

<p>FSA-441-25 U.S. DEPARTMENT OF AGRICULTURE (04-01-04) Farm Service Agency</p> <p style="text-align: center;">ASSIGNMENT OF PROCEEDS FROM THE SALE OF DAIRY PRODUCTS AND RELEASE OF SECURITY INTEREST</p> <p><i>(See Page 2 for Privacy Act and Public Burden Statements.)</i></p>	<p>1A. County FSA Office Name & Address <i>(Including ZIP Code)</i></p> <hr/> <p>1B. County FSA Office Telephone Number <i>(Including Area Code)</i></p>
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PART A - SELLER OR BORROWER AGREEMENT

<p>2A. Name and Address of Seller/Borrower <i>(Including ZIP Code)</i></p>	<p>3A. Name and Address of Purchaser <i>(Including ZIP Code)</i></p>
<p>2B. Telephone Number of Seller/Borrower <i>(Including Area Code)</i></p>	<p>3B. Patron Account Number</p>
<p>4. County of Residence of Seller/Borrower</p>	<p>3C. Telephone Number of Purchaser <i>(Including Area Code)</i></p>
	<p>5. Effective Date of Assignment <i>(MM-DD-YYYY)</i></p>

6. In consideration of a loan made by the United States of America acting through the Farm Service Agency (FSA), or its successor agency, the Seller/Borrower assigns and transfers to FSA the following percentages or amounts of the purchase price due or which may become due, as defined in Item 8 of this assignment to Seller/Borrower from the Purchaser for dairy products sold or which may be sold to, by, or through Purchaser, *(Check applicable box(es))*

(a)(1) _____ percent payable (a)(2) _____
(Monthly, Bi-Monthly or Other)

(b)(1) \$ _____ of purchase price, payable (b)(2) _____ or full purchase price if less than that amount
(Monthly, Bi-Monthly or Other)

(c)(1) All proceeds from sales in excess of \$ _____ payable (c)(2) _____
(Monthly, Bi-Monthly or Other)

until FSA releases or suspends this assignment in writing, giving notice of that action to Purchaser. This assignment supersedes any previous assignment to FSA of income due Seller/Borrower from the above-named Purchaser.

6(d) Special Instructions:

7. By signing in Item 7A, the Seller/Borrower directs and authorizes Purchaser to make and deliver payments.

<p>7A. Signature of Seller/Borrower</p>	<p>7B. Date Signed <i>(MM-DD-YYYY)</i></p>
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PART B - ACCEPTANCE BY PURCHASER

8. The undersigned (company or association, by and through its Duly Authorized Officer) consents to and accepts the above assignment and agrees to remit to FSA the sum of money provided in the assignment, when due and payable under it. This assignment will be given priority over any subsequent assignments. Payments will be identified by the name and address of Seller/Borrower, Patron Account Number or as otherwise agreed. If payment is made by check, the check will be payable and delivered as instructed below: *(Check applicable box)*

(a) To the order of Farm Service Agency. *(See Item 1A.)*

(b) Jointly to the order of the Seller/Borrower **and** Farm Service Agency. *(See Item 1A.)*

(c) To the order of *(Name and Address of Bank):* _____

<p>9A. Signature of Duly Authorized Officer for the Purchaser</p>	<p>9B. Title</p>	<p>9C. Date Signed <i>(MM-DD-YYYY)</i></p>
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PART C - RELEASE OF SECURITY INTEREST

10. In consideration of the acceptance of this assignment by the above-named Purchaser, FSA hereby releases any lien or security interest it has or may have in dairy products sold by Seller/Borrower to, by, or through Purchaser. This release is granted only to the extent the payments are made as set forth above. In the event there are insufficient proceeds to meet said payments because of either prior authorized assignments or low production by the assignor, the Purchaser will not be held liable for the difference for that planned payment.

UNITED STATES OF AMERICA

(a) _____
Date (MM-DD-YYYY)

(b) _____
Signature of Agency Authorized Official

(c) _____
Title

11A. As used in this assignment, the phrase "purchase price due or which may become due" means that amount which Purchaser owes or may owe Seller/Borrower for the sale to, by, or through Purchaser of dairy products after deduction of one of the following codes below. (See Item 11F to identify the appropriate code by inserting a checkmark in Items 1, 2, 3 or 4.)

1 = Any amounts entitled to legal priority over this assignment;
 2 = Obligations of Seller/Borrower in favor of Purchaser in connection with membership dues, commission of checkoff, expendable operating supplies, and minor items of operating equipment (but not major capital items of equipment) furnished to the Seller/Borrower and necessary for production of dairy products whether said obligations arise or mature before or after the effective date of this assignment;
 3 = Revolving fund credits, patronage refunds, or per unit capital retains, allocated or paid by Purchaser to Seller/Borrower before or after the effective date of this assignment; and
 4 = Payments made by or through Purchaser for transportation of said dairy products of members to market, regardless of the date of the payments.

11B. Purchaser Name	11C. Purchaser Address	11D. Amount of Deduction	11E. Enter the effective date of assignment or prior claim	11F. Deduction Priority Codes (See Item 11A above to identify the proper code. Insert a checkmark below to indicate the proper code.)			
				1	2	3	4
		\$					
		\$					
		\$					

NOTE: The following statements are made in accordance with the Privacy Act of 1974 (5 USC 552a): the Farm Service Agency (FSA) is authorized by the Consolidated Farm and Rural Development Act, as amended (7 USC 1921 et. seq.), or other Acts, and the regulations promulgated thereunder, to solicit the information requested on its application forms. The information requested is necessary for FSA to determine eligibility for credit or other financial assistance, service your loan, and conduct statistical analyses. Supplied information may be furnished to other Department of Agriculture agencies, the Internal Revenue Service, the Department of Justice or other law enforcement agencies, the Department of Defense, the Department of Housing and Urban Development, the Department of Labor, the United States Postal Service, or other Federal, State, or local agencies as required or permitted by law. In addition, information may be referred to interested parties under the Freedom of Information Act (FOIA), to financial consultants, advisors, lending institutions, packagers, agents, and private or commercial credit sources, to collection or servicing contractors, to credit reporting agencies, to private attorneys under contract with FSA or the Department of Justice, to business firms in the trade area that buy chattel or crops or sell them for commission, to Members of Congress or Congressional staff members, or to courts or adjudicative bodies. Disclosure of the information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Tax Identification Number, may result in a delay in the processing of an application or its rejection.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0162. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

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