This form is available electronically.									
CRP-1 U.S. DEPARTMENT OF AGRICULTURE					1. ST. & CO CODE & 2. SIGN-UP NUMBER				
(07-23-10) Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT					N. LOCATION	47 (47 CREP		
HOTE The authority for collecting the following information is Pub. L. 107-171. This authority alice					067		- OKEI		
collection of information without prior OMB ap	Reduction Act of 1	eduction Act of 1995. The		3. CONTRACT NUMBER		4. ACRES FOR ENROLLMENT			
time required to complete this information cell time for reviewing instructions, searching exis			11228 CREP		24.69	24.69			
completing and reviewing the collection of inf	ormation								
7. COUNTY OFFICE ADDRESS (RM NUMBER	6. TRACT	6. TRACT NUMBER(S)			
FLOYD COUNTY FARM SERVICE		0006249		06249	0000155				
611 BECK ST			8.OFFER (Select one)		9. CONTRA	9. CONTRACT PERIOD			
CHARLES CITY, IA 50616-3722				GENE	RAL [FROM:	TO:		
TELEPHONE NUMBER (Include Ar	055		ENVIRONMENTAL PRIORITY		/	(MM-DD-YYYY) (MM-DD-YYY 01/01/2015 09/30/20			
THIS CONTRACT is entered into between		"CCC!"	1		7 01/ 01/ 20				
referred to as "the Participant"). The Part stipulated contract period from the date to Plan developed for such acreage and ap- contained in this Contract, including the signing below, the Participant acknowled pay such liquidated damages in an amount the terms and conditions of this contract.	ticipant agrees to place the design the contract is executed by the C proved by the CCC and the Part Appendix to this Contract, entitle tiges that a copy of the Appendix unt specified in the Appendix if the contract are contained in this Forn tract are contained in this Forn	gnated acreage in CC. The Particip CC. The Particip licipant. Addition if Appendix to C for the applicable Participant with CRP-1 and in	into the Cor pant also ag ally, the Pa RP-1, Cons le sign-up p thdraws pric the CRP-1	nservation grees to inticipant servation period had por to CCO	on Reserve Program implement on such a and CCC agree to c in Reserve Program C is been provided to s C acceptance or reje lix and any addend.	("CRP") or other designated acrea omply with term contract (referred such person. Suc ction. um thereto. BY	r use set by CCĆ age the Conserva s and conditions d to as "Appendix ch person also ag	for the ition (*) By grees to	
CONTRACT PRODUCERS ACKNOWLE applicable; and, if applicable, CRP-15.		OWING FORMS	s: CRP-1, C	RP-1 A	opendix and any ad	dendum theret	o, CRP-2 or CRF	2-2C, if	
		· · · · · · · · · · · · · · · · · · ·							
10A. Rental Rate Per Acre	\$403.81 X F.WI	11. Identific	cation of (CRP La	and (See	Page 2 for add	age 2 for additional space)		
	Manually Calculated	A.Tract No	. B. Fie	id No.	C. Practice No.	D. Acres	E Total Estin		
B. Annual Contract Payment	\$9970						Cost-Shar	re	
C. First Year Payment		0000155	0004		CP23	10.30	\$25058.00	FSA	
	\$7457								
(Item 10C applicable only to d	0000155	0005		CP23	9.41	\$22893.00	FSA		
the first year payment is prore									
paye ie prese		0000155	0009		CP23	4.98	\$12115.00	FSA	
La Barrian						11:6-			
12. PARTICIPANTS A PARTICIPANT'S NAME AND A	ADDRESS (Zip Code):		·						
WENDT FARMS INC	(2) SHARE	(3) SOCI	3) SOCIAL SECURITY NUMBER: Tendt Farms Inc by						
1552 ROCK GROVE LN	100.00%	(4) SIGNATURE DATE (MM DD YYYY) Throse Individuals are signing continuo on atlachment) 2/6/14							
NORA SPRINGS,IA 50458-80	X F.W.								
B PARTICIPANT'S NAME AND A	(2) SHARE								
	(2) 01 11 11 12		SOCIAL SECURITY NUMBER.						
N/A	%	(4) SIGN.	ATURE		DATE	DATE (MM-DD-YYYY)			
		(If more than	nore than three individuals are signing-continue on attachment)						
C PARTICIPANT'S NAME AND A	(2) SHARE	(3) SOCI	3) SOCIAL SECURITY NUMBER						
N/A		(4) SIGN	SIGNATURE DAT			E (MM-DD YYYY)			
	%								
Ill more than three individuals are signing, continue	1 2500	If more than three individuals are signing continue of SIGNATURE OF CCC REPRESENTATIVE							
to the shares are approved.	A. SIGNATU	RE OF CO	KEP	RESENTATIVE	B. DAT	B. DATE (MM DD-YYYY)			
to the shares are approved.	The state of	1 1 / 3/1 1 (Est			12/14/14				
NOTE The fill and the second		1 C/C LY	10000		a. CCP	1/2/	-1/1/		
NOTE: The following statement is made for requesting the following inform (Pub. L. 107-171) and regulations	mation is the Food Security Act of	of 1985, (Pub/L.)	99-198), as	amende	ed and the Farm Sec	urity and Rural is	nvestment Act of	2002	
CCC to consider and process the	e offer to enter into a Conservation	on Reserve Prog	ram Contra	ct, to as	sist in determining e	ligibility and to d	etermine the corr	ect	
parties to the contract. Furnishing	g the requested information is vo	luntary. Failure	to furnish th	e reques	sted information will	result in determi	nation of ineligibil	ity for	
certain program benefits and other Justice, or other State and Feder	ral Law Enforcement agencies, a	and in response t	o a court m	agistrate	or administrative tri	bunal. The provi	isions of criminal	and and	
civil fraud statutes, including 18 t	JSC 286, 287, 371, 641, 651, 10	001; 15 USC 714	m; and 31 l	USC 372	29, may be applicable	e to the informat	ion proded.	1	
RETURN THIS COMPLETED	FORM TO YOUR COUNTY	FSA OFFICE.	S.			14	00.4		
The U.S. Department of Assembly 1950 A.	decumination II to					(10)	2014		
The U.S. Department of Agnoulture (USDA) prohibits parental status religion sexual orientation genetic in prohibited bases apply to all programs.) Persons will (202) 720-2600 (voice and TDD). To file a complaint (202) 720-6382 (TDD). USDA is an equal copportunit.							Programation (%) - Function (%) Childness Childness (%)		
Original - County Office					1.	IA 50616			
Criginal - County Office	ье сору	Owner's C	ору			erator's Copy			