CDD 4						Page 1 of 1	
CRP-1 U.S. DEPARTMENT OF AGRICULTURE (12-02-19) Commodity Credit Corporation			1. ST	1. ST. & CO. CODE & ADMIN. LOCATION		2 SIGN-UP	
				19 045		NUMBER	
			3 00	ONTRACT NUMB	ED	4. ACRES FOR	
CONSERVATION RESERVE PROGRAM CONTRACT				1582B		ENROLLMENT	
				,		2.06	
5A. COUNTY FSA OFFICE ADDRESS CLINTON COUNTY FARM SERVICE AG		6. TF	RACT NUMBER 7. CONTRACT PERI		D		
1212 17TH AVE		1	1760	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)		
DEWITT, IA52742-1083			1760	10-01-2010	09-30-2025		
				8. SIGNUP TYPE:			
 COUNTY FSA OFFICE PHONE NU (Include Area Code): (563) 659-345 		FWP					
Program Contract (referred to as "Appen applicable contract period. The terms at thereto. BY SIGNING THIS CONTRACT F thereto; CRP-2; CRP-2C; or CRP-2G. 9A Rental Rate Per Acre \$150	PARTICIPANTS ACK	contract are contai NOWLEDGE RECEI	ned in this For PT OF THE FO	m CRP-1 and in th LLOWING FORMS	TO COD 4 Annonding and -	any addendum iy and any addendum	
9B Annual Contract Payment \$ 371.00		A. Tract No	B Field No			E. Total Estimated	
9C. First Year Payment S		1760	16	CP27	1.09	Cost-Share	
		 			\$ 43.00		
(Item 9C is applicable only when the first year payment is provided.)		1760	19	CP28	0.97	\$ 135.00	
prorated.)							
11. PARTICIPANTS (If more tha	n three individua	als are signing	see Page 3)			
A(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE			ATIONSHIP OF THE	(5) DATE	
ADDRESS (Include Zin Code)		Malakie + Heior		INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(MM-DD-YYYY)	
						X 4-7-2020	
		(3) SIGNATURE (By)		(4) TITLE/RELATIONSHIP OF THE		(5) DATE	
				INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(MM-DD-YYYY)	
C(1) PARTICIPANT'S NAME AND (2) SHARE		(3) SIGNATURE (By)		(4) TITLE/RELATIONSHIP OF THE		(5) DATE	
ADDRESS (Include Zip Code)						(AMA OD VVVV)	

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. 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

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A. SIGNATURE OF CCC REPRESENTATIVE

12. CCC USE ONLY

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 7 U.S.C 9091(2)(c)(B) 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

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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.

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REPRESENTATIVE CAPACITY

B. DATE (MM-DD-YYYY)