

UNITED STATES DEPARTMENT OF AGRICULTURE

**AGRICULTURAL MARKETING SERVICE
DAIRY PROGRAMS**

1930-220th St. SE, Ste. 102
Bothell, WA 98021-8471
Phone: (425) 487-6009
Fax: (425) 487-2775
E-mail: fmaseattle@fmaseattle.com

FEDERAL MILK ORDERS 124 & 131

10050 N 25th Ave., Ste. 302
Phoenix, AZ 85021-1664
Phone: (602) 547-2909
Fax: (602) 547-2906
E-mail: ma@fmma.net

H - 2

Producer Payroll Report

Note: This cover page is for information purposes only and does not need to be submitted to the market administrator's office.

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 0581-0032. The time required to complete this information collection is estimated to average 0.5 hours 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.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, political beliefs genetic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.

UNITED STATES DEPARTMENT OF AGRICULTURE

AGRICULTURAL MARKETING SERVICE

DAIRY PROGRAMS

Form H-2
 1930-220th St. SE, Ste. 102
 Bothell, WA 98021-8471
 Phone: (425) 487-6009
 Fax: (425) 487-2775
 E-mail: fmmaseattle@fmmaseattle.com

FEDERAL MILK ORDERS 124 & 131

Form Approved, OMB No. 0581-0032
 10050 N 25th Ave., Ste. 302
 Phoenix, AZ 85021-1664
 Phone: (602) 547-2909
 Fax: (602) 547-2906
 E-mail: ma@fmma.net

PRODUCER PAYROLL REPORT

Handler _____

Producer No. _____ Tank No. _____

Producer Name _____

Address _____

City, State, Zip _____

Month's Production Results

Total Pounds of Milk _____

Pounds of Butterfat _____

Pounds of Protein 1/ _____

Pounds of Other Solids 1/ _____

Average Butterfat Test _____

Average Protein Test 1/ _____

Average Other Solids Test 1/ _____

Month & Year _____

Daily Weights

1	16	
2	17	
3	18	
4	19	
5	20	
6	21	
7	22	
8	23	
9	24	
10	25	
11	26	
12	27	
13	28	
14	29	
15	30	
	31	

Totals

Average Tests

1st half	2nd half
----------	----------

B.F. _____

Pro 1/ _____

OS 1/ _____

1/ FO 124 handlers only.

	Rate	Value
PPD 1/; Uniform Skim 2/	\$	\$
Producer Protein Price 1/	\$	\$
Other Solids Price 1/	\$	\$
Butterfat Price	\$	\$
Value of Milk Production		\$

Premiums	Rate	Value
Bonus	\$	\$
Hardship	\$	\$
Total Premiums		\$

Gross Payment for Month _____ \$

Deductions	Rate	Value
Hauling	\$	\$
Stops	\$	\$
Marketing Service	\$	\$
National DPC	\$	\$
State DPC	\$	\$
Other	\$	\$
Other	\$	\$
Total Deductions		\$

Net Payment for Month _____ \$

Less Partial Payment _____ \$

Less A/P Advance _____ \$

Net Check _____ \$

UNITED STATES DEPARTMENT OF AGRICULTURE

AGRICULTURAL MARKETING SERVICE

DAIRY PROGRAMS

1930-220th St. SE, Ste. 102
 Bothell, WA 98021-8471
 Phone: (425) 487-6009
 Fax: (425) 487-2775
 E-mail: fmmaseattle@fmmaseattle.com

FEDERAL MILK ORDERS 124 & 131

10050 N 25th Ave., Ste. 302
 Phoenix, AZ 85021-1664
 Phone: (602) 547-2909
 Fax: (602) 547-2906
 E-mail: ma@fmma.net

PRODUCER PAYROLL REPORT

Handler _____

Producer No. _____ Tank No. _____

Producer Name _____

Address _____

City, State, Zip _____

Day	Pounds	Butterfat 1/	Protein 1/ 2/	Other Solids 1/ 2/
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

Total _____

1/ Percent Test.
 2/ FO 124 handlers only.