

UNITED STATES DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
DAIRY PROGRAMS
MIDEAST MARKETING AREA
Federal Order No. 33

Form Approved,
OMB No. 0581-0032

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Fax: 330/220-6675
Toll Free: 888/751-3220

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Wixom, Michigan 48393
Phone: 248/596-0206
Fax: 248/596-1670
Toll Free: 800/458-6312

HANDLER INFORMATION AND AUTHORIZATION TO SIGN REPORTS

The following named personnel or persons occupying the named positions, whose signatures appear by their name or position, are authorized to sign and submit all reports required under the provisions of Federal Order No. 33, as amended, Mideast Marketing Area, on behalf and for:

HANDLER INFORMATION

Business Name

Telephone Number

Legal Name, if different from above Name

Mailing Address (Street, P.O. Box, City, State, Zip Code)

Location of plant if different from above address

Location of Plant Records and General Ledgers, if different from above address

Signature of Person Authorized to sign Reports

Please Print or Type Name

Signature of Person Authorized to sign Reports

Please Print or Type Name

Signature of Person Authorized to sign Reports

Please Print or Type Name

Person to contact concerning Federal Order Information

Please Print or Type Name

Authorized By

Title

Date: _____

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0032. The time required to complete this information collection is estimated to average 30 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.

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BUSINESS STRUCTURE

1. PROPRIETORSHIP

Name of Owner	Address (Street, P.O. Box, City, State, Zip Code)	Telephone Number
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2. PARTNERSHIP

Names of Partners	Address (Street, P.O. Box, City, State, Zip Code)	Telephone Number
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3. CORPORATION

Names of Officers and Directors,	Title	Address (Street, P.O. Box, City, State, Zip Code)	Telephone Number
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4. OTHER FORMS OF LEGAL ENTITY

Description: _____

Names of Officials of Business Entity,	Title	Address (Street, P.O. Box, City, State, Zip Code)	Telephone Number
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