



Beginning Farmer and Rancher (BFR) or Veteran Farmer and Rancher (VFR) benefits applied where eligible

Insured Information	Agency Information	Crop Year	Policy Number				
		2025					
		State	ode / Name				
		IL	ILLINOIS				
		POA	Authorized Signer(s)				
		TERRY J GROMMET					

Summary of Coverage:

Crop / Type / Practice	Plan	Options, Elections, Endorsements	Level	% of Price	Price		Uninsurable Acres / Qty	Total Liability^	Total Guarantee^	Base Premium	Insured Premium	Fee	Total Premium	AOI	Status
ST CLAIR															
CORN / GRAIN	RP	TA,YA,YC,YE	80	100	\$4.7000	51.87	0.00	\$12,806	8,174.7	\$1,078	\$453	BFR	\$453	N	
SBEAN	RP	TA,YA,YC	80	100	\$10.5400	133.05	0.00	\$18,949	5,393.9	\$1,183	\$496	BFR	\$496	N	

Remarks:

Unit Structure Election: EC06-Both Cropping Practices, EC07-FAC, EC08-NFAC, EI03-Both Irrigation Practices, EI04-Irrigated Only, EI05-Non-Irrigated Only, EO11-Organic and Non-Organic Practices, EO12-Organic Only, EO13-Non-Organic Only, EI05-Non-Irrigated Only, EI05-Non-Irrigated Only, EO11-Organic and Non-Organic Practices, EO12-Organic Only, EO13-Non-Organic Only, EI05-Non-Irrigated Only, EI05-Non-Irrigated Only, EO11-Organic Practices, EO2-Organic Practices, EO3-Non-Organic Only, EI05-Non-Irrigated Only, EI05-Non-

Disclaimer THIS IS NOT A BILL. However, if you would like to pay your premium, mail to - PO Box 38, Anoka, MN 55303-0038. An actual bill will be sent later. DO NOT use this form to make policy or acreage revisions.

The information contained on this schedule is considered binding. Any errors of discrepancies must be reported to your agent immediately. All revisions are subject to company approval.

Base Premium	Subsidy	TOTALS		
\$2,261.00	Risk \$1,312.00	A & O *** \$418.29	Insured Premium	\$949.00
			Admin Fee	\$0.00
	***This amount may increase by 1.15 percent of net book pr	remium (except for area plans of insurance) if the loss ratio in the	Previous Credit	\$0.00
	State exceeds 1.20 or may otherwise change if required by the premium you are required to pay will not change.	the Standard Reinsurance Agreement. However, the amount of	Interest Total	\$0.00 \$949.00



Schedule of Insurance (Estimate)

oniously (Estimate)							
Insured Information		Crop Year	Policy Number				
	INS AGENCY INC-RUSSELL RENTH	2025					

	Unit Summary									
Unit	Sect-Twp-Rng / Other	Farm Number	Farm Name	Share	Shareholder [Landlord / Tenant]	Acres / Qty	Total Liability	Total Guarantee	Insured Premium	Additional Information
ST CLAIR										
CORN / GRAIN	N / NIRR									
0006-0000-000 BU	1-002S-009W*	1484	ETLING	0.3333	TERRY GROMMET	51.87	\$12,806	8,174.7	\$453	
	Sub Total C	ORN GRA	AIN NIRR Insurable Planted	Acres		51.87	\$12,806	8,174.7	\$453	
			Sub Total CORN GRAIN	NIRR		51.87	\$12,806	8,174.7	\$453	
			TOTAL C	ORN		51.87	\$12,806	8,174.7	\$453	
SBEAN / NTS	/ FACNI									
5006-0000-000 BU	1-002S-009W*	1484		0.3333	TERRY GROMMET	79.30	\$9,583	2,727.9	\$318	Double Crop
	Sub Total	SBEAN N	TS NIRR Insurable Planted	Acres		79.30	\$9,583	2,727.9	\$318	
			Sub Total SBEAN NTS	FACNI		79.30	\$9,583	2,727.9	\$318	
SBEAN / NTS	/ NFACN									
0006-0000-000 BU	1-002S-009W*	1484	ETLING	0.3333	TERRY GROMMET	53.75	\$9,366	2,666.0	\$178	
-	Sub Total	SBEAN N	TS NIRR Insurable Planted	Acres		53.75	\$9,366	2,666.0	\$178	-
			Sub Total SBEAN NTS N	IFACN		53.75	\$9,366	2,666.0	\$178	
			TOTAL SE	BEAN		133.05	\$18,949	5,393.9	\$496	

*Additional Exist



Schedule of Insurance (Estimate)

Insured Information	Agency Name	Crop Year	Policy Number
	DONOHO INS AGENCY INC-RUSSELL RENTH	2025	

	AR Line Detail										
County / Crop	county / Crop										
Туре	Practice						Insured	Additional Information			
Commodity	Irrigation		Other				L		Liability	Premium	
Class	Cropping										
Subclass	Organic			Farm Name	Shareholder(LLT)	Qty	Appr Yld	Guar /	Total		
Intended Use	Interval							Acre	Guarantee		
ST CLAIR / CO	RN		0.0000.00014/		1		0/1/05	A 000			
GRAIN		0006-0000-000	2-002S-009W	1484	0.3333	51.87	6/1/25	\$4.7000	\$12806	\$453 BU	
	NIRR		35-001S-009W	1484*	L		Ļ!		<u> </u>		
			36-001S-009W	ETLING	TERRY GROMMET		197.0	157.6	8,174.7		
			1-002S-009W								
ST CLAIR / SBI	EAN										
NTS		0006-0000-000	36-001S-009W	1484	0.3333	53.75	6/3/25	\$10.5400	\$9366	\$178 BU	
	NFACN		1-002S-009W	1484*	L		oxdot = oxdot = oxdot		L		
			2-002S-009W	ETLING	TERRY GROMMET		62.0	49.6	2,666.0		
			35-001S-009W								
NTS		5006-0000-000	35-001S-009W	1484	0.3333	79.30	6/29/25	\$10.5400	\$9583	\$318 BU	Double Crop
	FACNI		36-001S-009W	1484*	L		L l		L		
			1-002S-009W		TERRY GROMMET		43.0	34.4	2,727.9		
			2-002S-009W								



07/23/2025



Summary of Land Locations with Shareholders and Landlord/Tenants

ANCE COMPANY									dions with o	i iai ci	loidei		
	1. Insu	red's Name				2. Cr	op Year	3. P	olicy Number			4. State Code / N	ame
						2	025						
Commodity Class Sub Class Intended Use	Croppir s Organi	ng Farm c Number	9. Tract Number	10. Field Number	11. RLU ID	12. Planted Acres	/ FN / 0	Other	/ Long	gitude		5. Shareholder ndlord / Tenant]	16. Shareholder's Share (If provided to RCIS)
GRAIN	NIRR	1484 1484 1484 1484	2359 2359 2359 2359	7 8 9 12		23.05 7.16 11.46 10.20	2-002S-00 35-001S-00 36-001S-00 1-002S-00	09W / 1484 09W / 1484			TERRY (GROMMET	0.6667
NTS	NFAC	1484 N 1484 1484	2359 2359 2359	4 5 6		5.35 0.87 47.53	36-001S-00 35-001S-00 1-002S-00 2-002S-00	09W / 1484 9W / 1484			TERRY (GROMMET	0.6667
NTS	FACN	1484 I 1484 1484 1484	2359 2359 2359 2359	1 2 3 6		13.53 5.23 34.63 25.91	35-001S-00 36-001S-00 1-002S-00 2-002S-00	09W / 1484 9W / 1484			TERRY (GROMMET	0.6667



Summary of Land Locations with Shareholders and Landlord/Tenants

Insured Name	Agency Name	Crop Year	Policy Number
	DONOHO INS AGENCY INC-RUSSELL RENTH	2025	IL-951-426218

COLLECTION OF INFORMATION AND DATA (PRIVACY ACT) STATEMENT

Agents, Loss Adjusters, and Policyholders

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a): The Risk Management Agency (RMA) is authorized by the Federal Crop Insurance Act (7 U.S.C. 1501-1524) or other Acts, and the regulations promulgated thereunder, to solicit the information requested on documents established by RMA or by approved insurance providers (AIPs) that have been approved by the Federal Crop Insurance Corporation (FCIC) to deliver Federal crop insurance. The information is necessary for AIPs and RMA to operate the Federal crop insurance program eligibility, conduct statistical analysis and ensure program integrity. Information provided herein may be furnished to other Federal, State, or local agencies, as required or permitted by law, law enforcement agencies, courts or adjudicative bodies, foreign agencies, magistrate, administrative tribunal, AIPs contractors and cooperators, Comprehensive Information Management System (CIMS), congressional offices, or entities under contract with RMA. For insurance agents, certain information may also be disclosed to the public to assist interested individuals in locating agents in a particular area. Disclosure of the information requested is voluntary. However, failure to correctly report the requested information may result in the rejection of this document by the AIP or RMA in accordance with the Standard Reinsurance Agreement between the AIP and FCIC, Federal regulations, or RMA-approved procedures and the denial of program eligibility or benefits derived therefrom. Also, failure to provide true and correct information may result in civil suit or criminal prosecution and the assessment of penalties or pursuit of other remedies.

NONDISCRIMINATION STATEMENT

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, disability, age, marital 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 filing 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 USDAs 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 How to File a Program Discrimination Complaint 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.

I understand that obtaining multiple Federal benefits for the same loss, such as a Noninsured Crop Disaster Assistance Program (NAP) payment(s) and a Federal crop insurance indemnity, is prohibited by law. I certify that I have, or will disclose any other USDA benefit; including any NAP benefit, received for this crop. Failure to disclose the receipt of multiple Federal benefits, or failure to repay one of the multiple Federal benefits such as either the NAP benefit or the Federal crop insurance indemnity for the same crop, may result in my being disqualified from receiving Federal crop insurance benefits, as well as being ineligible for various programs administered by the Farm Service Agency for up to five (5) years.

17. Insured's Printed Name	18. Insured's Signature	19. Date
20. Agent's Printed Name	21. Agent's Signature	22. Date



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