



Abbreviated 156 Farm Record

Operator Name : PHILIP GENE GUY
Farms Associated with Operator : 19-101-977, 19-183-2478, 19-183-5662, 19-087-6044, 19-183-6395, 19-183-6397, 19-183-6401, 19-183-6517, 19-183-6518
CRP Contract Number(s) : 10005B, 11058A, 11059A, 11151A, 11152A, 11594A, 2868B
Recon ID : None
ARCPLC G/I/F Eligibility : Eligible

Farm Land Data

Farmland	Cropland	DCP Cropland	WBP	WRP	CRP	GRP	Sugarcane	Farm Status	Number Of Tracts
115.38	96.11	96.11	0.00	0.00	31.03	0.00	0.00	Active	2
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped		MPL	Acre Election	EWP	DCP Ag.Rel. Activity	Broken From Native Sod
0.00	0.00	65.08	0.00		0.00		0.00	0.00	0.00

Crop Election Choice

ARC Individual	ARC County	Price Loss Coverage
None	None	None
ARC Individual - Default	ARC County - Default	Price Loss Coverage - Default
None	SOYBN	CORN

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
Corn	57.10	0.00	137	
Soybeans	7.90	0.70	46	

TOTAL **65.00** **0.70**

NOTES

Tract Number : 714

Description : L1 SEC 12N PENN
FSA Physical Location : IOWA/JEFFERSON
ANSI Physical Location : IOWA/JEFFERSON
BIA Unit Range Number :
HEL Status : NHEL: No agricultural commodity planted on undetermined fields
Wetland Status : Wetland determinations not complete
WL Violations : None
Owners : LATHOL GUY ESTATE
Other Producers : None
Recon ID : None

Tract Land Data

Farm Land	Cropland	DCP Cropland	WBP	WRP	CRP	GRP	Sugarcane
75.96	71.32	71.32	0.00	0.00	15.27	0.00	0.00
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL	EWP	DCP Ag. Rel Activity	Broken From Native Sod
0.00	0.00	56.05	0.00	0.00	0.00	0.00	0.00

Abbreviated 156 Farm Record

DCP Crop Data

Tract 714 Continued ...

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	48.16	0.00	137
Soybeans	7.89	0.00	46
TOTAL	56.05	0.00	

NOTES

Tract Number : 715

Description : L2 SE 1/4 SEC 12 WALNUT
FSA Physical Location : IOWA/JEFFERSON
ANSI Physical Location : IOWA/JEFFERSON
BIA Unit Range Number :
HEL Status : HEL field on tract.Conservation system being actively applied
Wetland Status : Wetland determinations not complete
WL Violations : None
Owners : LATHOL GUY ESTATE
Other Producers : None
Recon ID : None

Tract Land Data

Farm Land	Cropland	DCP Cropland	WBP	WRP	CRP	GRP	Sugarcane
39.42	24.79	24.79	0.00	0.00	15.76	0.00	0.00
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL	EWP	DCP Ag. Rel Activity	Broken From Native Sod
0.00	0.00	9.03	0.00	0.00	0.00	0.00	0.00

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	8.94	0.00	137
Soybeans	0.01	0.70	46
TOTAL	8.95	0.70	

NOTES

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) e-mail: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation <div style="text-align: center;">CONSERVATION RESERVE PROGRAM CONTRACT</div>		1. ST. & CO CODE & ADMIN. LOCATION <div style="text-align: center;">19 101</div>		2. SIGN-UP NUMBER <div style="text-align: center;">51</div>		
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000		3. CONTRACT NUMBER <div style="text-align: center;">11594A</div>		4. ACRES FOR ENROLLMENT <div style="text-align: center;">1.62</div>		
		5. FARM NUMBER <div style="text-align: center;">977</div>		6. TRACT NUMBER(S) <div style="text-align: center;">715</div>		
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558		8. OFFER (Select one) GENERAL <input type="checkbox"/> ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/>		9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2018 TO: (MM-DD-YYYY) 09-30-2033		
		THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.				
10A. Rental Rate Per Acre \$ 196.00 PG6		11. Identification of CRP Land (See Page 2 for additional space)				
10B. Annual Contract Payment \$ 318		A. Tract No. <div style="text-align: center;">715</div>	B. Field No. <div style="text-align: center;">0012</div>	C. Practice No. <div style="text-align: center;">CP21</div>	D. Acres <div style="text-align: center;">0.27</div>	E. Total Estimated Cost-Share <div style="text-align: center;">\$ 49</div>
10C. First Year Payment \$ (Item 10C applicable only to continuous signup when the first year payment is prorated.)		<div style="text-align: center;">715</div>	<div style="text-align: center;">0013</div>	<div style="text-align: center;">CP21</div>	<div style="text-align: center;">0.22</div>	<div style="text-align: center;">\$ 40</div>
		<div style="text-align: center;">715</div>	<div style="text-align: center;">0015</div>	<div style="text-align: center;">CP21</div>	<div style="text-align: center;">1.13</div>	<div style="text-align: center;">\$ 207</div>
12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)						
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264		(2) SHARE <div style="text-align: center;">100.00%</div>		(3) SIGNATURE 		(4) DATE (MM-DD-YYYY) <div style="text-align: center;">5-24-19</div>
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
13. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE				B. DATE (MM-DD-YYYY)
NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.						
This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes 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 against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.



Original – County Office Copy



Owner's Copy



Operator's Copy



United States
Department of
Agriculture

Jefferson County, Iowa



Legend

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

Wetland Determination Identifiers

- Restricted Use
- ▽ Limited Restrictions
- Exempt from Conservation
- Compliance Provisions

Tract Cropland Total: 24.79 acres

2018 Program Year

Map Created April 17, 2018

Farm 977

Tract 715

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).

USDA is an equal opportunity provider, employer, and lender.

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation <div style="text-align: center;">CONSERVATION RESERVE PROGRAM CONTRACT</div>		1. ST. & CO CODE & ADMIN. LOCATION <div style="text-align: center;">19 101</div>		2. SIGN-UP NUMBER <div style="text-align: center;">39</div>		
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000		3. CONTRACT NUMBER <div style="text-align: center;">2868B</div>		4. ACRES FOR ENROLLMENT <div style="text-align: center;">10.24</div>		
		5. FARM NUMBER <div style="text-align: center;">977</div>		6. TRACT NUMBER(S) <div style="text-align: center;">714</div>		
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558		8. OFFER (Select one) GENERAL <input checked="" type="checkbox"/> ENVIRONMENTAL PRIORITY <input type="checkbox"/>		9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2010 TO: (MM-DD-YYYY) 09-30-2025		
		<p><i>THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.</i></p>				
10A. Rental Rate Per Acre \$ 175.41 <i>PGG</i>		11. Identification of CRP Land (See Page 2 for additional space)				
10B. Annual Contract Payment \$ 1,796		A. Tract No. <div style="text-align: center;">714</div>	B. Field No. <div style="text-align: center;">15</div>	C. Practice No. <div style="text-align: center;">CP25</div>	D. Acres <div style="text-align: center;">5.90</div>	E. Total Estimated Cost-Share <div style="text-align: center;">\$ 987</div>
10C. First Year Payment \$		<div style="text-align: center;">714</div>	<div style="text-align: center;">16</div>	<div style="text-align: center;">CP25</div>	<div style="text-align: center;">2.02</div>	<div style="text-align: center;">\$ 338</div>
		<div style="text-align: center;">714</div>	<div style="text-align: center;">17</div>	<div style="text-align: center;">CP25</div>	<div style="text-align: center;">2.32</div>	<div style="text-align: center;">\$ 388</div>
12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)						
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264		(2) SHARE <div style="text-align: center;">100.00%</div>		(3) SIGNATURE <div style="text-align: center;"><i>Exec</i> <i>[Signature]</i></div>		(4) DATE (MM-DD-YYYY) <div style="text-align: center;">5-24-19</div>
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE <div style="text-align: center;"><i>[Signature]</i></div>		(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
13. CCC USE ONLY						
A. SIGNATURE OF CCC REPRESENTATIVE				B. DATE (MM-DD-YYYY)		
<p>NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.</p> <p>This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</p>						

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.



Original – County Office Copy



Owner's Copy



Operator's Copy

Farm# 977
Tract# 714

Section: 12
Township: Penn



Jefferson County FSA

1 inch equals 337.92 feet

Map Printed: August 26, 2010

Legend

Wetland Determination

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions
- Field Boundary

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.

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1. ST. & CO CODE & ADMIN. LOCATION 19 101	2. SIGN-UP NUMBER 46
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000	3. CONTRACT NUMBER 11059A	4. ACRES FOR ENROLLMENT 1.48
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558	5. FARM NUMBER 977 8. OFFER (Select one) GENERAL <input type="checkbox"/> ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/>	6. TRACT NUMBER(S) 714 9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2014 TO: (MM-DD-YYYY) 09-30-2024

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.**

10A. Rental Rate Per Acre \$ 252.28	11. Identification of CRP Land (See Page 2 for additional space)				
10B. Annual Contract Payment \$ 373	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
10C. First Year Payment \$	714	2	CP8A	0.32	\$ 40
(Item 10C applicable only to continuous signup when the first year payment is prorated.)	714	3	CP8A	0.39	\$ 49
	714	4	CP8A	0.50	\$ 63

12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264	(2) SHARE 100.00%	(3) SIGNATURE Philip [Signature] Exec	(4) DATE (MM-DD-YYYY) 5-24-19
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SIGNATURE	(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SIGNATURE	(4) DATE (MM-DD-YYYY)

13. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE	B. DATE (MM-DD-YYYY)
-------------------------	------------------------------------	----------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes 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 against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.



Original – County Office Copy



Owner's Copy



Operator's Copy



United States
Department of
Agriculture

Jefferson County, Iowa



Common Land Unit

- Non-Cropland
- Cropland
- CRP
- Tract Boundary
- PLSS

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions

0 170 340 680 Feet

2015 Ortho Imagery

2017 Program Year

Map Created November 29, 2016

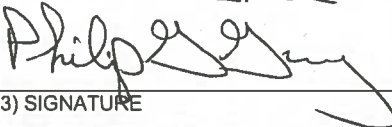
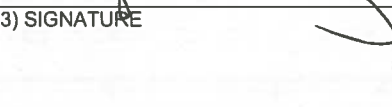
Farm 977
Tract 714

Tract Cropland Total: 71.32 acres

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).

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1. ST. & CO CODE & ADMIN. LOCATION 19 101	2. SIGN-UP NUMBER 47
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000	3. CONTRACT NUMBER 11151A	4. ACRES FOR ENROLLMENT 3.55
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558	5. FARM NUMBER 977	6. TRACT NUMBER(S) 714
THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.		

10A. Rental Rate Per Acre \$ 230.28 PGG	11. Identification of CRP Land (See Page 2 for additional space)				
10B. Annual Contract Payment \$ 817	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
10C. First Year Payment \$	714	10	CP1	0.59	\$ 24
(Item 10C applicable only to continuous signup when the first year payment is prorated.)					
	714	7	CP1	1.49	\$ 60
	714	8	CP1	1.23	\$ 49

12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264	(2) SHARE 100.00%	(3) SIGNATURE Exec 	(4) DATE (MM-DD-YYYY) 5-24-19
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SIGNATURE 	(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SIGNATURE	(4) DATE (MM-DD-YYYY)
13. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE		B. DATE (MM-DD-YYYY)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes 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 against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. 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

[illegible]

1

Original – County Office Copy

7

Owner's Copy

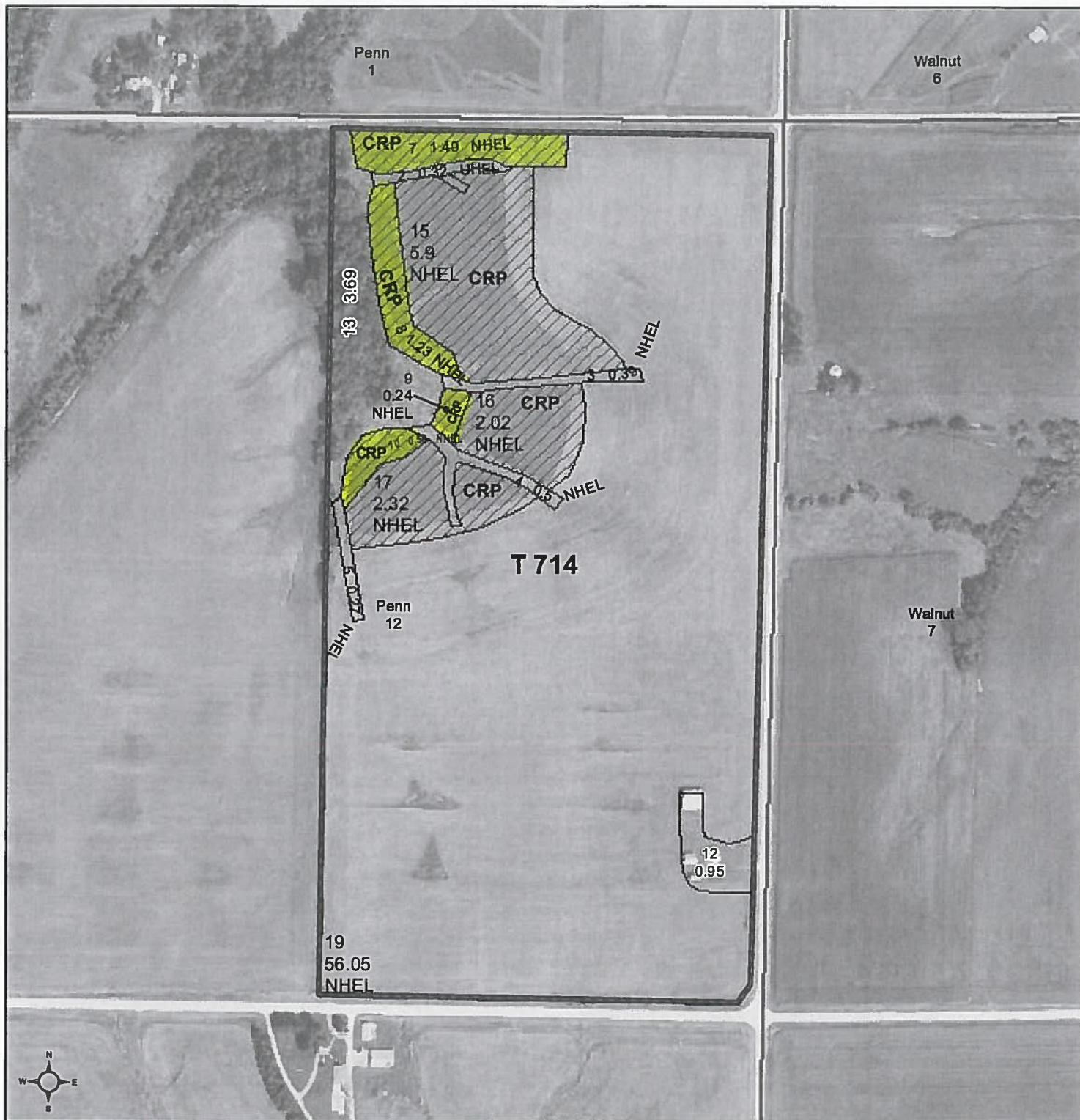
9

Operator's Copy



United States
Department of
Agriculture

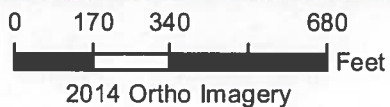
Jefferson County, Iowa



Common Land Unit	
	CRP
	Cropland
	Non-Cropland
	Tract Boundary
	PLSS

Wetland Determination Identifiers

- Restricted Use
- ▽ Limited Restrictions
- Exempt from Conservation
- Compliance Provisions



2014 Ortho Imagery

2015 Program Year

Map Created January 26, 2015

Farm 977
Tract 714

Tract Cropland Total: 71.32 acres

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).

CRP-1 U.S. DEPARTMENT OF AGRICULTURE (10-22-15) Commodity Credit Corporation <div style="text-align: center;">CONSERVATION RESERVE PROGRAM CONTRACT</div>		1. ST. & CO CODE & ADMIN. LOCATION <div style="text-align: center;">19 101</div>		2. SIGN-UP NUMBER <div style="text-align: center;">41</div>	
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000		3. CONTRACT NUMBER <div style="text-align: center;">10005B</div>		4. ACRES FOR ENROLLMENT <div style="text-align: center;">3.66</div>	
		5. FARM NUMBER <div style="text-align: center;">977</div>		6. TRACT NUMBER(S) <div style="text-align: center;">715</div>	
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558		8. OFFER (Select one) GENERAL <input checked="" type="checkbox"/> ENVIRONMENTAL PRIORITY <input type="checkbox"/>		9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2011 TO: (MM-DD-YYYY) 09-30-2021	
<p><i>THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.</i></p>					
10A. Rental Rate Per Acre \$ 172.73 <i>FCG</i>		11. Identification of CRP Land (See Page 2 for additional space)			
10B. Annual Contract Payment \$ 632		A. Tract No. <div style="text-align: center;">715</div>	B. Field No. <div style="text-align: center;">21</div>	C. Practice No. <div style="text-align: center;">CP25</div>	D. Acres <div style="text-align: center;">3.26</div>
10C. First Year Payment \$		<div style="text-align: center;">715</div>	<div style="text-align: center;">22</div>	<div style="text-align: center;">CP12</div>	<div style="text-align: center;">0.40</div>
(Item 10C applicable only to continuous signup when the first year payment is prorated.)		<div style="text-align: center;">\$ 554</div>	<div style="text-align: center;">\$ 0</div>		
12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)					
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264		(2) SHARE <div style="text-align: center;">100.00%</div>	(3) SIGNATURE <div style="text-align: center;"><i>Exec Philip Guy</i></div>		(4) DATE (MM-DD-YYYY) <div style="text-align: center;">5-24-19</div>
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>	(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>	(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
13. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE			B. DATE (MM-DD-YYYY)
<p>NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.</p> <p>This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</p>					

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.

☐

Original – County Office Copy

☐

Owner's Copy

☐

Operator's Copy

Farm# 977
Tract# 715

Section: 12
Township: Penn



Jefferson County FSA

1 inch = 178.229652 feet

Map Printed:

March 05, 2013

Legend

Wetland Determination

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions

Field Boundary

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.

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation <div style="text-align: center;">CONSERVATION RESERVE PROGRAM CONTRACT</div>		1. ST. & CO CODE & ADMIN. LOCATION <div style="text-align: center;">19 101</div>		2. SIGN-UP NUMBER <div style="text-align: center;">46</div>			
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000		3. CONTRACT NUMBER <div style="text-align: center;">11058A</div>		4. ACRES FOR ENROLLMENT <div style="text-align: center;">0.76</div>			
		5. FARM NUMBER <div style="text-align: center;">977</div>		6. TRACT NUMBER(S) <div style="text-align: center;">715</div>			
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558		8. OFFER (Select one) GENERAL <input type="checkbox"/>		9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2014 TO: (MM-DD-YYYY) 09-30-2024			
		ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/>					
THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.							
10A. Rental Rate Per Acre \$ 225.16 <i>PGG</i>		11. Identification of CRP Land (See Page 2 for additional space)					
10B. Annual Contract Payment \$ 171		A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share	
10C. First Year Payment \$		715	3	CP8A	0.14	\$ 18	
(Item 10C applicable only to continuous signup when the first year payment is prorated.)		715	4	CP8A	0.08	\$ 10	
		715	5	CP8A	0.13	\$ 16	
12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)							
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264		(2) SHARE <div style="text-align: center;">100.00%</div>		(3) SIGNATURE <i>Exec Philip J. Guy</i>		(4) DATE (MM-DD-YYYY) <div style="text-align: center;">5-24-19</div>	
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE		(4) DATE (MM-DD-YYYY)	
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE <div style="text-align: center;">%</div>		(3) SIGNATURE		(4) DATE (MM-DD-YYYY)	
13. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE				B. DATE (MM-DD-YYYY)	
NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.							
This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes 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 against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.

☐

Original – County Office Copy

☐

Owner's Copy

☐

Operator's Copy



United States
Department of
Agriculture

Jefferson County, Iowa



- Common Land Unit**
Cropland / / Non-cropland
- Conservation Reserve Program
- Wetland Determination Identifiers**
- Restricted Use
 - Limited Restrictions
 - Exempt from Conservation Compliance Provisions
- Tract Boundary Section Line

2014 Program Year

Map Created December 16, 2013

Farm 977
Tract 715

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).

CRP-1 (10-22-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation <div style="text-align: center;">CONSERVATION RESERVE PROGRAM CONTRACT</div>		1. ST. & CO CODE & ADMIN. LOCATION <div style="text-align: center;">19 101</div>		2. SIGN-UP NUMBER <div style="text-align: center;">47</div>	
7A. COUNTY OFFICE ADDRESS (Include Zip Code) JEFFERSON COUNTY FARM SERVICE AGENCY 605 SOUTH 23RD ST FAIRFIELD, IA 52556-0000		3. CONTRACT NUMBER <div style="text-align: center;">11152A</div>		4. ACRES FOR ENROLLMENT <div style="text-align: center;">9.72</div>	
7B. TELEPHONE NUMBER (Include Area Code): (641) 472-2558		5. FARM NUMBER <div style="text-align: center;">977</div>		6. TRACT NUMBER(S) <div style="text-align: center;">715</div>	
8. OFFER (Select one) GENERAL <input type="checkbox"/> ENVIRONMENTAL PRIORITY <input checked="" type="checkbox"/>		9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2015 TO: (MM-DD-YYYY) 09-30-2025			
THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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; CRP-2C; or CRP-2G.					
10A. Rental Rate Per Acre \$ 248.89 <i>PGG</i>		11. Identification of CRP Land (See Page 2 for additional space)			
10B. Annual Contract Payment \$ 2,419		A. Tract No.	B. Field No.	C. Practice No.	E. Total Estimated Cost-Share
10C. First Year Payment \$		715	17	CP1	\$ 339
(Item 10C applicable only to continuous signup when the first year payment is prorated.)		715	18	CP1	\$ 50
12. PARTICIPANTS (If more than three individuals are signing, see Page 3.)					
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA 52540-0264		(2) SHARE 100.00%	(3) SIGNATURE <i>Exec</i> <i>Philip J. Guy</i>		(4) DATE (MM-DD-YYYY) 5-24-19
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE %	(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):		(2) SHARE %	(3) SIGNATURE		(4) DATE (MM-DD-YYYY)
13. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE			B. DATE (MM-DD-YYYY)
NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program. This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes 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 against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.



Original – County Office Copy



Owner's Copy



Operator's Copy



United States
Department of
Agriculture

Jefferson County, Iowa



Common Land Unit

CRP	Tract Boundary
Cropland	PLSS
Non-Cropland	

0 170 340 680
Feet
2014 Ortho Imagery

2015 Program Year
Map Created January 26, 2015

Farm **977**
Tract **715**

Tract Cropland Total: 24.79 acres

Wetland Determination Identifiers

- Restricted Use
- ▽ Limited Restrictions
- Exempt from Conservation Compliance Provisions

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).



United States
Department of
Agriculture

Jefferson County, Iowa



Legend

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

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation
- Compliance Provisions

Tract Cropland Total: 24.79 acres

2019 Program Year
Map Created April 02, 2019

Farm **977**
Tract **715**

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).

USDA is an equal opportunity provider, employer, and lender.

Iowa
Washington

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

FARM: 5821
Prepared: 1/21/20 9:52 AM
Crop Year: 2020
Page: 1 of 1

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name LATHOL GUY ESTATE	Farm Identifier Div Farm 42	Recon Number 2011 19183 74
---	---------------------------------------	--------------------------------------

Farms Associated with Operator:
6397, 6401

ARC/PLC G//F Eligibility: Eligible

CRP Contract Number(s): None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
338.55	150.03	150.03	0.0	150.03	0.0	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod			
0.0	0.0	0.0	0.0	0.0	0.0			

Tract Number: 11034 **Description:** Brighton Twp, Sec 17, 18, 19 & 20
FSA Physical Location : Washington, IA **ANSI Physical Location:** Washington, IA
BIA Range Unit Number:
HEL Status: HEL Determinations not complete
Wetland Status: Wetland determinations not complete
WL Violations: None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
338.55	150.03	150.03	0.0	150.03	0.0	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod	
0.0	0.0	0.0	0.0	0.0	0.0	

Owners: LATHOL GUY ESTATE
Other Producers: GUY, LATHOL ALLEN



United States
Department of
Agriculture

Washington County, Iowa



Legend

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

Wetland Determination Identifiers

- Restricted Use
- ▽ Limited Restrictions
- Exempt from Conservation Compliance Provisions

Tract Cropland Total: 150.03 acres

2019 Program Year

Map Created April 01, 2019

Farm 5821

Tract 11034

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).

USDA is an equal opportunity provider, employer, and lender.

Iowa
Washington

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

FARM: 6397
Prepared: 1/21/20 9:51 AM
Crop Year: 2020
Page: 1 of 2

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name Farm Identifier Recon Number
GUY, PHILIP GENE

Farms Associated with Operator:
2478, 5662, 6395, 6401, 6517, 6518

ARC/PLC G//F Eligibility: Eligible

CRP Contract Number(s): 11372B, 11445B, 3455C, 11068B, 11079B, 11267B, 10175B, 10174B

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
662.33	488.35	488.35	0.0	0.0	93.84	0.0	Active	2
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod			
0.0	0.0	394.51	0.0	1.44	0.0			

PLC	ARC-CO	ARC-IC	PLC-Default	ARC-CO-Default	ARC-IC-Default
WHEAT, CORN	NONE	NONE	NONE	NONE	NONE

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
WHEAT	1.55	43	0.0
CORN	392.92	133	0.0
Total Base Acres:	394.47		

Tract Number: 651 Description Brighton Twp, Sec 8 & 9

FSA Physical Location : Washington, IA ANSI Physical Location: Washington, IA

BIA Range Unit Number:

HEL Status: HEL: conservation system is being actively applied

Wetland Status: Wetland determinations not complete

WL Violations: None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
302.8	202.87	202.87	0.0	0.0	70.14	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod	
0.0	0.0	132.73	0.0	0.0	0.0	

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
WHEAT	1.11	43	0.0
CORN	131.62	133	0.0
Total Base Acres:	132.73		

Owners: JOYCE GUY TRUST

LATHOL GUY ESTATE

Iowa
Washington

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

FARM: 6397
Prepared: 1/21/20 9:51 AM
Crop Year: 2020
Page: 2 of 2

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Other Producers: GUY, BRUCE LATHOL

GUY, LATHOL ALLEN

Tract Number: 11033 **Description** Brighton Twp, Sec 17, 18, 19 & 20

FSA Physical Location : Washington, IA

ANSI Physical Location: Washington, IA

BIA Range Unit Number:

HEL Status: HEL: conservation system is being actively applied

Wetland Status: Wetland determinations not complete

WL Violations: None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
359.53	285.48	285.48	0.0	0.0	23.7	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod	
0.0	0.0	261.78	0.0	1.44	0.0	

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
WHEAT	0.44	43	0.0
CORN	261.3	133	0.0
Total Base Acres:	261.74		

Owners: JOYCE GUY TRUST

LATHOL GUY ESTATE

Other Producers: GUY, BRUCE LATHOL

GUY, LATHOL ALLEN



United States
Department of
Agriculture

Washington County, Iowa



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: 285.48 acres

2019 Program Year

Map Created April 01, 2019

Farm 6397

Tract 11033

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).

USDA is an equal opportunity provider, employer, and lender.

CRP-1 (12-02-19)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	
CONSERVATION RESERVE PROGRAM CONTRACT		1. ST. & CO. CODE & ADMIN. LOCATION <div style="text-align: center;">19 183</div>	
		2. SIGN-UP NUMBER <div style="text-align: center;">47</div>	
		3. CONTRACT NUMBER <div style="text-align: center;">11372B</div>	
		4. ACRES FOR ENROLLMENT <div style="text-align: center;">11.11</div>	
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157		6. TRACT NUMBER <div style="text-align: center;">11033</div>	
		7. CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) <div style="text-align: center;">10-01-2015 09-30-2025</div>	
		8. SIGNUP TYPE: HEL Iowa	
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138			
THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.			
9A. Rental Rate Per Acre \$ 188.47		10. Identification of CRP Land (See Page 2 for additional space)	
9B. Annual Contract Payment \$ 2,094.00		A. Tract No. <div style="text-align: center;">11033</div>	B. Field No. <div style="text-align: center;">11</div>
9C. First Year Payment \$		C. Practice No. <div style="text-align: center;">CP3A</div>	D. Acres <div style="text-align: center;">11.11</div>
(Item 9C is applicable only when the first year payment is prorated.)		E. Total Estimated Cost-Share <div style="text-align: center;">\$ 3,333.00</div>	
11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST % PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264		(2) SHARE <div style="text-align: center;">0.00 %</div>	(3) SIGNATURE (By)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264		(2) SHARE <div style="text-align: center;">100.00 %</div>	(3) SIGNATURE (By)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)		(2) SHARE <div style="text-align: center;">%</div>	(3) SIGNATURE (By)
(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(5) DATE (MM-DD-YYYY)	
12. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE	
B. DATE (MM-DD-YYYY)			

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (12-02-19)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	
CONSERVATION RESERVE PROGRAM CONTRACT		1. ST. & CO. CODE & ADMIN. LOCATION 19 183	2. SIGN-UP NUMBER 47
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157		3. CONTRACT NUMBER 11445B	4. ACRES FOR ENROLLMENT 1.44
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138		6. TRACT NUMBER 11033	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2015 TO: (MM-DD-YYYY) 09-30-2025
8. SIGNUP TYPE: Continuous			
<p>THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.</p>			
9A. Rental Rate Per Acre \$ 81.20		10. Identification of CRP Land (See Page 2 for additional space)	
9B. Annual Contract Payment \$ 117.00		A. Tract No. 11033	B. Field No. 6
9C. First Year Payment \$		C. Practice No. CP22	D. Acres 1.44
(Item 9C is applicable only when the first year payment is prorated.)		E. Total Estimated Cost-Share \$ 432.00	
11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY
12. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE	
B. DATE (MM-DD-YYYY)			
<p>NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.</p> <p>Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</p> <p>In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.</p> <p>Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.</p> <p>To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.</p>			

CRP-1 (12-02-19)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. ST. & CO. CODE & ADMIN. LOCATION 19 183	2. SIGN-UP NUMBER 32
CONSERVATION RESERVE PROGRAM CONTRACT		3. CONTRACT NUMBER 3455C	4. ACRES FOR ENROLLMENT 27.70
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157		6. TRACT NUMBER 651	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2008 TO: (MM-DD-YYYY) 09-30-2020
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138		8. SIGNUP TYPE: General	

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 136.72	10. Identification of CRP Land (See Page 2 for additional space)			
9B. Annual Contract Payment	\$ 3,787.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres
9C. First Year Payment	\$	651	3	CP4D	27.70
(Item 9C is applicable only when the first year payment is prorated.)					E. Total Estimated Cost-Share \$ 0.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE			B. DATE (MM-DD-YYYY)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (12-02-19) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1. ST. & CO. CODE & ADMIN. LOCATION 19 183 3. CONTRACT NUMBER 11068B	2. SIGN-UP NUMBER 46 4. ACRES FOR ENROLLMENT 7.49
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157	6. TRACT NUMBER 11033	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2014 TO: (MM-DD-YYYY) 09-30-2029
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138	8. SIGNUP TYPE: Continuous	

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 297.91	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 2,231.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	11033	10	CP21	0.77	\$ 141.00
(Item 9C is applicable only when the first year payment is prorated.)		11033	12	CP21	1.01	\$ 185.00
		11033	17	CP21	2.86	\$ 523.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE	B. DATE (MM-DD-YYYY)
------------------	------------------------------------	----------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CONTINUATION OF ITEM 10 – Identification of CRP Land

[illegible]

CRP-1 (12-02-19) <div style="text-align: center;"> U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation </div> <div style="text-align: center; margin-top: 20px;"> CONSERVATION RESERVE PROGRAM CONTRACT </div>	1. ST. & CO. CODE & ADMIN. LOCATION <div style="text-align: center;">19 183</div>	2. SIGN-UP NUMBER <div style="text-align: center;">46</div>
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157	3. CONTRACT NUMBER <div style="text-align: center;">11079B</div>	4. ACRES FOR ENROLLMENT <div style="text-align: center;">23.52</div>
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138	6. TRACT NUMBER <div style="text-align: center;">651</div>	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2014 TO: (MM-DD-YYYY) 09-30-2029
8. SIGNUP TYPE: Continuous		

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 264.75	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 6,227.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	651	8	CP21	23.52	\$ 4,304.00
(Item 9C is applicable only when the first year payment is prorated.)						

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE <div style="text-align: center;">0.00 %</div>	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE <div style="text-align: center;">100.00 %</div>	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE <div style="text-align: center;">%</div>	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE	B. DATE (MM-DD-YYYY)
------------------	------------------------------------	----------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (12-02-19)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. ST. & CO. CODE & ADMIN. LOCATION 19 183	2. SIGN-UP NUMBER 47
CONSERVATION RESERVE PROGRAM CONTRACT		3. CONTRACT NUMBER 11267B	4. ACRES FOR ENROLLMENT 15.72
		7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2015 TO: (MM-DD-YYYY) 09-30-2025	
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157		6. TRACT NUMBER 651	8. SIGNUP TYPE: HEL Iowa
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138			

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 252.07	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 3,963.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	651	4	CP25	2.53	\$ 832.00
(Item 9C is applicable only when the first year payment is prorated.)		651	5	CP25	4.73	\$ 1,556.00
		651	6	CP25	4.59	\$ 1,510.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE			B. DATE (MM-DD-YYYY)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CONTINUATION OF ITEM 10 – Identification of CRP Land[illegible]

CRP-1 (12-02-19)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. ST. & CO. CODE & ADMIN. LOCATION 19 183	2. SIGN-UP NUMBER 44
CONSERVATION RESERVE PROGRAM CONTRACT		3. CONTRACT NUMBER 10175B	4. ACRES FOR ENROLLMENT 3.20
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157	6. TRACT NUMBER 651	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2013 TO: (MM-DD-YYYY) 09-30-2023	
		8. SIGNUP TYPE: Continuous	
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138			

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 309.60	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 991.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	651	0002	CP21	3.20	\$ 586.00
(Item 9C is applicable only when the first year payment is prorated.)						

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE	B. DATE (MM-DD-YYYY)
------------------	------------------------------------	----------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (12-02-19) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1. ST. & CO. CODE & ADMIN. LOCATION 19 183 3. CONTRACT NUMBER 10174B	2. SIGN-UP NUMBER 44 4. ACRES FOR ENROLLMENT 5.10
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) WASHINGTON COUNTY FARM SERVICE AGENCY 1621 E. WASHINGTON ST. SUITE 2 WASHINGTON, IA52353-2157	6. TRACT NUMBER 11033	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2013 TO: (MM-DD-YYYY) 09-30-2023
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 653-2138	8. SIGNUP TYPE: Continuous	

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. 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 PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2; CRP-2C; or CRP-2G.

9A. Rental Rate Per Acre	\$ 239.08	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 1,219.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	11033	0003	CP21	0.90	\$ 165.00
(Item 9C is applicable only when the first year payment is prorated.)		11033	0005	CP21	0.70	\$ 128.00
		11033	0009	CP21	2.60	\$ 476.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOYCE GUY TRUST 1 PHILIP GUY PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 0.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) LATHOL GUY ESTATE PO BOX 264 BRIGHTON, IA52540-0264	(2) SHARE 100.00 %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE			B. DATE (MM-DD-YYYY)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CONTINUATION OF ITEM 10 – Identification of CRP Land

[illegible]