

U.S. DEPARTMENT OF AGRICULTURE
 AGRICULTURAL MARKETING SERVICE
 DAIRY PROGRAMS

PLEASE RETURN ORIGINAL TO:

**USDA-AMS-DAIRY PROGRAMS
 CHIEF, ORDER OPERATIONS BRANCH
 ROOM 2753-SOUTH Stop 0226
 1400 INDEPENDENCE AVE., SW
 WASHINGTON, DC 20250-0226**

ANNUAL REPORT OF COOPERATIVE MILK MARKETING ASSOCIATION
(Including actions taken at the annual meeting following close of the year)
 FOR FISCAL YEAR ENDED

NOTE: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0581-0032. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This report is required by 7 CFR 900.355 from cooperatives desiring to maintain their qualification as a cooperative association under the Federal Milk Order Program. Failure to report can result in termination of your qualification as a cooperative.

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To file a complaint, write the Secretary of Agriculture, U.S. Department of Agriculture, Washington, DC 20250, or call (800) 245-6340 (voice) or (202) 720-1127 (TDD). USDA is an equal employment opportunity employer.

CURRENT NAME AND ADDRESS OF ORGANIZATION (Complete Mailing Address)	TELEPHONE NO.:
Name:	FAX NUMBER:
Add1:	E-MAIL ADDRESS:
Add2:	
City: State: Zip:	

Complete each item. Submit all requested information to Dairy Programs at the above address. Send a copy of this completed form and all requested information to the market administrator of each Federal milk order you list in item 8.

	YES	NO
1. Were any amendments made to the Articles of Incorporation? (If "Yes", submit a copy of the amendments or a copy of the Articles now in force as amended.)		
2. Were any amendments made to the Bylaws? (if "Yes", submit a copy of the amendments made or a copy of the Bylaws now in force as amended.)		
3. Was the form of membership certificate, membership contract or producer marketing agreement changed? (if "Yes", submit a copy of the new form.)		
4. Were the stock certificates changed during the year? (if "Yes", submit copies of the new certificates.)		
5. Submit a copy of your Balance Sheet at the close of the year and a copy of all auditor's notes and reports.		
6. Submit a copy of the Operating Statement for the year, with supporting schedules and notes showing sources of income.		
7. Submit a list of officers and members of the Board of Directors and give the length of service for each individual as an officer and director, and the date the present term expires. Also, submit a list of principal employees and position titles.		

8. GRADE A PRODUCERS, BY INDIVIDUAL FEDERAL ORDER MARKET, AS OF END OF FISCAL YEAR

NAME OF FEDERAL ORDER MARKET	NO. OF PRODUCERS
9. Number of Grade A producers delivering to plants operated by the association. 10. Number of Grade B producers. 11. Number of inactive and retired members with voting rights. 12. Value of nonmember business during year. 13. If stock dividends were paid, list the class stock and dividend rate on each class.	_____ _____ _____ \$ _____ _____

14. Describe in detail any changes during the year in your marketing services program for Grade A producers. Distinguish by markets, plants, or other operating units. Cover methods and frequency of sampling, butterfat testing and your weight verification program for farm bulk tanks.

15. Submit a recent copy of your market information publication sent to Grade A producers, stating how frequently such publication is sent. *(If a publication is not used to provide Grade A producers with market information, explain how this information is provided).*

CERTIFICATION

I certify that no officer, director, manager, or principal employee or any of their close relations has a financial interest in any competitor of the Association or in any business organization selling to or purchasing from the Association, other than the person's own farm. I also certify that the information herein and in the accompanying documents and schedules is true, correct, and complete to the best of my knowledge.

NAME OF ASSOCIATION

DATE (Mo., Day, Yr.)

SIGNATURE AND TITLE OF REPORTING OFFICIAL