

<b>FSA-1141</b> (Proposal)	<b>U.S. DEPARTMENT OF AGRICULTURE</b> Farm Service Agency
<b>MARKETING ASSISTANCE FOR SPECIALTY CROPS (MASC)          NEW PRODUCER EXPECTED SALES WORKSHEET</b>	
1. Producer's Name <i>(Person or Legal Entity)</i>	
2. Application Number	

**PART A – 2025 EXPECTED SALES FOR NEW PRODUCERS**

3. Crop/Type	4. Intended Use	5. Expected Acres	6. Expected Yield/Acre	7. Expected Production or Inventory (for yield based crops –(item 5 x item 6 )	8. Unit of Measure	9. Expected Price/Unit	10. Expected Sales (item 7 x item 9)	11. Reference Documents
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
						\$	\$	
<b>12. Total Expected Sales</b> <i>(sum amounts in column Item 10, enter amount for Total Specialty Crop Sales in item 7 on Form FSA-1140)</i>							\$	

**PART B – PRODUCER CERTIFICATION**

*I hereby sign and acknowledge under penalty of perjury in accordance with 28 U.S.C. § 1746 and 18 U.S.C. § 1621 that the foregoing is true and correct. I understand that I must provide documentation to the COC within 15 days of submitting the MASC application.*

13. Producer's Signature	14. Date <i>(MM/DD/YYYY)</i>
--------------------------	------------------------------

**Privacy Act Statement:** *The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation (CCC) Charter Act (15 U.S.C. 714c(e)). The information will be used to determine eligibility for program benefits. The information collected on this form may be disclosed to other Federal, State, and Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary; however, failure to furnish the requested information will result in a determination of ineligibility for program benefits.*

**Public Burden Statement (Paperwork Reduction Act):** *Public reporting burden for this collection is estimated to average 60 minutes per response, including reviewing instructions, gathering, and maintaining the data needed, completing (providing the information), and reviewing the collection of information. You are not required to respond to the collection of information, unless it displays a valid OMB control number of 0503-0028. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden by emailing to: [askusda@usda.gov](mailto:askusda@usda.gov) (OMB NO. 0503-0028).*

**Non-Discrimination Statement:** *In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.*

*Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.*

*To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint | USDA](#) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).*

*USDA is an equal opportunity provider, employer, and lender.*