

**UNITED STATES DEPARTMENT OF AGRICULTURE  
AGRICULTURAL MARKETING SERVICE  
DAIRY PROGRAM**

Address: XXX  
XXX  
Phone: XXX  
Fax: XXX  
E-mail: XXX

XXX FEDERAL MILK ORDER XXX

**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.

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

XXX FEDERAL MILK ORDER XXX

**CALIFORNIA FMMO PRODUCER PAYROLL REPORT**

Handler \_\_\_\_\_

Month's Production Results \_\_\_\_\_

Producer No. \_\_\_\_\_ Tank No. \_\_\_\_\_

Total Pounds of Milk \_\_\_\_\_

Producer Name \_\_\_\_\_

Pounds of Butterfat \_\_\_\_\_

Address \_\_\_\_\_

Pounds of Protein \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Pounds of Other Solids \_\_\_\_\_

Organic

Average Butterfat Test \_\_\_\_\_

Average Protein Test \_\_\_\_\_

Average Other Solids Test \_\_\_\_\_

Month & Year \_\_\_\_\_

|                          | <u>Rate</u> | <u>Value</u> |
|--------------------------|-------------|--------------|
| PPD/Skim Blend           | \$          | \$           |
| Butterfat Price/Blend    | \$          | \$           |
| Producer Protein Price   | \$          | \$           |
| Other Solids Price       | \$          | \$           |
| Somatic Cell Count       | \$          | \$           |
| Value of Milk Production |             | \$           |

| <u>Premiums</u> | <u>Rate</u> | <u>Value</u> |
|-----------------|-------------|--------------|
| Bonus           | \$          | \$           |
| rBST-Free       | \$          | \$           |
| Quality         | \$          | \$           |
| Volume          | \$          | \$           |
| Other           | \$          | \$           |
| Other           | \$          | \$           |
| Other           | \$          | \$           |
| Other           | \$          | \$           |
| Other           | \$          | \$           |
| Other           | \$          | \$           |
| Total Premiums  |             | \$           |

Gross Payment for Month \_\_\_\_\_ \$

| <u>Deductions</u>     | <u>Rate</u> | <u>Value</u> |
|-----------------------|-------------|--------------|
| Hauling               | \$          | \$           |
| Stops                 | \$          | \$           |
| Marketing Service     | \$          | \$           |
| National DPC          | \$          | \$           |
| State DPC             | \$          | \$           |
| Assignments           | \$          | \$           |
| Coop Dues             | \$          | \$           |
| Cap. Retain           | \$          | \$           |
| CDFA Quota Assessment | \$          | \$           |
| Other                 | \$          | \$           |
| Other                 | \$          | \$           |
| Other                 | \$          | \$           |
| Other                 | \$          | \$           |
| Other                 | \$          | \$           |
| Total Deductions      |             | \$           |

Net Payment for Month \_\_\_\_\_ \$

Less Partial Payment \_\_\_\_\_ \$

Less A/P Advance \_\_\_\_\_ \$

**Net Check** \_\_\_\_\_ \$