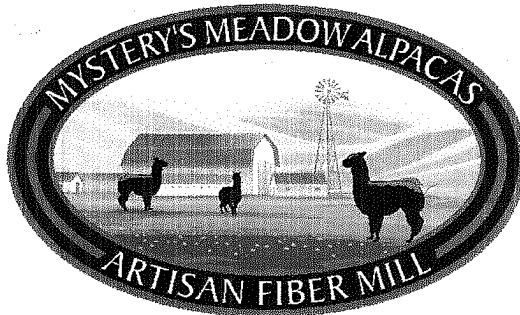


Ship to:

Mystery's Meadow
2445 260th Street
Humboldt, Iowa 50548
(515)-230-2593

**Office Use:**

Date Received:

Via:

Order #
(assigned):

Date:

Fiber Processing Order Form

Please use a SEPARATE FORM (page 2) for each batch that
you want processed together (with the same services)

This page is for your TOTAL order

| | | | |
|--|--|--|--|
| Name: | | Phone: | |
| Farm/Business: | | Cell: | |
| Mailing Address: | | Shipping Address, if different: | |
| Email: | | Preferred Contact: Phone Email Text Other: | |
| Payment Method (circle one) Cash/Check Visa MasterCard Discover PayPal Other _____ (Can give info at time of payment) (Note: There is a 3% service fee for all debit/credit card & PayPal payments.) | | | |
| Card Number: | | Expiration Date & Security Code: | |
| Authorized Signature: | | | |
| Total number of boxes shipped: | Total number of Batches in this order: | Approximate Weight of total order: _____ lbs. _____ oz. | |
| Return Shipping Specifics | | | |
| How do you want your order returned? <input type="checkbox"/> Shipped <input type="checkbox"/> Picking Up <input type="checkbox"/> Festival: | | | |
| Return shipping via USPS unless otherwise noted: | | Shipping insurance will be included unless otherwise indicated. <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| By signing below, you are agreeing to the following: To have your fiber processed at Mystery's Meadow Artisan Fiber Mill, LLC and to pay for the services that are indicated on this order form and through any verbal and/or electronic communication(s). Completed orders will not be shipped until any additional processing and shipping costs that have been invoiced are paid. <u>You acknowledge that our processing can remove a certain amount of guard hair and vegetable matter, but your final product is only as good as the fiber you send us.</u> | | | |
| Signature: | | Date: | |
| Comments or Special Instructions: | | | |

Please specify in the "**Comments or Special Instructions**" section of this form whether you would like each animal fiber in their own bag or like colors together

Fiber Processing Order FormPlease use a **separate form** (this page) for each **batch** that you want processed together (with the same services)**Office Use:**

| Order # | Batch # | Number of Bags in this batch: |
|---------|---------|-------------------------------|
| | | |

Ship to:Mystery's Meadow
2445 260th Street
Humboldt, Iowa 50548
(515)-230-2593

Name:

Phone:

Total number of bags in this batch (this order form):

If more than one bag per batch, identify each bag with the batch name or number.

Approximate (not required) **weight of batch:****Is there more than one batch (job) to process differently in this box/bag?** ☐ Yes ☐ No**Fiber Type:** (circle) Wool Mohair Alpaca Llama Other (specify):**Animal Breed /Type**
Name, Tag # or Lot #**Color:****Separator/Dehairing:** ☐ Yes ☐ No **Number of Passes:****Return Separator Discards?** ☐ Yes ☐ No**Carding & Felting Services** (includes washing/picking)**Roving - All fiber into roving?** ☐ Yes ☐ No

If no, approx. lbs. of roving: _____

Batts - All fiber into batts? ☐ Yes ☐ No

If no, approx. number of batts: _____

Approx. weight of batts: ☐ 1 lb (standard) Other _____**Felting Batts - All fiber into felt?** ☐ Yes ☐ No

If no, approx. number of felts: _____

Approx. weight of felts: ☐ 1 lb (standard) Other _____**Pin Drafted Roving** ☐ Yes ☐ No

(additional charge if not spinning) lbs. _____

Fiber Blending Services**Fiber Sent (to blend):** ☐ Yes ☐ No**Type/ Amount Sent:****Blending Instructions:****Blend during:** Picking **OR** Carding_____% _____%
Amount Main Fiber Amount Blending Fiber**We will contact you for specific blending instructions****Yarn Spinning Services** (includes washing/picking/carding)

(approximate Wraps Per Inch—WPI)

- ☐ **Best Choice** (We select a weight for you, based on your fiber)
- ☐ Lace (18 or greater WPI) ☐ Worsted, Aran (apx 9-12WPI)
- ☐ Sock, Fingering (16-18 WPI) ☐ Chunky/Bulky (8 or less WPI)
- ☐ Sport, Baby (14-16 WPI) ☐ Other _____
- ☐ DK (12-14 WPI)

Plying: ☐ Single ☐ 2 ply ☐ 3 ply ☐ Other _____**Skein:** (choose 1)

- ☐ Skeins (standard 200 yards/skein)
- ☐ _____ Yards per skein ☐ Uncounted Skein
- ☐ Wt. (ounces) per skein _____ ☐ Cones (Additional charge)

Include a yarn sample (yard or more) & we will try to match it**Washing & Picking Services**Wash ONLY ☐Wash & Pick ONLY ☐Wash, Pick, Dye ONLY ☐**Fill out this section
ONLY if no other
services are required****Dyeing Services**☐ Dye whole batch ☐ Dye part of batch**Instructions:****We will contact you to confirm specific dyeing instructions**



Deposit amount is 50% of incoming weight charges. All charges are based on mill conditions at the time and all weights are based on mill weight.

Finished product must be picked up 30 days from the time order is completed (unless shipping arrangements have been discussed). All fiber left beyond this time frame will become property of Mystery's Meadow and will be sold to recoup processing costs.

Note: Fleece requiring skirting will be charged \$50/hour and added to final charges. Extra dirty fiber/fleece requiring extra scouring will be charged an extra \$2/pound. Extra fine fiber or fibers with extra VM that may require an extra pass through the carder will be charged an extra \$2/pound.

Dye batch color cannot be guaranteed for exact colors.

By signing below, you agree to have your fiber processed at Mystery's Meadow Artisan Fiber Mill and agree to pay for the services that are indicated on this order form and through any verbal/and or electronic communication(s). Due to the numerous factors involved with fiber processing, you are agreeing that you will not hold Mystery's Meadow Artisan Fiber Mill, owners, or operators responsible or liable for any service that does not appear to produce satisfactory results or for any damages that appear to have been done to your fiber.

Customer Signature (required): _____

OFFICE USE:

Incoming weight: ____ lbs. ____ oz. Incoming weight: ____ lbs. ____ oz.

Incoming weight: ____ lbs. ____ oz. Incoming weight: ____ lbs. ____ oz.

Date in: ____/____/____

Start Date: ____/____/____ Finished Date: ____/____/____

Notes:

Cut here to give to customer

Customer receipt:

Incoming weight total: _____

Drop off date: _____

Deposit Amount: _____

Received By: _____