#### IOWA SHELBY

Form: FSA-156EZ

See Page 2 for non-discriminatory Statements.



United States Department of Agriculture Farm Service Agency

# FARM : 8475 Prepared : 1/10/25 10:00 AM CST Crop Year : 2025

Abbreviated 156 Farm Record

Operator Name	: TODD EUGENE HANSEN
CRP Contract Number(s)	: 11323D, 11948B
Recon ID	: 19-165-2023-127
Transferred From	: None
ARCPLC G/I/F Eligibility	: Eligible

	Farm Land Data									
Farmland	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane	Farm Status	Number Of Tracts	
77.72	76.61	76.61	0.00	0.00	0.00	0.00	0.0	Active	1	
State Conservation	Other Conservation	Effective DCP	Effective DCP Cropland		Cropland Double Cropped		MPL	DCP Ag.Rel. Activity	SOD	
0.00	0.00	56.10	0	0.	00	20.51	0.00	0.00	0.00	

Crop Election Choice					
ARC Individual	ARC County	Price Loss Coverage			
None	CORN, SOYBN	None			

DCP Crop Data								
Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP				
Corn	37.69	0.00	174					
Soybeans	6.45	5.44	51					
TOTAL	44.14	5.44						

#### NOTES

Tract Number	: 18838
Description	: S1/2NE1/4 SEC 13 JK
FSA Physical Location	: IOWA/SHELBY
ANSI Physical Location	: IOWA/SHELBY
BIA Unit Range Number	:
HEL Status	: HEL field on tract. Conservation system being actively applied
Wetland Status	: Wetland determinations not complete
WL Violations	: None
Owners	: THOMAS EUGENE HANSEN
Other Producers	: None
Recon ID	: 19-165-2023-126

Tract Land Data								
Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane	
77.72	76.61	76.61	0.00	0.00	0.00	0.00	0.0	

Form: FSA-156EZ



United States Department of Agriculture Farm Service Agency FARM : 8475

Prepared : 1/10/25 10:00 AM CST

Crop Year: 2025

### Abbreviated 156 Farm Record

State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	CRP	MPL	DCP Ag. Rel Activity	SOD
0.00	0.00	56.10	0.00	20.51	0.00	0.00	0.00

DCP Crop Data							
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NOTES

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low a Roads

# Map Created April 03, 2024

Farm 8475 Tract 18838

Exempt from Conservation

**Compliance Provisions** 

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United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. 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 boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

Tract Cropland Total: 76.61 acres

(01-08-24)       Commodity Credit Corporation       3.         CONSERVATION RESERVE PROGRAM CONTRACT         5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)       6.         SHELBY COUNTY FARM SERVICE AGENCY       2519 SOUTHWEST AVE         HARLAN, IA51537-2331       8         5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (712) 755-5116       8         THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as (referred to as "the Participant".) The Participant agrees to place the designated acreage in CCC for the stipulated contract period from the date the Contract is executed by the CCC. acreage the Conservation Plan developed for such acreage and approved by the CCC and comply with the terms and conditions contained in this Contract, including the Appendix to	CONTRACT NUMBE 113 TRACT NUMBER 18838 S. SIGNUP TYPE: Continuous as "CCC") and the under into the Conservation I The Participant also a I the Participant. Addit to this Contract, entitle edges receipt of a copy s Form CRP-1 and in th	165 R 23D 7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 11-01-2016 ersigned owners, operator Reserve Program ("CRP") igrees to implement on su ionally, the Participant and d Appendix to CRP-1, Con- of the Appendix/Appendi e CRP-1 Appendix and an	TO: (MM-DD-YYYY) 09-30-2027 rs, or tenants or other use set by ich designated d CCC agree to inservation Reserve icces for the by addendum		
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Program Contract (referred to as "Appendix"). By signing below, the Participant acknowle applicable contract period. The terms and conditions of this contract are contained in this thereto. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.			and any		
9A. Rental Rate Per Acre \$ 336.07 10. Identification of CR	RP Land <i>(See Page 2</i>	2 for additional space)			
9B. Annual Contract Payment\$ 6,338.00A. Tract No.B. Field	eld No. C. Practice	No. D. Acres	E. Total Estimated Cost-Share		
<b>9C. First Year Payment</b> \$ 18838 1	.8 CP42	2.19	\$ 0.00		
(Item 9C is applicable only when the first year payment is	30 CP42	0.14	\$ 0.00		
prorated.) 18838 3	31 CP42	4.51	\$ 0.00		
11. PARTICIPANTS (If more than three individuals are signing, see Pag	ge 3.)	·			
A(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By)		(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY			
ADDRESS (Include Zip Code) THOMAS EUGENE HANSEN 1473 270TH ST 100.00% EXIRA, IA50076-7610					
B(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By)		TIONSHIP OF THE	(5) DATE (MM-DD-YYYY)		
ADDRESS (Include Zip Code) %		INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY			
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) (2) SHARE % (3) SIGNATURE (By) %	INDIVIDUAL	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY			
12. CCC USE ONLY       A. SIGNATURE OF CCC REPRESENTATIVE       B. DATE (MM-DD-YYYY)					
NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as a form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Secur U.S.C. 3831 et seq), the Agricultural Improvement Act of 2018 (Pub. L. 115-334), the Further C and the Conservation Reserve Program 7 CFR Part 1410. The information will be used to deter Reserve Program. The information collected on this form may be disclosed to other Federal, S entities that have been authorized access to the information by statute or regulation and/or as Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information in a determination of ineligibility to participate in and receive benefits under the Conservation Federal and civil fraud, privacy, and other statutes may be applicable to the information provide	rity Act of 1985 (16 U.S.C. Continuing Appropriations termine eligibility to particip State, Local government a described in applicable Ro n is voluntary. However, fa Reserve Program. RA as specified in 16 U.S.	3801 et seq.), the Agricultura and Other Extensions Act, 20 pate in and receive benefits un gencies, Tribal agencies, and outine Uses identified in the S illure to furnish the requested C. 3846(b)(1). The provision	al Act of 2014 (16 24 (Pub. L. 118-22), nder the Conservation nongovernmental bystem of Records information will result s of appropriate		

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## CONTINUATION OF ITEM 10 – Identification of CRP Land

	CONTINUATION OF ITEM 10 – Identification of CRP Land									
A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated C/S						
18838	32	CP42	12.02	\$ 0.00						

						Page 1 of 1
	OF AGRICULTURE	<b>E</b> 1.		& CO. CODE &	2. SIGN-UP	
(01-08-24) Commodity (	redit Corporation			19	NUMBER 55	
				NTRACT NUMBE	4. ACRES FOR	
CONSERVATION RESER	VE PROGRAM	I CONTRACT		119	ENROLLMENT 1.65	
5A. COUNTY FSA OFFICE ADDRESS (			6. TRA	6. TRACT NUMBER 7. CONTRACT PERIO		
SHELBY COUNTY FARM SERVICE AGEN 2519 SOUTHWEST AVE	СҮ			18838	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
HARLAN, IA51537-2331					10-01-2021	09-30-2031
			8. SIG	NUP TYPE:		
5B. COUNTY FSA OFFICE PHONE NU	MRER		Cont	inuous		
	(Include Area Code): (712)755-5116					
(referred to as "the Participant".) The Pa CCC for the stipulated contract period for acreage the Conservation Plan developed comply with the terms and conditions co Program Contract (referred to as "Appen applicable contract period. The terms an thereto. BY SIGNING THIS CONTRACT P addendum thereto; and, CRP-2, CRP-2C,	m the date the Contr I for such acreage an ntained in this Contra dix"). By signing belo d conditions of this c ARTICIPANTS ACKN	act is executed by ad approved by the act, including the A ow, the Participant contract are contain OWLEDGE RECEIF	the CCC. The CCC and the P ppendix to this acknowledges ned in this Form	Participant also a articipant. Addit Contract, entitle receipt of a copy n CRP-1 and in tl	agrees to implement on s tionally, the Participant a ed Appendix to CRP-1, Co y of the Appendix/Append he CRP-1 Appendix and a	uch designated nd CCC agree to nservation Reserve lices for the ny addendum
9A. Rental Rate Per Acre \$ 300	.00	10. Identification	on of CRP La	nd <i>(See Page</i> )	2 for additional space)	
9B. Annual Contract Payment \$ 495	.00	A. Tract No.	B. Field No.	C. Practice	e No. D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	18838	15	CP 87	A 1.43	\$ 0.00	
(Item 9C is applicable only when the first prorated.)	18838	34	CP 87	A 0.22	\$ 0.00	
11. PARTICIPANTS (If more that	n three individua	ls are signing, s	see Page 3.,	)		
A(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE (	(By)		ATIONSHIP OF THE	(5) DATE
ADDRESS (Include Zip Code) THOMAS EUGENE HANSEN 1473 270TH ST	100.00%				L SIGNING IN THE ITATIVE CAPACITY	(MM-DD-YYYY)
EXIRA, IA50076-7610 B(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE (	(Bv)	(4) TITI E/BEL	ATIONSHIP OF THE	(5) DATE
ADDRESS (Include Zip Code)	%	INDIVID		ÍNDIVIDUAI	L SIGNING IN THE ITATIVE CAPACITY	(MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(3) SIGNATURE (By)		(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(5) DATE (MM-DD-YYYY)	
	JRE OF CCC REF					B. DATE (MM-DD-YYYY)
<ul> <li>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. 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.</li> <li>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.</li> </ul>						

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