| | | | | Page 1 of 1 | |
|---|---|---|---|---|--|
| CRP-1 (01-08-24) | U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation | 1, ST. & CO. CODE & 20 | ADMIN. LOCATION 117 | 2. SIGN-UP NUMBER 56 | |
| CONSE | RVATION RESERVE PROGRAM CONTRACT | 3. CONTRACT NUMB | ER 318B | 4. ACRES FOR ENROLLMENT 30.72 | |
| 5A. COUNTY F | SA OFFICE ADDRESS (Include Zip Code) | 6. TRACT NUMBER | 7. CONTRACT PERIOD | | |
| MARSHALL COUNTY FARM SERVICE AGENCY 1133 PONY EXPRESS HWY MARYSVILLE, KS66508-8501 | | 7673 | FROM: (MM-DD-YYYY) 10-01-2021 | TO: (MM-DD-YYYY) 09-30-2031 | |
| 5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (785) 562-5343 | | 8. SIGNUP TYPE: General | | | |
| THIS CONTRAC (referred to as " CCC for the stip acreage the Cor comply with the Program Contra | To Is entered into between the Commodity Credit Corporation (ref the Participant".) The Participant agrees to place the designated sulated contract period from the date the Contract is executed by inservation Plan developed for such acreage and approved by the eterms and conditions contained in this Contract, including the A loct (referred to as "Appendix"). By signing below, the Participant | l acreage into the Conservation the CCC. The Participant also e CCC and the Participant. Addi Appendix to this Contract, entitl t acknowledges receipt of a cop | Reserve Program ("CRP") agrees to implement on so tionally, the Participant ar- ed Appendix to CRP-1, Co y of the Appendix/Append | or other use set by uch designated of CCC agree to uservation Reserve lices for the | |

thereto. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.

| 9A. Rental Rate Per Acre | \$79.50 | 10. Identificati | on of CRP Land | (See Page 2 for ac | lditional space) | |
|---|------------|------------------|----------------|--------------------|------------------|----------------------------------|
| 9B. Annual Contract Payment | \$2,442.00 | A. Tract No. | B. Field No. | C. Practice No. | D. Acres | E. Total Estimated Cost-Share |
| 9C. First Year Payment | \$ | 7673 | 0003 | CP2 | 18.28 | \$ 1,051.00 |
| (Item 9C is applicable only when the first year payment is prorated.) | | 7673 | 0004 | CP2 | 1.18 | \$ 68.00 |
| | | 7673 | 0005 | CP2 | 11.26 | \$ 647.00 |

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

| | | | | D DATE |
|--|-------------------|--------------------|---|--------------------------|
| 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) |
| B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) CONSTANCE HERMRECK 3439 THOMAS RD WELLSVILLE, KS66092-8780 | (2) SHARE | (3) SIGNATURE (By) | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | (5) DATE (MM-DD-YYYY) |
| A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) DOUGLAS T ENSLEY 255 SILVER MAPLE CT PEACHTREE CITY, GA30269-5658 | (2) SHARE 50.00 % | (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)

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), the Further Continuing Appropriations and Other Extensions Act, 2024 (Pub. L. 118-22), and the Conservation Reserve Program 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 filling 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.



USDA

United States Department of Agriculture Farm Service Agency

Farm: 5179 Tract: 7673

| | Name | Shares |
|----------|------|--------|
| Operator | | % |
| | | % |
| | | % |
| Owner | | |

Crop Wheat-hrw Corn-yel Soybn-com Gr. Sorg Oats-spr Alfalfa

Sudan

| Plant Date | Int. Use |
|------------|----------|
| | |
| | |
| | |
| | - |

March 20, 2024

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.

Marshall County