Seasonings Used:**Weight of Links/Patties:****# of Boxes:**