FSA-2450		U.S. DEPARTMENT OF AGRICULTURE	Position 1
(Proposal 2)		Farm Service Agency	
		Y AMENDMENT OF CONSENT TO EEDS FROM SALE OF FARM PRO	
	FROC	LEDS I NOW SALL OF I ANW FRO	70013
(See Page 2	for the Privacy Act and Pap	erwork Burden Statements.)	
	CEPTANCE BY PURCH	HASER	
1A. Purchaser	's Name and Address		1B. Purchaser's Telephone Number
1C. Signature	of Purchaser	1D. Title of Purchaser	1E. Date Signed
PART B - SE	ELLER (BORROWER)		
2A. Seller's (Borrower) Name and Address			2B. Seller's (Borrower) Telephone Number
			reiephone Number
PART C - ES	SA USE ONLY		
		Payment of Proceeds from Sale of Products	(Consent) or ESA-2043. Assignment of
Proceeds from	the Sale of Dairy Products	and Release of Security Interest (Assignment	nt), as applicable, executed by the subject
borrower and p	burchaser also executed by	FSA, dated (a)	 .
FSA agrees th	at said Consent or Assignm	nent is amended, for a temporary period begi , to allow payments as follows:	inning (b)
and ending (c)		, to allow payments as follows.	
TO FSA:	(d) \$	of the purchase price, or	
	(e)	% of the purchase price figured to	the nearest dollar,
		payable (f)(Weekly, Monthly, 6	etc.)
TO Borrower:	(g) any remaining b	alance of the purchase price.	
After the end of this amendment		ayments will again be subject the Consent or	Assignment referred to in Item 3 above of
4A. FSA County Office Name and Address			4B. FSA County Office Telephone Number
			·
4C. Signature	of Agency Official	4D. Title of Agency Official	4E. Date Signed

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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 loans, 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, 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 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-XXXX. The time required to complete this information collection is estimated to average 10 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.