Form Approved, OMB 0581-0032
Exp.XX/XXXX

UNITED STATES DEPARTMENT of AGRICULTURE
AGRICULTURAL MARKETING SERVICE - DAIRY PROGRAMS
MARKET ADMINISTRATOR
Federal Orders 6 and 7

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Mailing Address
2763 Meadow Church Road, Suite 100
Duluth, GA 30097

PAYMENTS MADE TO A COOPERATIVE ASSOCIATION
Please submit a separate form for payment to each cooperative association.

COOPERATIVE ASSOCIATION: _____ MONTH: _____

ADDRESS: _____ ORDER: _____

This report is required by the order in accordance with 7 U.S.C. 608 c 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. W& (14) (B)) or, upon conviction, in a fine of up to $5,000 per day (7 U.S.C. 608c (14) (A)).

Market Administrator Use Only

	Product Pounds	Butterfat Pounds	Cwt. Rate	Value
PRODUCER MILK - UNIFORM				
TOTAL PRODUCER MILK				
OTHER SOURCE RECEIPTS				
GRAND TOTAL				

PAYMENTS	Product Pounds	Cwt. Rate	Check Number	Date Mailed	Amount
First Advance					
Second Advance**					
Final					
** If Applicable				TOTAL PAYMENTS	

I declare under the penalties provided by law, that this report (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. I also certify that I am authorized to sign this report.

HANDLER _____ SIGNED _____
(Person Authorized to Sign for Handier)

DATE _____ TITLE _____

USDA, AMS, Dairy Programs
Market Administrator
2763 Meadow Church Road, Suite 100, Duluth, GA 30097
(770) 682-2501

Payments Made to a Cooperative Association

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