

Return to: **Federal Milk Order No. 1—Northeast Marketing Area**  
89 South Street  
Mailing Address: P.O. Box 51478  
Boston, MA 02205-1478  
Tel: (617) 737-7199 —Fax (617) 737-8002  
Email: [MABoston@fedmilk1.com](mailto:MABoston@fedmilk1.com) Website: [www.fmmone.com](http://www.fmmone.com)

MA 300  
Form Approved, OMB No. 0581-0032  
This report is required by the Order in accordance with 7 U.S.C. 608c and d. Failure to report can result in the assessment of a civil penalty of up to \$1,000 per day (7 U.S.C. 608c (14)(B)) or, upon conviction, in a fine of up to \$5,000 per day (7 U.S.C. 608c (14)(A)).

## Handler Report of Expected Receipts and Expected Class I Needs

Handler's Name \_\_\_\_\_ Period \_\_\_\_\_

Address \_\_\_\_\_

**FULL SUPPLY CONTRACT:**      YES      NO

**A. Expected Receipts of Bulk Fluid Milk (Total for all plants if more than one)**

**Pounds**

- |   |       |
|---|-------|
| 1. From own producers                             | _____ |
| 2. Bulk milk from other sources (list by handler) | _____ |
| _____   | _____ |
| _____   | _____ |
| _____   | _____ |
| 3. Total expected receipts                        | ===== |

**B. Expected Class I Fluid Milk Needs**

1. Use for Class I in **your own Section 7(a)** distributing plant(s) (If multiple locations list each separately)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- Total expected Class I bottling needs      =====

2. If **bulk** milk will be transferred from your bottling plant(s) to other Northeast Order Section 7(a) distributing plants, report estimated volume to be transferred.
- \_\_\_\_\_
3. Total expected Class I needs (Summary of B1 and B2)      =====

**C. Difference between Expected Receipts and Expected Class I Needs**

Subtract B3 from A3 (Expected surplus/shortage)      \_\_\_\_\_

SIGNED BY: \_\_\_\_\_  
(Person authorized to sign on behalf of handler.)

DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

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