

IOWA
FLOYD



United States Department of Agriculture
Farm Service Agency

FARM : 5482

Prepared : 5/26/26 2:39 PM CST

Form: FSA-156EZ

Crop Year : 2026

See Page 2 for non-discriminatory Statements.

Abbreviated 156 Farm Record

Operator Name : ██████████
 CRP Contract Number(s) : 13374,13559
 Recon ID : None
 Transferred From : None
 ARCPLC G//F Eligibility : Eligible

Farm Land Data

Farmland	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane	Farm Status	Number Of Tracts
146.22	141.28	141.28	0.00	0.00	0.00	0.00	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland		Double Cropped		CRP	MPL	DCP Ag.Rel. Activity	SOD
0.00	0.00	134.37		0.00		6.91	0.00	0.00	0.00

Crop Election Choice

ARC Individual	ARC County	Price Loss Coverage
None	None	None
ARC Individual - Default	ARC County - Default	Price Loss Coverage - Default
None	SOYBN	CORN

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
Corn	115.40	0.00	141	0
Soybeans	18.97	5.93	46	0
TOTAL	134.37	5.93		

NOTES

Tract Number : 1916
Description : 31-95-15 St Charles East
FSA Physical Location : IOWA/FLOYD
ANSI Physical Location : IOWA/FLOYD
BIA Unit Range Number :
CRP Contract Number(s) : 13374,13559
HEL Status : NHEL: No agricultural commodity planted on undetermined fields
Wetland Status : Tract does not contain a wetland
WL Violations : None
Owners : REIHER FAMILY FARMS LLC
Other Producers : None
Recon ID : None

IOWA
 FLOYD
 Form: FSA-156EZ



Abbreviated 156 Farm Record

FARM : 5482
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 Crop Year : 2026

Tract Land Data

Tract 1916 Continued ...

Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
146.22	141.28	141.28	0.00	0.00	0.00	0.00	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	CRP	MPL	DCP Ag. Rel Activity	SOD
0.00	0.00	134.37	0.00	6.91	0.00	0.00	0.00

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	115.40	0.00	141
Soybeans	18.97	5.93	46
TOTAL	134.37	5.93	

NOTES

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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, 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 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 State or Local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). 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.

CRP-1 (01-08-24) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1 ST & CO CODE & ADMIN LOCATION 19 067		2 SIGN-UP NUMBER 61
	3 CONTRACT NUMBER 13374		4 ACRES FOR ENROLLMENT 5.74
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) FLOYD COUNTY FARM SERVICE AGENCY 404 COMMERCIAL STREET CHARLES CITY, IA 50616	6 TRACT NUMBER 1916	7 CONTRACT PERIOD FROM (MM-DD-YYYY) TO (MM-DD-YYYY) 11/01/2024 09/30/2035	
	8 SIGNUP TYPE Continuous		
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (562)426-4233 x2			

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	\$ 300.00 <i>Y EG-</i>	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 1,722.00	A Tract No	B Field No	C. Practice No	D Acres	E Total Estimated Cost-Share
9C. First Year Payment	\$ 1,576.00	1916	0001	CP42	2.95	\$ 1,564.00
(Item 9C is applicable only when the first year payment is prorated)		1916	0005	CP42	2.79	\$ 1,479.00

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

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) <small>REIHER FAMILY FARMS, LLC 1000 W. STATE ST. CHARLES CITY, IA 50616</small>	(2) SHARE 100.00% <i>Y EG-</i>	(3) SIGNATURE (By) <i>Reiher Family Farms LLC</i> by: <i>Y EG-</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY POA for Marjorie Reiher, Agent	(5) DATE (MM-DD-YYYY) <i>07-31-2024</i>
B(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)
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)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE <i>[Signature]</i>	B. DATE (MM-DD-YYYY) <i>9/30/24</i>
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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 (16 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(a)(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 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 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.

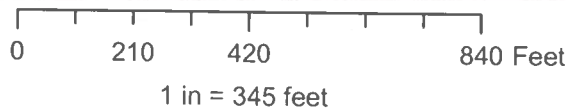
To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the 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) 590-7442, or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

RECEIVED

[Signature]



Farm: 5482
 Tract: 1916
 Sec: 31-95-15
 Twp: St Charles East



Printed
October 15 2024
Crop Year 2025

Disclaimer: 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 of FSA Programs. Wetland identifiers do not represent the size, shape or specific determination of the area. Refer to your original determination (CP-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resource Conservation Service (NRCS).

CRP-1
(05-05-25)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

1. ST. & CO CODE & ADMIN LOCATION 19 067		2. SIGN-UP NUMBER 63
3. CONTRACT NUMBER 13559		4. ACRES FOR ENROLLMENT 1.17
6. TRACT NUMBER 1916	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 10/01/2025 09/30/2035	
8. SIGNUP TYPE Continuous		

CONSERVATION RESERVE PROGRAM CONTRACT

5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)

FLOYD COUNTY FARM SERVICE AGENCY
404 COMMERCIAL STREET
CHARLES CITY, IA 50616

5B. COUNTY FSA OFFICE PHONE NUMBER

(Include Area Code): (641) 426-4230 x2

INSTRUCTIONS: RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

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	\$ 236.00 <input checked="" type="checkbox"/>	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 276.00	A Tract No	B Field No	C Practice No	D Acres	E Total Estimated Cost-Share
9C. First Year Payment	\$	1916	0008	CP42	1.17	\$ 620.00
<i>(Item 9C is applicable only when the first year payment is prorated)</i>						

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

A(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)
ROBERTA MARJORIE REIHER 10000 WOODS DR CHARLES CITY IA 50616	<input checked="" type="checkbox"/> 100.00 %	<i>Rebecca Reiher</i>	POA for Marjorie Reiher, Agent	5-20-2025
B(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)
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)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE <i>Becky Allen, acting CEO</i>	B. DATE (MM-DD-YYYY) 9/19/25
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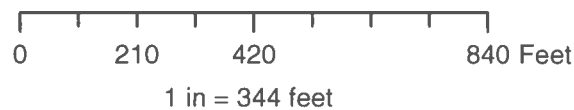
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Farm: 5482
 Tract: 1916
 Sect: 31-95-15
 Twp: St Charles East



Printed
November 26 2025
Crop Year 2026

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