			Newsyl	<u> </u>	Page 1 of 1
CRP-1	U.S. DEPARTMENT OF AGRICULTUR	RE	1. ST, & CO, CODE &	ADMIN. LOCATION	2. SIGN-UP
(07-06-20)	Commodity Credit Corporation			019	NUMBER 52
CONCE	WATION DECERVE BROOK		3. CONTRACT NUMB	ER	4. ACRES FOR
	RVATION RESERVE PROGRAI	WI CONTRACT	11	661A	ENROLLMENT 2.18
	A OFFICE ADDRESS (Include Zip Code)	, 1	6. TRACT NUMBER	7. CONTRACT PERIOD	
BUCHANAN COUN' 507 17TH ST SI INDEPENDENCE,		8/5/20	2399	FROM: (MM-DD-YYYY) 10-01-2019	TO: (MM-DD-YYYY) 09-30-2029
	1100	- Constant	8. SIGNUP TYPE:	In a	1-1
	SA OFFICE PHONE NUMBER Code): (319)334-2543		Continuous	tial Frate	75/20
THIS CONTRACT	is entered into between the Commodity Cre	to as "CCC") and the und	ersigned owners, operator	rs. or tenants	

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; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.

9A. Rental Rate Per Acre \$ 224.00	X	10. Identification	on of CRP Land	(See Page 2 for ac	Iditional space)	
9B. Annual Contract Payment \$ 488.00	miti Sw	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	10	2399	0006	CP15A	1.10	\$ 0.00
(Item 9C is applicable only when the first year)	bayment is	2399	0007	CP15A	1.08	\$ 0.00
prorated.)	8/5/20					
11. PARTICIPANTS (If more than the	ree individual	s are signing, s	ee Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JEAN E WENELL 441 LAWMAN LN LAURENS, IA50554-1552	50.00 %	(3) SIGNATURE (I	Evenel (4	1) TITLE/RELATIONS INDIVIDUAL SIGNIN REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY) 8/5/20
ADDRESS (Include Zip Code) REV JAMES KRAPF 808 4TH AVE WORTHINGTON, MN56187-2325	50.00 %	(3) SIGNATURE (E See Allac		I) TITLE/RELATIONSI INDIVIDUAL SIGNIN REPRESENTATIVE	IG IN THE	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	2) SHARE %	(3) SIGNATURE (E	3y) (4	) TITLE/RELATIONS INDIVIDUAL SIGNIN REPRESENTATIVE	IG IN THE	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY A. SIGNATURE	OF CCC REP	RESENTATIVE Adri	ema (	Alson, ce	:O	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) 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.

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Commodity Cre	edit Corporation					NUMBER 52
CONSERVATION RESERVE PROGRAM CONTRACT  5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)  BUCHANAN COUNTY FARM SERVICE AGENCY  507 17TH ST SE  ENDEPENDENCE, IA50644-9874  5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (319) 334-2543  ITHIS CONTRACT is entered into between the Commodity Credit Corporation (referreferred to as "the Participant".) The Participant agrees to place the designated at CCC for the stipulated contract period from the date the Contract is executed by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for such acreage and approved by the Creage the Conservation Plan developed for Such acreage and approved by the Creage the Contract ferferred to as "Appendix"). By signing below, the Participant applicable contract period. The terms and conditions of this contract are contained thereto. By SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.  A. Rental Rate Per Acre  \$ 224.00  10. Identification  11. PARTICIPANTS (If more than three individuals are signing, second participants)  12. PARTICIPANTS (If more than three individuals are signing, second participants)  13. SIGNATURE (B)  14. PARTICIPANTS (If more than three individuals are signing, second participants)					4. ACRES FOR ENROLLMENT 5.91	
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)				ACT NUMBER	7. CONTRACT PERIOD	
	ICY			2300	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
IDEPENDENCE, IA50644-9874				2333	10-01-2019	09-30-2029
C,	MEM (X	tale 8/5/2	8 SIG	NUP TYPE:		7
5B COUNTY ESA OFFICE PHONE NUMBER	RED (	()UN / /		(2)	Ju on 3	15/20
	JER		Conti	inuous ()	ittal fate	/
(referred to as the Participant of The Partic CCC for the stipulated contract period from acreage the Conservation Plan developed fo comply with the terms and conditions conta Program Contract (referred to as "Appendix applicable contract period. The terms and of thereto. BY SIGNING THIS CONTRACT PAR addendum thereto; and, CRP-2, CRP-2C, CR	ipant agrees to pil the date the Contr or such acreage an ined in this Contra "). By signing bel- conditions of this c TICIPANTS ACKN IP-2G, or CRP-2C3	ace the designated ract is executed by the dat, including the A ow, the Participant contract are contain.  OWLEDGE RECEIF 10, as applicable.	acreage into the the CCC. The CCC and the Poppendix to this acknowledges acknowledges TOF THE FOL	he Conservation I Participant also a Participant. Addits Contract, entitle receipt of a copy In CRP-1 and in th LOWING FORMS	Reserve Program ("CRP") grees to implement on su ionally, the Participant an d Appendix to CRP-1, Coi of the Appendix/Appendi e CRP-1 Appendix and an : CRP-1; CRP-1 Appendix	or other use set by ich designated d CCC agree to isservation Reserve ices for the
	EPROGRAM CONTRACT  3. CONTRACT NUMBER 11662A  3. CONTRACT NUMBER 11662A  4. ACRES FOR ENROLLMENT 5.91  6. TRACT NUMBER 2399  8. SIGNUP TYPE: Continuous  Continuous  8. SIGNUP TYPE: Continuous  8. SIGNUP TYPE: Continuous  Continuous  8. SIGNUP TYPE: Continuous  9. SIGNUP TYPE: Continuous  9. Operators, or tenants  10. On the Participant alocate set by the CCC. The Participant alocate set by the CCC and the Participant alocate s					
	200 01	γ A. Tract No	B. Field No.	C. Practice	No. D. Acres	
9C. First Year Payment \$ \( \sum_{\text{\chi}} \)	W An	2399	0004	CP21	2.21	\$ 0.00
Item 9C is applicable only when the first yea	r payker (1)	2399	0005	CP21	0.80	\$ 0.00
Grorated.)	5/20				2.90	\$ 0.00
11. PARTICIPANTS (If more than to		ls are signing, s	see Page 3.)			
ADDRESS (Include Zip Code) EAN E WENELL 41 LAWMAN LN AURENS, IA50554-1552		Dyend &	nd I	INDIVIDUAL	SIGNING IN THE	1 ` '
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) EV JAMES KRAPF 08 4TH AVE ORTHINGTON, MN56187-2325		(3) SIGNATURE (I		INDIVIDUAL	SIGNING IN THE	
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (E	Зу)	INDIVIDUAL	SIGNING IN THE	

CRP-1

(07-06-20)

12. CCC USE ONLY

U.S. DEPARTMENT OF AGRICULTURE

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A. SIGNATURE OF CCC REPRESENTATIVE

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AUG 12 2020

B. DATE (MM-DD-YYYY)

Page 1 of 1

SIGN-UP

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

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CRP-1 U.S. DEPARTMENT OF AGRICULTURE		[ 1⊬ ST.	& CO. CODE &	ADMIN. LOCATION	2. SIGN-UP
(07-06-20) Commodity Credit Corporation			1.0	019	NUMBER
					48
CONCEDIVATION DECEDIVE DOCUMENT		3. CO	NTRACT NUMBI	ER	4. ACRES FOR
CONSERVATION RESERVE PROGRAM	CONTRACT		114	470B	ENROLLMENT
EA COUNTY FOR OFFICE ADDRESS (L. L. F.					9.10
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)		6. TRA	ACT NUMBER	7. CONTRACT PERIO	D
BUCHANAN COUNTY FARM SERVICE AGENCY	/ /	-	2399	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
INDEPENDENCE, IA50644-9874	8/5/2		2333	10-01-2016	09-30-2026
TWIT OF	0 1/4	0			
117	Ox Jake	8. SIG	NUP TYPE:	. 1	
5B. COUNTY FSA OFFICE PHONE NUMBER	- Oran -		$\mathcal{O}$	And B	0/-/-
(Include Area Code): (319) 334-2543		Conti	nuous (X)	110 (X)	-15/20
			970	hal da	le '
THIS CONTRACT is entered into between the Commodity Credi	it Corporation (refe	erred to as "CC	C") and the unde	ersigned owners, operate	ors, or tenants
(referred to as "the Participant".) The Participant agrees to pla CCC for the stipulated contract period from the date the Contra	ce the designated by	acreage into tr	ie Conservation .	Reserve Program ("CRP	") or other use set by
acreage the Conservation Plan developed for such acreage and	d annroved by the i	CCC and the $D$	articinant Addis	tionally the Dartiniana -	
I COMPLY WITH THE TERMS AND CONDITIONS CONTAINED IN this Contrac	ct. including the Ar	nnondiy to this	Contract ontitle	nd Annondiv to CDD 4 C	anaaniah Basas
Program Contract (referred to as "Appendix"). By signing help	w the Participant :	acknowlodnoe	receipt of a con-	u of the Annondivianon	diana familia
applicable contract period.   The terms and conditions of this co	ontract are contain	ed in this Forn	CPP_1 and in th	o CPD 1 Appondix and	sere eddendig
thereto. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNO addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30	WLEDGE RECEIP	T OF THE FOL	LOWING FORMS	: CRP-1; CRP-1 Appendi	x and any
9A. Rental Rate Per Acre \$ 384.86	10. Identification	on of CRP La	nd (See Page :	2 for additional space)	
9B. Annual Contract Payment \$3,502.00	A. Tract No.	B. Field No.	C. Practice	e No D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	2399	8	CP21	9.10	\$ 1,665.00
(them 00 in applicable ask when the first	10				
(Item 9C is applicable only when the first year payment is prorated.)					
prorated.)					
11. PARTICIPANTS (If more than three individuals	s are signing, s	ee Page 3.)			
	(3) SIGNATURE (E			ATIONSHIP OF THE	(5) DATE
ADDRESS (Include Zip Code)	(-,	-37	INDIVIDUAL	. SIGNING IN THE	(MM-DD-YYYY)
REV JAMES KRAPF	111	, ,	REPRESEN	TATIVE CAPACITY	( 22 , )
808 4TH AVE 50.00 % WORTHINGTON, MN56187-2325	See Allac	hed			
	(3) SIGNATURE (E		(A) TITLE (DELA	TIONOUS OF THE	
ADDRESS (Include Zip Code)	(3) SIGNATORE (E	) (Y		TIONSHIP OF THE	(5) DATE
JEAN E WENELL	Who S	11		TATIVE CAPACITY	(MM-DD-YYYY)
441 LAWMAN LN 50.00%   LAURENS, IA50554-1552	XXXX	Theneld	THE THEOLIN	TATIVE CAPACITI	X)8/5/20
	ON CIGNATURE (S	you would	(4) 7171 5 (5 (6 )		0 77
ADDRESS (Include Zip Code)	3) SIGNATURE (B	yy)		TIONSHIP OF THE	(5) DATE
				. SIGNING IN THE TATIVE CAPACITY	(MM-DD-YYYY)
%			VELVESEN	TATIVE CAPACITY	
12. CCC USE ONLY A. SIGNATURE OF CCC REPR	COENTATE OF				
12. CCC USE ONLY A. SIGNATURE OF CCC REPR		, ,	4		B. DATE

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0004				Page 1 of 2
CRP-1	U.S. DEPARTMENT OF AGRICULTURE	1. ST. & CO. CODE &	ADMIN LOCATION	2. SIGN-UP
(07-06-20)	Commodity Credit Corporation		019	NUMBER 42
CONCE	DVATION DECEDIE DECORAL CONTENTS	3. CONTRACT NUMB	ER	4. ACRES FOR
	RVATION RESERVE PROGRAM CONTRACT	17	06B	ENROLLMENT 5.02
	SA OFFICE ADDRESS (Include Zip Code)	6. TRACT NUMBER	7. CONTRACT PERIOD	
507 17TH ST S		2399	FROM: (MM-DD-YYYY) 10-01-2012	TO: (MM-DD-YYYY)
INDEPENDENCE,	IA50644-9874		10-01-2012	09-30-2022
	Same 8/5/20	8. SIGNUP TYPE:	211	//
	SA OFFICE PHONE NUMBER Code): (319)334-2543	Continuous &	itial Chate	8/5/20
THIS CONTRACT	is entered into hetween the Commodity Credit Corneration (referred	"CCC" 14b 1		

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9A. Rental Rate Per Acre \$ 255.4	1	10 Identificati	60001	1.00		
5A. Rental Rate Fel Acie \$255.4	: 4	10. Identification	on of CRP Lai	nd (See Page 2 for ac	dditional space)	
9B. Annual Contract Payment \$1,282	1.00	A. Tract No.	B. Field No	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	Fa	2399	9	CP8A	0.41	\$ 0.00
(Item 9C is applicable only when the first yea	2399	10	CP8A	1.50	\$ 0.00	
prorated.)	8/5/20	2399	11	CP8A	0.31	\$ 0.00
11. PARTICIPANTS (If more than t	hrée individua	ls are signing, s	see Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) REV JAMES KRAPF 808 4TH AVE WORTHINGTON, MN56187-2325	(2) SHARE 50.00 %	(3) SIGNATURE (1)	hed	(4) TITLE/RELATIONS INDIVIDUAL SIGNII REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JEAN E WENELL 441 LAWMAN LN LAURENS, IA50554-1552	(2) SHARE 50.00 %	(3) SIGNATURE (I	herel	(4) TITLE/RELATIONS INDIVIDUAL SIGNII REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY) 8 /5-/20
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE	(3) SIGNATURE (E	Зу)	(4) TITLE/RELATIONS INDIVIDUAL SIGNII REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY A. SIGNATURI	E OF CCC REP	RESENTATIVE Admi	u a	loen, CED		B. DATE (MM-DD-YYYY)

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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

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## CONTINUATION OF ITEM 10 - Identification of CRP Land

A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated C/S
2399	12	CP8A	0.11	\$ 0.00
2399	13	CP8A	0.11	\$ 0.00
2399	14	CP8A	0.19	\$ 0.00
2399	15	CP8A	0.11 .	\$ 0.00
2399	16	CP8A	0.19	\$ 0.00
2399	# 17·	CP8A	0.10	\$ 0.00
2399	18	CP8A	0.36	\$ 0.00
2399	19.	CP8A	0.61	\$ 0.00
2399	20 .	CP8A	0.70	\$ 0.00
2399	21	CP8A	0.32	\$ 0.00
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