## Return to: Federal Milk Order No. 1—Northeast Marketing Area

89 South Street Mailing Address: P.O. Box 51478 Boston, MA 02205-1478

Boston, MA 02205-1478 Tel: (617) 737-7199 —Fax (617) 737-8002

Email: NortheastOrder@fedmilk1.com Website: www.fmmone.com

Handler Name

MA 302 Form Approved, OMB No. 0581-0032 Exp. XX/XXXX

address:				
SUMMARY OF ESTIMALISTING OF TRANSFERS				
Deliveries to:		POUNDS	PERCENT	
ORDER NO. 1 Pool Distributing Plants	[7(a) PLANTS]			
ORDER NO. 1 Pool Supply Plants [7(c)]	PLANTS]			
All Other Plants				
TOTAL PRODUCER RECEIPTS			100	
HANDLER NAME	IS to Order No. 1 Pool I LOCATION	Distributing Frants 7(a)	POUNDS	
HANDLER NAME	LOCATION	POUNDS		
TOTAL to Pool Distributin	g Plants [7(a) Plants]			
SIGNED BY:		DATE:		
(Person authorized to sign on be	half of handler )	DATE.		

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