This form is available electronically.						Page 1 of 2		
CRP-1 U.S. DEPARTMENT OF AGRICULTURE		1. ST. & C	O CODE & ADMIN.	2. SIG	2. SIGN-UP NUMBER			
(10-22-15) Commodity Credit Corporation			LOCATION					
			19 115			50		
CONSERVATION RESERVE PROCESS	.							
CONSERVATION RESERVE PROGRAM	CONTRACT	3. CONTR	ACT NUMBER	4. ACF	4. ACRES FOR ENROLLMENT			
			11287A			8.87		
7A. COUNTY OFFICE ADDRESS (Include Zip Code)		5 FARM I	5. FARM NUMBER			MBER(S)		
LOUISA COUNTY FARM SERVICE AGEN	CY	0. 174(4)1	433	0. 110	101 110	746		
260 MULBERRY STREET STE1								
WAPELLO, IA 52653-1571		8. OFFER	8. OFFER (Select one) 9. C			T PERIOD		
		GENERAL	GENERAL			TO: (MM-DD-YYYY)		
7B. TELEPHONE NUMBER (Include Area Code): (319) 523 - 6	5381		ENVIRONMENTAL PRIORITY		(MM-DD-YYYY) (MM-DD-YYYY) 10-01-2017 09-30-2027			
THIS CONTRACT is entered into between the Commodity Credit C Participant".) The Participant agrees to place the designated acree period from the date the Contract is executed by the CCC. The Participant acrees and approved by the CCC and the Participant. Addit Contract, including the Appendix to this Contract, entitled Appendix Participant acknowledges that a copy of the Appendix for the applic damages in an amount specified in the Appendix if the Participant v contained in this Form CRP-1 and in the CRP-1 Appendix and any	ge into the Consenticipant also agreed ionally, the Participate to CRP-1, Conservable sign-up period withdraws prior to Cany addendum there	vation Reserve Progr s to implement on su ant and CCC agree to vation Reserve Progr id has been provided to CC acceptance or re- preto. BY SIGNING to; CRP-2; CRP-2C;	em ("CRP") or other to ch designated acreag o comply with the term aem Contract (referred to such person. Such ejection. The terms a THIS CONTRACT PR or CRP-2G.	use set by CO te the Conser ns and condit to as "Apper person also nd condition RODUCERS	CC for the vation Prisons condix"). Bagrees to SCKNO	e stipulated contract llan developed for stained in this By signing below, the oo pay such liquidated		
10A. Rental Rate Per Acre \$300.00	11. Identificati	on of CRP Land	(See Page 2 for ac	dditional sp	ace)			
10B. Annual Contract Payment \$2,661	A. Tract No.	B. Field No.	C. Practice No.	D. Acre	s	E. Total Estimated Cost-Share		
10C. First Year Payment \$	746	0005	CP21	0.89)	\$ 124		
(Item 10C applicable only to continuous signup when	746	0006	CP21	3.31	L	\$ 460		
the first year payment is prorated.)	746	0007	CP21	4.42	2	\$ 614		
12. PARTICIPANTS (If more than three individual	ls are signing .	see Page 3)						
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): (2)	2) SHARE		3) SIGNATURE			(4) DATE (MM-DD-YYYY)		
JOHN MARK MOSIER	•	* /	, , ,		\ //	(02 , , ,		
2711 AIRPORT RD	100.0	00% / 4/1	[] []/	1 -				
WASHINGTON, IA 52353-9335		10/1/1	VENIA (VAII)		2-	14-2018		
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): (2)	2) SHARE	(3) SIGNAT	(3) SIGNATURE			ATE (MM-DD-YYYY)		
	-, -: <u>-</u>	(0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,	(0) 0.0.0.0.0.0			(12 (IIIII 00 3 1 1 1)		
		%						
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): (2)	2) SHARE	(3) SIGNATI	URE		(4) DATE (MM-DD-YYYY)			
			_					
		%		//				
			/ /					
13. CCC USE ONLY A. SIGNATURE OF CCC I	REPRÉSENTAT	IVF			B. DA	TE (MM-DD-YYYY)		
		1 to the second			7	Ar hora		
NOTE: The following statement is made in accordance with the Private	16v Act 61 1974 (5 US	SC 552a - as amended	It The authority for red	uestina the in	formation	identified on this form		
is 7 CFR Part 1410, the Commodity Credit Corporation Charl of 2014 (Pub. L. 113-79). The information will be used to det information collected on this form may be disclosed to other if authorized access to the information by statute or regulation Farm Records File (Automated). Providing the requested info ineligibility to participate in and receive benefits under the Co	Act (15 U.S.C. 71 fermine eligibility to p Federal, State, Local and/or as described i ormation is voluntary inservation Reserve I	4 et seq.), the Food Si articipate in and receiv government agencies in applicable Routine to However, failure to f Program.	ecurity Act of 1985 (16 ve benefits under the C , Tribal agencies, and r Uses identified in the Sy furnish the requested in	U.S.C. 3801 e onservation R nongovernmen ystem of Reco formation will i	t sed.), a eserve R tal entitle rds Notic result in a	and the Agricultural Act regram. The Stringt helpedged e Tor USDA/FSA-2. a determination of		
provisions of appropriate criminal and civil fraud, privacy, and	other statutes may	be applicable to the in	formation provided. RE	TURN THIS C	COMPLE	TED FORM TO YOUR		
The U.S. Department of Agriculture (USDA) prohibits discrimination again	inst its customers, en	nployees, and applica	nts for employment on I	the basis of Ma	ないので	CO FSA		
disability, sex, gender identity, religion, reprisal, and where applicable, princome is derived from any public assistance program, or protected gene prohibited bases will apply to all programs and/or employment activities, allemative means of communication for program information (e.g., Braille Individuals who are deaf, hard of hearing, or have speech disabilities and (800) 877-8339 or (800) 845-6136 (in Spanish)	olitical beliefs, marita etic information in em) Persons with disab e, large print, audiota	il status, familial or pai iployment or in any pro ilities, who wish to file ipe, etc.) please conta	rental status, sexual orio ogram or activity condu a program complaint, v ct USDA's TARGET Ce	entation, or all cted or funded write to the add enter at (202)	or part of the by the Edress bel 720-2600	if an individual's Department. (Not all low or if you require D (voice and TDD).		
If you wish to file a Civil Rights program complaint of discrimination, com http://www.ascr.usda.gov/complaint_filing_cust.html , or at any USD requested in the form. Send your completed complaint form or letter by rewashington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.	A office, or call (866) mail to U.S. Departm	632-9992 to request tent of Agriculture, Dire	the form. You may also actor, Office of Adjudica	write a letter tion, 1400 Inde				
Original – County Office Copy		Owner's Copy			Opera	ator's Copy		

CONTINUATION OF ITEM 11 - Identification of CRP Land

A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated C/S	F. CONTRACT PERIOD (MM-DD-YYY (1) (2) FROM TO		
/40	0008	CP21	0.25	\$ 35	10-01-2017	09-30-202	

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This form is available electronically.							Page 1 of 2		
CRP-1 U.S. DEPARTMENT OF AGRI	I				JMBER				
(10-22-15) Commodity Credit Corpo	ration		LOCAT	ION					
				19 115			50		
CONSERVATION RESERVE PRO	GRAM CON	TRACT							
			3. CONTRACT NUMBER 11286A		4. AC	4. ACRES FOR ENROLLMENT 13.26			
7A. COUNTY OFFICE ADDRESS (Include Zip Code	1		5 FARM	MIMBED	6 TD	ACT NUM	IRED/CI		
LOUISA COUNTY FARM SERVICE	AGENCY		J. 174011	5. FARM NUMBER 6. TI			RACT NUMBER(S) 747		
260 MULBERRY STREET STE1			İ						
WAPELLO, IA 52653-1571			8. OFFER	(Select one)	9. CO	NTRACT	PERIOD		
			GENERAL FROM			-YYYY)	TO:		
7B. TELEPHONE NUMBER (Include Area Code): (31	9)523-6381		ENVIRONM	ENVIRONMENTAL PRIORITY			(<i>MM-DD</i> -YYYY) 09-30-2027		
THIS CONTRACT is entered into between the Commod	ty Credit Corporatio	on (referred to	as "CCC") and th	e undersigned owner	s, operators,	or tenants	(referred to as "the		
Participant".) The Participant agrees to place the design period from the date the Contract is executed by the CC such acreage and approved by the CCC and the Particip Contract, including the Appendix to this Contract, entitlet Participant acknowledges that a copy of the Appendix for damages in an amount specified in the Appendix if the contained in this Form CRP-1 and in the CRP-1 Appendix THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix	C. The Participant of part. Additionally, the Appendix to CRP- r the applicable signal participant withdraws andix and any adde	also agrees to he Participant 1, Conservati n-up period ha s prior to CCC andum there	o implement on su t and CCC agree to on Reserve Progr as been provided to c acceptance or re to. BY SIGNING	ch designated acreag o comply with the tern am Contract (referred to such person. Such ijection. The terms a THIS CONTRACT PR	e the Conseins and condito to as "Appein person also	rvation Pla tions conte ndix"). By agrees to	in developed for ained in this signing below, the pay such liquidated contract are		
10A. Rental Rate Per Acre \$300.00				(See Page 2 for ac	ditional sp	ace)			
10B. Annual Contract Payment \$3,978	A. Ti	ract No.	B. Field No.	105		es	E. Total Estimated Cost-Share		
10C. First Year Payment \$		747	0008	CP21	3.9	7	\$ 552		
(Item 10C applicable only to continuous signup when	7	747	0009	CP21	1.4	7	\$ 204		
the first year payment is prorated.)	7	747	0010	CP21	1.8	3	\$ 254		
12. PARTICIPANTS (If more than three in	dividuals are s	signing, se	e Page 3.)						
A(1) PARTICIPANT'S NAME AND ADDRESS (Zip C JOHN MARK MOSIER	ode): (2) SHAF	₹E	(3) SIGNATI	URE /		(4) DAT	E (MM-DD-YYYY)		
2711 AIRPORT RD			161	12/2///11	/ 5				
WASHINGTON, IA 52353-9335		100.00	% \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	r Older VI	1/1/2	2	-14-2018		
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip C	ode): (2) SHAF	₹E	(3) SIGNATI	URE		(4) DAT	E (MM-DD-YYYY)		
		,	%						
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip C	ode): (2) SHAR	₹E	(3) SIGNATI	URE		(4) DAT	E (MM-DD-YYYY)		
				-7					
		/ '	%		-7				
			X//						
13. CCC USE ONLY A. SIGNATURE	OF CCC REPRE	SENTATIV	E		,	B. DAT	E (MM-DD-YYYY)		
			1 /2 .6	ull		3/1	5/2018		
NOTE: The following statement is made in accordance w	th the Privacy Act of	1974 (5 USC	552a - as amended	(The authority for red	uesting the in	formátion i	dentified on this form		
is 7 CFR Part 1410, the Commodity Credit Corpo of 2014 (Pub. L. 113-79). The information will be information collected on this form may be disclos authorized access to the information by statute of Farm Records File (Automated). Providing the re ineligibility to participate in and receive benefits u This information collection is exempted from the i	used to determine elect to other Federal, S regulation and/or as quested information inder the Conservation	ligibility to parti State, Local go described in a is voluntary. H n Reserve Pro	icipate in and receivernment agencies applicable Routine to formall and the followers of the formal and the followers of the follower	ve benefits under the C , Tribal agencies, and r Jses identified in the Sy furnish the requested in	onservation Recording Recording Property of Recording Williams (Communication Will Communication Wild Communication Will Communication Will Communication Will Commun	eserverPro nal entitles irds Notice result in a	oran fe that have been for USDA/FSA-2, determination of		
provisions of appropriate criminal and civil fraud, COUNTY FSA OFFICE.	privacy, and other sta	atutes may be	applicable to the in	formation provided. RE	TURN THIS	COMPLET	ED FORM TO YOUR		
The U.S. Department of Agriculture (USDA) prohibits discrimdisability, sex, gender identity, religion, reprisal, and where a income is derived from any public assistance program, or proprohibited bases will apply to all programs and/or employmealternative means of communication for program information Individuals who are deaf, hard of hearing, or have speech dis (800) 877-8339 or (800) 845-6136 (in Spanish).	ination against its cui oplicable, political be- tected genetic inform It activities.) Persons (e.g., Braille, large pi	stomers, emplo liefs, marital st nation in emplo s with disabiliti rint, audiotape	oyees, and applical latus, familial or par byment or in any pro- es, who wish to file , etc.) please conta	nts for employment on t rental status, sexual orio ogram or activity condu a program complaint, v ct USDA's TARGET Ce	he basis of ga entation, or all cted or funded write to the ad enter at (202)	ae Doellor, to lor part of d by the De dress below 720-2600 (hational origin, age, an individual's partment. (Not all w or if you require yoice and TDD).		
If you wish to file a Civil Rights program complaint of discrime http://www.ascr.usda.gov/complaint_filing_cust.html, or requested in the form. Send your completed complaint form washington, D.C. 20250-9410, by fax (202) 690-7442 or em.	at any USDA office, o or letter by mail to U.S	or call (866) 63 S. Department	32-9992 to request to of Agriculture, Dire	the form. You may also ector, Office of Adjudica	write a letter	containing ependence	all of the information Avenue, S.W.,		
Original – County Office Copy		Ow	ner's Copy			Operate	or's Copy		

CONTINUATION OF ITEM 11 – Identification of CRP Land

_ A.	В.	C.	D.	E. Total Estimated	F. CONTRACT PE	
Tract No.	Field No. Practice No. Acres Total Estimated C/S		C/S	(1) FROM	(2) TO	
747	0012	CP21	3.35	\$ 466	10-01-2017	09-30-202
747	0013	CP21	1.98	\$ 275	10-01-2017	09-30-202
747	0014	CP21	0.66	\$ 92	10-01-2017	09-30-202
			 			
 						
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