

- Legend**
- Non-Cropland
 - CRP
 - Iowa PLSS
 - Cropland
 - Tract Boundary
 - Iowa Roads

- Wetland Determination Identifiers**
- Restricted Use
 - ▼ Limited Restrictions
 - Exempt from Conservation Compliance Provisions

Tract Cropland Total: 240.61 acres

2018 Program Year
Map Created September 06, 2018

Farm 6453
Tract 11795

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

Farm # 645 6453
Tract # 11795



Top Polk
Section 17

CRP Plan Map

Roger Harrington /

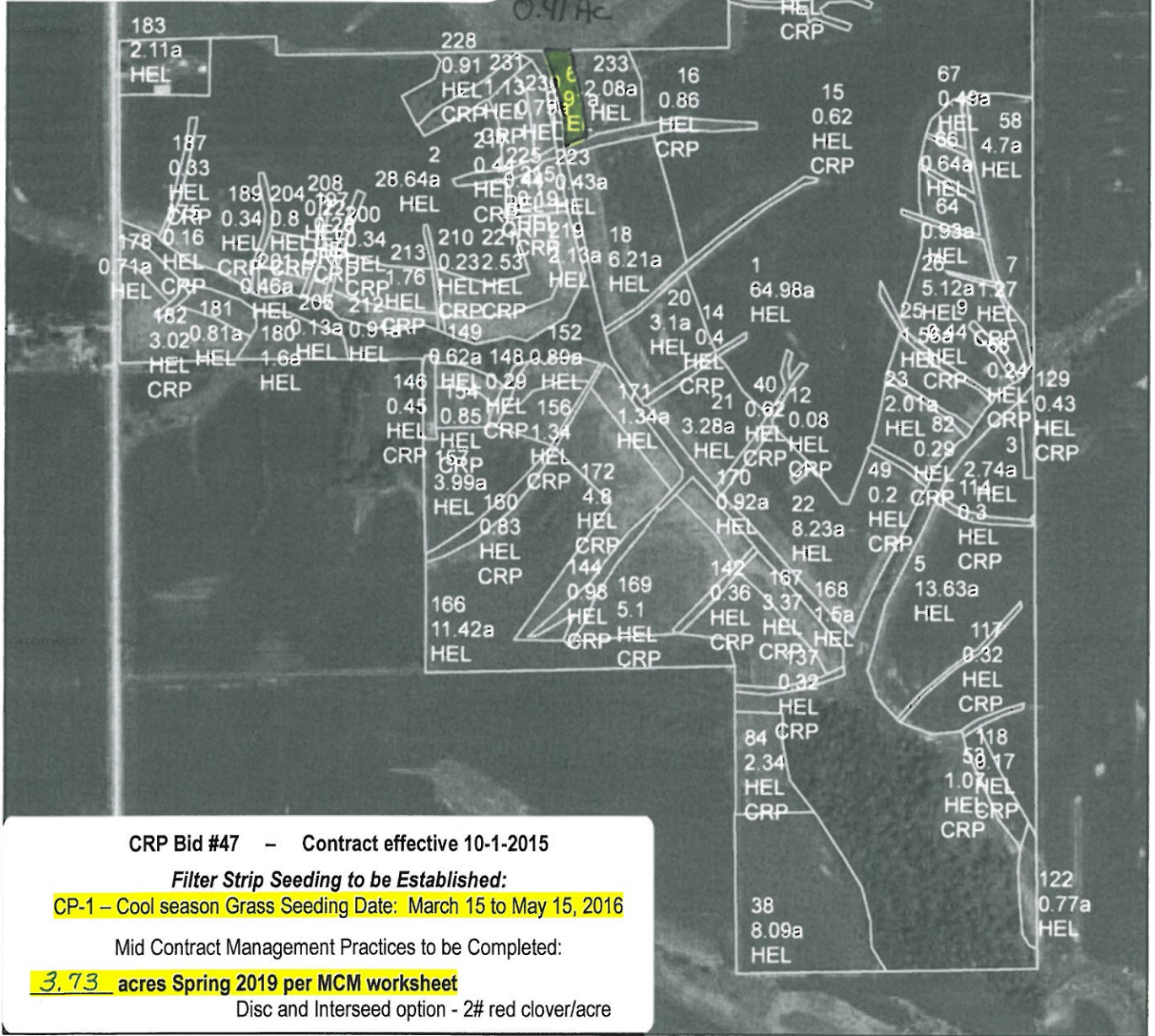
Client's Name: Yvonne Klein

Prepared with assistance from USDA-Natural Resources

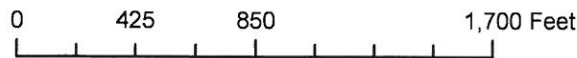
Conservation Service and assisted by: Lynn Crosby

Keokuk SWCD, Keokuk County, IA

Date: 9-24-15



Keokuk County



1 inch equals 690.87 feet

Legend

National Wetland SDE wetlands

Wetland Determination Identifiers

● Restricted Use

■ Limited Restrictions

■ Exempt from Conservation Compliance Provisions

□ GIS_IA sde clu_a_la107

Date: August 13, 2015

Disclaimer: Wetland identifiers do not represent the size, shape or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact wetland boundaries and determinations, or contact NRCS.

This form is available electronically.

CRP-1
(07-23-10)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

CONSERVATION RESERVE PROGRAM CONTRACT

NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection estimated to average 4 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.

7. COUNTY OFFICE ADDRESS (Include Zip Code):

KEOKUK COUNTY FARM SERVICE AGENCY
607 E JACKSON ST
SIGOURNEY, IA 52591-1725

TELEPHONE NUMBER (Include Area Code): (641)622-2800

1. ST. & CO. CODE & ADMIN. LOCATION
19107

2. SIGN-UP NUMBER
47

3. CONTRACT NUMBER

11198

4. ACRES FOR ENROLLMENT

3.73

5. FARM NUMBER
0006453

6. TRACT NUMBER(S)
0011795

8. OFFER (Select one)

GENERAL

ENVIRONMENTAL PRIORITY

FROM:

(MM-DD-YYYY)

10-1-15

TO:

(MM-DD-YYYY)

9-30-25

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be referred to as "the Participant"). The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection.

The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1, CRP-1 Appendix and any addendum thereto, CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre

\$296.61

DOA

11. Identification of CRP Land

(See Page 2 for additional space)

B. Annual Contract Payment

\$1106

C. First Year Payment

A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
0011795	0004	CP21	2.38	\$436.00
0011795	0006	CP21	0.91	\$167.00
0011795	0008	CP21	0.44	\$81.00

(Item 10C applicable only to continuous signup when the first year payment is prorated.)

12. PARTICIPANTS

A. PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE	(3) SOCIAL SECURITY NUMBER:
ROGER D HARRINGTON 28229 HIGHWAY 78 OLLIE, IA 52576-8629	50.00%	(4) SIGNATURE <i>Roger Harrington</i> DATE (MM-DD-YYYY) 9-24-15
YVONNE E KLEIN 655 ALDERWOOD DR NEWPORT BEACH, CA 92660-7153	50.00%	(4) SIGNATURE <i>by Roger Harrington DOA</i> DATE (MM-DD-YYYY) 9-24-15
N/A	%	(4) SIGNATURE DATE (MM-DD-YYYY)

(If more than three individuals are signing, continue on attachment.)

(If more than three individuals are signing, continue on attachment.)

13. CCC USE ONLY -

Payments according to the shares are approved.

A. SIGNATURE OF CCC REPRESENTATIVE

Dee Ann Sebaw

B. DATE (MM-DD-YYYY)

9/30/15

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L. 99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 CFR Part 1410 and the Internal Revenue code (26 USC 6109). The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program Contract, to assist in determining eligibility and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law Enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, generic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Original - County Office Copy

Owner's Copy

Operator's Copy

Farm # 6453
Tract # 11795



Twp Polk
Section 17.20

CRP Plan Map

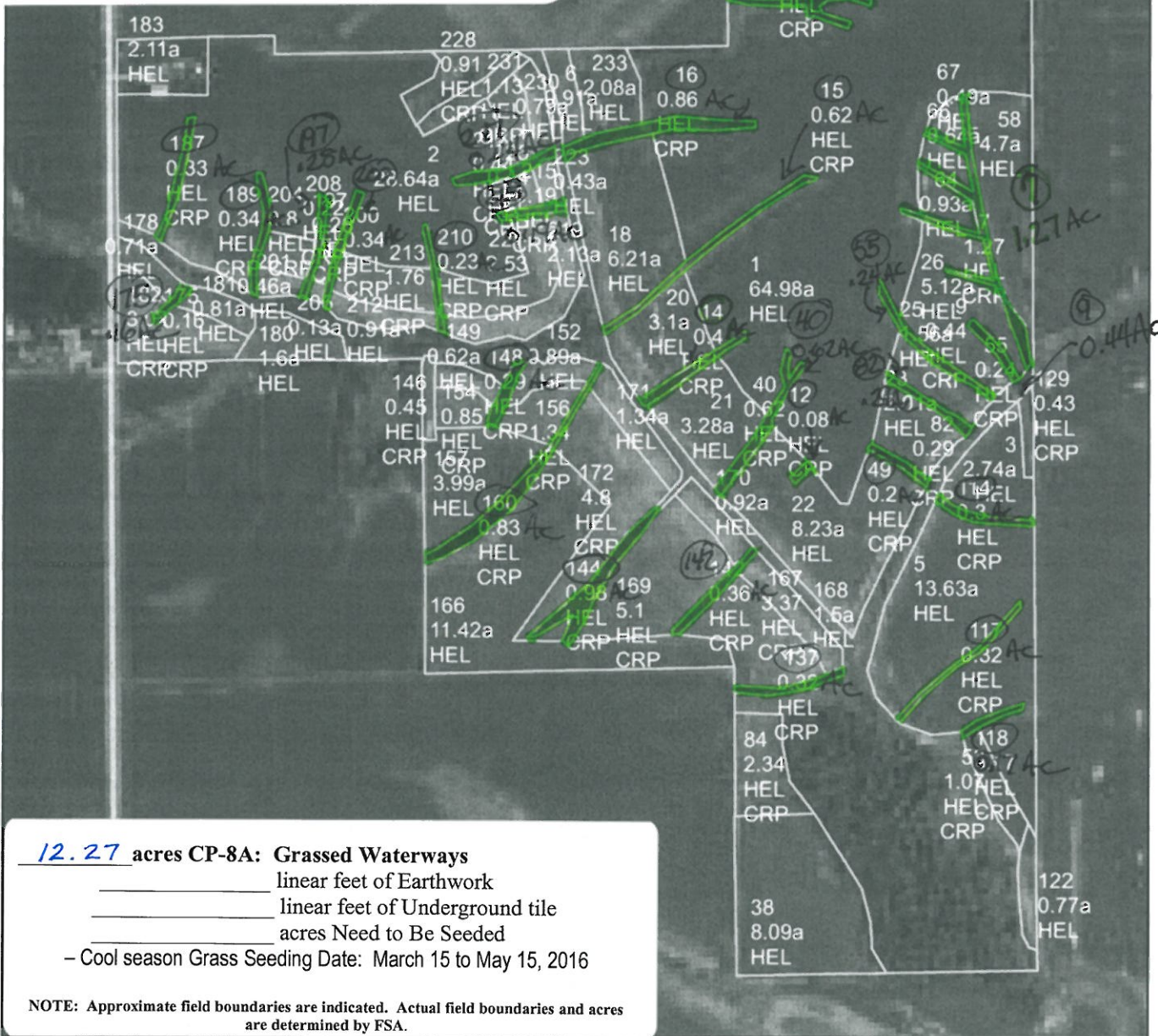
Client's Name: Roger Harrington / Yvonne Klein

Prepared with assistance from USDA-Natural Resources

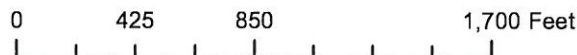
Conservation Service and assisted by: Lynn Crosby

Keokuk SWCD, Keokuk County, IA

Date: 9-24-15



Keokuk County



1 inch equals 690.87 feet

Legend

National_Wetland.SDE.wetlands

Wetland Determination Identifiers

● Restricted Use

▽ Limited Restrictions

■ Exempt from Conservation Compliance Provisions

GIS_IA_sde.clu_a_1a107

Date: August 14, 2015

Disclaimer: Wetland identifiers do not represent the size, shape or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact wetland boundaries and determinations, or contact NRCS.

This form is available electronically.

CRP-1 (07-23-10) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT <small>NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection estimated to average 4 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.</small>	1. ST. & CO. CODE & ADMIN. LOCATION 19107	2. SIGN-UP NUMBER 47
	3. CONTRACT NUMBER 11200	4. ACRES FOR ENROLLMENT 12.27
7. COUNTY OFFICE ADDRESS (Include Zip Code): KEOKUK COUNTY FARM SERVICE AGENCY 607 E JACKSON ST SIGOURNEY, IA 52591-1725	5. FARM NUMBER 0006453	6. TRACT NUMBER(S) 0011795
	8. OFFER (Select one) GENERAL <input type="checkbox"/> ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/>	9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-15 TO: (MM-DD-YYYY) 9-30-25
TELEPHONE NUMBER (Include Area Code): (641)622-2800		

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be referred to as "the Participant"). The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection.

The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1, CRP-1 Appendix and any addendum thereto, CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre	\$288.17	<i>RDA</i>	11. Identification of CRP Land (See Page 2 for additional space)				
B. Annual Contract Payment	\$3536		A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
C. First Year Payment			0011795	0007	CP8A	1.27	\$0.00
(Item 10C applicable only to continuous signup when the first year payment is prorated.)			0011795	0009	CP8A	0.44	\$0.00
			0011795	0011	CP8A	0.26	\$0.00

12. PARTICIPANTS				
A PARTICIPANT'S NAME AND ADDRESS (Zip Code): ROGER D HARRINGTON 28229 HIGHWAY 78 OLLIE, IA 52576-8629	(2) SHARE 50.00%	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE <i>Roger Harrington</i> (If more than three individuals are signing, continue on attachment.)	DATE (MM-DD-YYYY) 8-31-15
B PARTICIPANT'S NAME AND ADDRESS (Zip Code): YVONNE E KLEIN 655 ALDERWOOD DR NEWPORT BEACH, CA 92660-7153	(2) SHARE 50.00%	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE <i>by Roger Harrington RDA</i> (If more than three individuals are signing, continue on attachment.)	DATE (MM-DD-YYYY) 8-31-15
C PARTICIPANT'S NAME AND ADDRESS (Zip Code): N/A	(2) SHARE %	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE	DATE (MM-DD-YYYY)
(If more than three individuals are signing, continue on attachment.)		(If more than three individuals are signing, continue on attachment.)		

13. CCC USE ONLY - Payments according to the shares are approved.	A. SIGNATURE OF CCC REPRESENTATIVE <i>Debra Behn</i>	B. DATE (MM-DD-YYYY) 9/30/15
---	---	---------------------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L. 99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 CFR Part 1410 and the Internal Revenue code (26 USC 6109). The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program Contract, to assist in determining eligibility and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law Enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, generic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6362 (TDD). USDA is an equal opportunity provider and employer.

Original - County Office Copy
 Owner's Copy
 Operator's Copy

Continuation of Item 11 - Identification of CRP Land

A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated C/S	CONTRACT PERIOD (MM-DD-YYYY)	
					F. FROM	G. TO
0011795	0012	CP8A	0.08	\$ 0.00		
0011795	0014	CP8A	0.40	\$ 0.00		
0011795	0015	CP8A	0.62	\$ 0.00		
0011795	0016	CP8A	0.86	\$ 0.00		
0011795	0017	CP8A	0.63	\$ 0.00		
0011795	0019	CP8A	0.28	\$ 0.00		
0011795	0024	CP8A	0.20	\$ 0.00		
0011795	0040	CP8A	0.62	\$ 0.00		
0011795	0049	CP8A	0.20	\$ 0.00		
0011795	0055	CP8A	0.24	\$ 0.00		
0011795	0082	CP8A	0.29	\$ 0.00		
0011795	0114	CP8A	0.30	\$ 0.00		
0011795	0117	CP8A	0.32	\$ 0.00		
0011795	0118	CP8A	0.17	\$ 0.00		
0011795	0137	CP8A	0.32	\$ 0.00		
0011795	0142	CP8A	0.36	\$ 0.00		
0011795	0144	CP8A	0.98	\$ 0.00		
0011795	0148	CP8A	0.29	\$ 0.00		
0011795	0160	CP8A	0.83	\$ 0.00		
0011795	0175	CP8A	0.16	\$ 0.00		
0011795	0187	CP8A	0.33	\$ 0.00		
0011795	0189	CP8A	0.34	\$ 0.00		
0011795	0197	CP8A	0.28	\$ 0.00		
0011795	0200	CP8A	0.34	\$ 0.00		
0011795	0210	CP8A	0.23	\$ 0.00		
0011795	0215	CP8A	0.19	\$ 0.00		

Original - County Office Copy

Owner's Copy

Operator's Copy

11/200

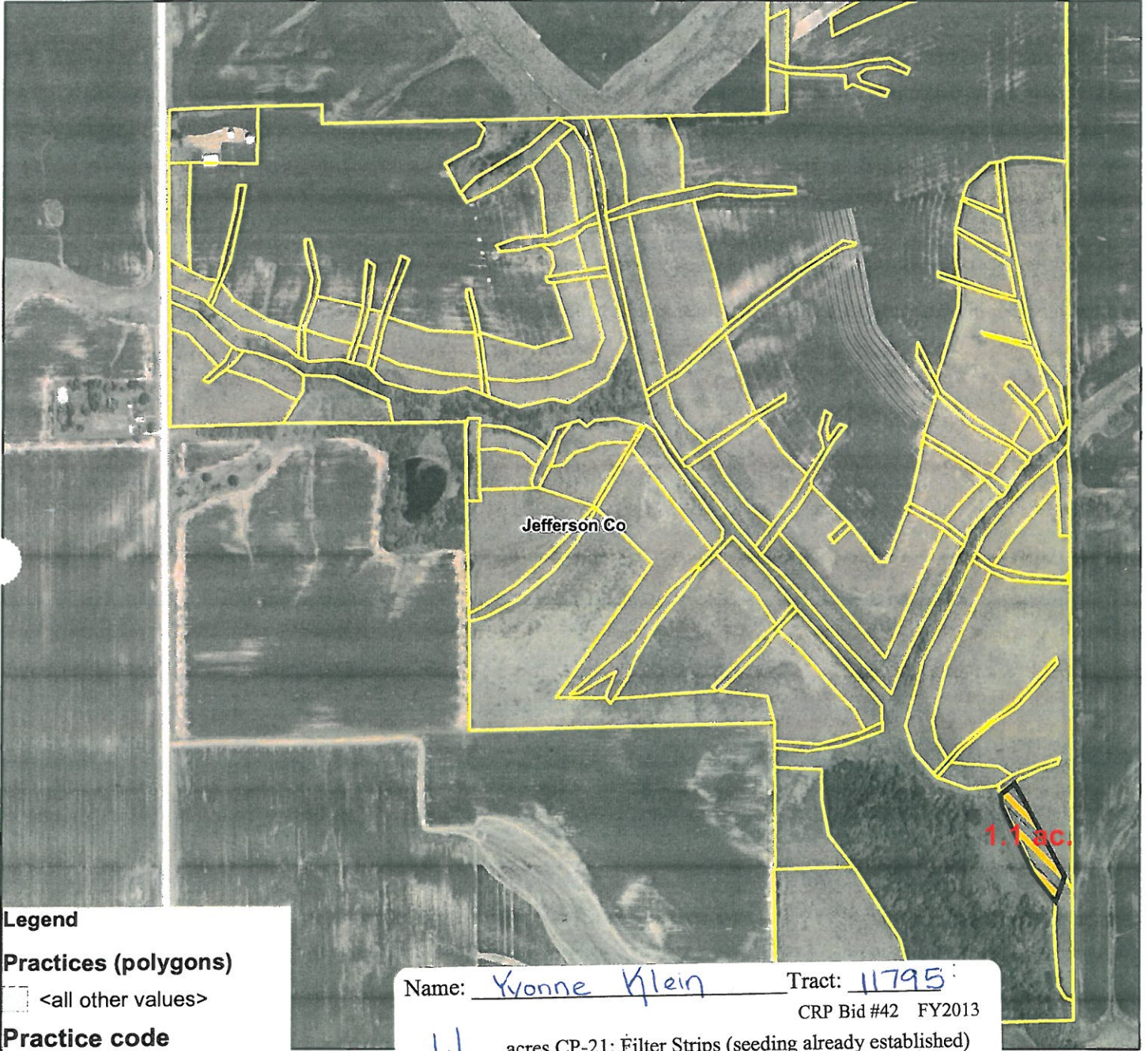
CRP BID 42
t11795

Date: 8/21/2012

Customer(s): YVONNE E KLEIN
Jefferson County
Iowa Twp.
Section: 17/20

Field Office: SIGOURNEY SERVICE CENTER

Assisted By: LYNN CROSBY



Legend

Practices (polygons)

<all other values>

Practice code

393

Conspan

practice_instance_point

practice_instance_polyline

practice_instance_polygon

land_unit

Iowa - Counties

Keokuk Co - Townships

Name: Yvonne Klein Tract: 11795
CRP Bid #42 FY2013

1.1 acres CP-21: Filter Strips (seeding already established)

1.1 acres of Mid Contract Management
During Fall 2012 or Spring 2013

Note: Approximate field boundaries are indicated. Actual field boundaries and acres are determined by FSA. Scale = 8" to the mile



This form is available electronically.

CRP-1 (07-23-10) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT <small>NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection estimated to average 4 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.</small>	1. ST. & CO. CODE & ADMIN. LOCATION 19107	2. SIGN-UP NUMBER 42
	3. CONTRACT NUMBER 3970	4. ACRES FOR ENROLLMENT 1.1
7. COUNTY OFFICE ADDRESS (Include Zip Code): KEOKUK COUNTY FARM SERVICE AGENCY 607 E JACKSON ST SIGOURNEY, IA 52591-1725	5. FARM NUMBER 0005749	6. TRACT NUMBER(S) 0011795
TELEPHONE NUMBER (Include Area Code): (641)622-2800	8. OFFER (Select one) GENERAL <input type="checkbox"/> FROM: (MM-DD-YYYY) 0-01-12 ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/> TO: (MM-DD-YYYY) 9-30-22	

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be referred to as "the Participant"). The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection. The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1, CRP-1 Appendix and any addendum thereto, CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre	\$247.20	11. Identification of CRP Land				
B. Annual Contract Payment	\$272	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
C. First Year Payment		0011795	0053	CP21	1.1	\$0.00
(Item 10C applicable only to continuous signup when the first year payment is prorated.)						

2. PARTICIPANTS		
A(1). PARTICIPANTS NAME AND ADDRESS (Zip Code): ROGER D HARRINGTON 28229 HIGHWAY 78 OLLIE, IA 52576-8629	(2) SHARE 50.00%	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE <i>Roger Harrington</i> (If more than three individuals are signing, continue on attachment.) 7-31-12
B(1). PARTICIPANTS NAME AND ADDRESS (Zip Code): YVONNE E KLEIN 27319 HIGHWAY 78 OLLIE, IA 52576-8631	(2) SHARE 50.00%	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE <i>by Roger Harrington POA</i> (If more than three individuals are signing, continue on attachment.) 7-31-12
C(1). PARTICIPANTS NAME AND ADDRESS (Zip Code): N/A	(2) SHARE %	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE (If more than three individuals are signing, continue on attachment.)
13. CCC USE ONLY - Payments according to the shares are approved		A. SIGNATURE OF CCC REPRESENTATIVE <i>Leland S.</i> 9/13/12

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L.99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 CFR Part 1410 and the Internal Revenue code (26 USC 6109). The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program contract, to assist in determining eligibility and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law Enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital and family status. (Not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audio tapes etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.

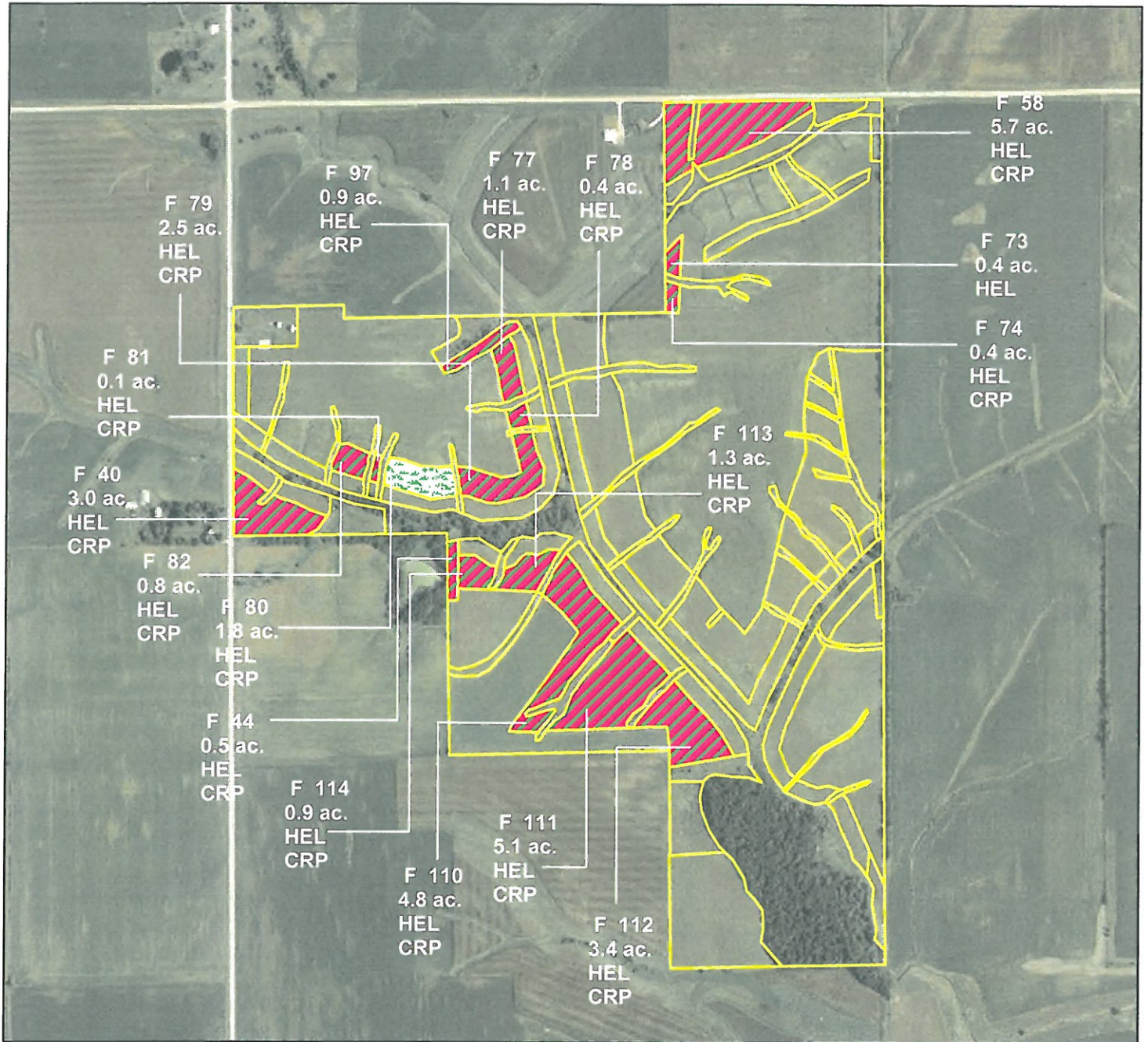
Original - County Office Copy Owner's Copy Operator's Copy

Plan Map

Date: 12/6/2006

Customer(s): YVONNE E KLEIN
District: JEFFERSON SOIL & WATER CONSERVATION DISTRICT
Legal Description:
Tract # 114
Polk Twp.
Sec. 17 & 20

Field Office: FAIRFIELD SERVICE CENTER
Agency: USDA-NRCS
Assisted By: Hani T Nguyen



Legend

- Consplan
- CP-12
- CP-4D



Image: Jefferson Co - 2005 Compliance



This form is available electronically.

CRP-1 (07-23-10)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1. ST. & CO. CODE & ADMIN. LOCATION 19 107	2. SIGN-UP NUMBER 32
CONSERVATION RESERVE PROGRAM CONTRACT				3. CONTRACT NUMBER 3546C	4. ACRES FOR ENROLLMENT 30.90
NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection estimated to average 4 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.					
7. COUNTY OFFICE ADDRESS (Include Zip Code): KEOKUK COUNTY FARM SERVICE AGENCY 607 E JACKSON STREET SIGOURNEY, IA 52591-0000				5. FARM NUMBER 6453	6. TRACT NUMBER(S) 11795
TELEPHONE NUMBER (Include Area Code): (641)622-2800				8. OFFER (Select one) GENERAL <input checked="" type="checkbox"/> ENVIRONMENTAL PRIORITY <input type="checkbox"/>	9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2009 TO: (MM-DD-YYYY) 09-30-2019

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be referred to as "the Participant"). The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with the terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection.

The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1, CRP-1 Appendix and any addendum thereto, CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre	\$ 110.34	11. Identification of CRP Land (See Page 2 for additional space)				
B. Annual Contract Payment	\$ 3,410	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
C. First Year Payment	\$	11795	10	CP4D	5.70	\$0.00
(Item 10C applicable only to continuous signup when the first year payment is prorated.)		11795	154	CP4D	0.80	\$0.00
		11795	156	CP4D	1.30	\$0.00

12. PARTICIPANTS

A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): YVONNE E KLEIN C/O CLAVIN KLEIN 655 ALDERWOOD DR NEWPORT BEACH, CA 92660-7153	(2) SHARE 100.00 %	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE <i>Roger Harrington POA</i> (If more than three individuals are signing, continue on attachment.)	DATE (MM-DD-YYYY) 9-30-14
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE	DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SOCIAL SECURITY NUMBER:	(4) SIGNATURE	DATE (MM-DD-YYYY)

13. CCC USE ONLY - Payments according to the shares are approved	A. SIGNATURE OF CCC REPRESENTATIVE <i>Dee Ann Linn</i>	B. DATE (MM-DD-YYYY) 09-30-14
--	---	----------------------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L.99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 CFR Part 1410 and the Internal Revenue code (26 USC 6109). The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program Contract, to assist in determining eligibility and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law Enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, family status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800)795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Original - County Office Copy Owner's Copy Operator's Copy