Form C

U.S. PREMIUM BEEF PAYMENT FORM

Please fax a copy of Form C to the Kansas City office and to the plant. Form C must be received before payment is issued.

Feedyard name:_____ Date:_____

Feedyard Pen#:_____ Feedyard Lot#:_____ Head Count:_____

Cattle Gross weight:_____ Shrink % _____ Pay weight:_____ Plant weight ____ (please mark if needed)

Cattle feed and financing payee:_____ Address:_____

*****CHECKS ARE ISSUED TO USPB MEMBERS IN MEMBERSHIP NAME ONLY*****

Cattle owner payee: #1--Percent owned:_____ Feed and cattle financing amount:_____

Name:_____

Address:_____

Lienholder:_____

Cattle owner payee: #2--Percent owned:_____ Feed and cattle financing amount:_____

Name:_____

Address:_____

Lienholder:_____

Cattle owner payee: #3--Percent owned:_____ Feed and cattle financing amount:_____

Name:_____

Address:_____

Lienholder:_____

Feed and cattle financing total:_____

USPB Office in Kansas City fax # (816) 713-8810
Dodge Plant # (620) 338-4336 / Liberal Plant # (620) 626-0698