

IOWA  
 FLOYD  
 Form: FSA-156EZ



FARM : 5433  
 Prepared : 6/18/26 3:04 PM CST  
 Crop Year : 2026

See Page 2 for non-discriminatory Statements.

**Abbreviated 156 Farm Record**

Operator Name : GREENE ACRES FARMLAND, LLC  
 CRP Contract Number(s) : 12453A  
 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
36.11	33.50	33.50	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	0.00	0.00		33.50	0.00	0.00	0.00	

**Crop Election Choice**

ARC Individual	ARC County	Price Loss Coverage
None	None	None

**DCP Crop Data**

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
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**NOTES**

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Tract Number : 10022  
 Description : 25-94-16 PLEASANT GROVE  
 FSA Physical Location : IOWA/FLOYD  
 ANSI Physical Location : IOWA/FLOYD  
 BIA Unit Range Number :  
 CRP Contract Number(s) : 12453A  
 HEL Status : NHEL: No agricultural commodity planted on undetermined fields  
 Wetland Status : Wetland determinations not complete  
 WL Violations : None  
 Owners : GREENE ACRES FARMLAND, LLC  
 Other Producers : None  
 Recon ID : None

**Tract Land Data**

Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
36.11	33.50	33.50	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	0.00	0.00	33.50	0.00	0.00	0.00

IOWA  
FLOYD  
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United States Department of Agriculture  
Farm Service Agency

Abbreviated 156 Farm Record

FARM : 5433  
Prepared : 6/18/26 3:04 PM CST  
Crop Year : 2026

Tract 10022 Continued ...

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
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NOTES

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.

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FARM : 7467  
 Prepared : 6/18/26 3:04 PM CST  
 Crop Year : 2026

See Page 2 for non-discriminatory Statements.

**Abbreviated 156 Farm Record**

Operator Name : MR BENJAMIN ALLEN MCCANDLESS  
 CRP Contract Number(s) : 12268A  
 Recon ID : 19-067-2014-97  
 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
86.01	86.01	86.01	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	83.11	0.00		2.90	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	CORN, SOYBN	None

**DCP Crop Data**

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
Corn	47.90	0.00	173	49
Soybeans	34.73	0.00	49	51
<b>TOTAL</b>	<b>82.63</b>	<b>0.00</b>		

**NOTES**

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**Tract Number** : 12085  
**Description** : 35-94-17 UNION  
**FSA Physical Location** : IOWA/FLOYD  
**ANSI Physical Location** : IOWA/FLOYD  
**BIA Unit Range Number** :  
**CRP Contract Number(s)** : 12268A  
**HEL Status** : NHEL: No agricultural commodity planted on undetermined fields  
**Wetland Status** : Tract contains a wetland or farmed wetland  
**WL Violations** : None  
**Owners** : GREENE ACRES FARMLAND, LLC  
**Other Producers** : TIMOTHY RAY MCCANDLESS, BETTY ANN MCCANDLESS, JILL E MCCANDLESS  
**Recon ID** : None

IOWA  
 FLOYD  
 Form: FSA-156EZ



Abbreviated 156 Farm Record

FARM : 7467  
 Prepared : 6/18/26 3:04 PM CST  
 Crop Year : 2026

Tract Land Data

Tract 12085 Continued ...

Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
86.01	86.01	86.01	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	83.11	0.00	2.90	0.00	0.00	0.00

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	47.90	0.00	173
Soybeans	34.73	0.00	49
<b>TOTAL</b>	<b>82.63</b>	<b>0.00</b>	

NOTES

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FARM : 7468  
 Prepared : 6/18/26 3:04 PM CST  
 Crop Year : 2026

See Page 2 for non-discriminatory Statements.

**Abbreviated 156 Farm Record**

Operator Name : MR BENJAMIN ALLEN MCCANDLESS  
 CRP Contract Number(s) : 10226B,11275A,11464A  
 Recon ID : 19-067-2014-97  
 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
281.69	224.20	224.20	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	166.60	0.00		57.60	18.00	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	CORN, SOYBN	None

**DCP Crop Data**

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
Corn	126.50	0.00	164	0
Soybeans	40.10	51.70	47	0
<b>TOTAL</b>	<b>166.60</b>	<b>51.70</b>		

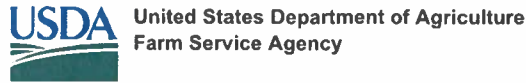
**NOTES**

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**Tract Number : 12084**

Description : 34 & 35-94-17 UNION  
 FSA Physical Location : IOWA/FLOYD  
 ANSI Physical Location : IOWA/FLOYD  
 BIA Unit Range Number :  
 CRP Contract Number(s) : 10226B,11275A,11464A  
 HEL Status : NHEL: No agricultural commodity planted on undetermined fields  
 Wetland Status : Tract contains a wetland or farmed wetland  
 WL Violations : None  
 Owners : GREENE ACRES FARMLAND, LLC  
 Other Producers : BETTY ANN MCCANDLESS, JILL E MCCANDLESS, TIMOTHY RAY MCCANDLESS  
 Recon ID : None

IOWA  
 FLOYD  
 Form: FSA-156EZ



Abbreviated 156 Farm Record

FARM : 7468  
 Prepared : 6/18/26 3:04 PM CST  
 Crop Year : 2026

Tract Land Data

Tract 12084 Continued ...

Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
281.69	224.20	224.20	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	166.60	0.00	57.60	18.00	0.00	0.00

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	126.50	0.00	164
Soybeans	40.10	51.70	47
<b>TOTAL</b>	<b>166.60</b>	<b>51.70</b>	

NOTES

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<b>CRP-1 U.S. DEPARTMENT OF AGRICULTURE</b> (01-08-24) Commodity Credit Corporation		<b>1. ST. &amp; CO. CODE &amp; ADMIN. LOCATION</b> 19 067	<b>2. SIGN-UP NUMBER</b> 52
<b>CONSERVATION RESERVE PROGRAM CONTRACT</b>		<b>3. CONTRACT NUMBER</b> 12268A	<b>4. ACRES FOR ENROLLMENT</b> 2.90
		<b>6. TRACT NUMBER</b> 12085	<b>7. CONTRACT PERIOD</b> FROM (MM-DD-YYYY) TO (MM-DD-YYYY) 10-01-2019 09-30-2023
<b>5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)</b> FLOYD COUNTY FARM SERVICE AGENCY 404 COMMERCIAL STREET 404 COMMERCIAL STREET CHARLES CITY, IA50616		<b>8. SIGNUP TYPE</b> Continuous	
<b>5B. COUNTY FSA OFFICE PHONE NUMBER</b> (Include Area Code): (641)426-4210 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.

<b>9A. Rental Rate Per Acre</b> \$ 207.91	<b>10. Identification of CRP Land (See Page 2 for additional space)</b>				
<b>9B. Annual Contract Payment</b> \$ 602.00	<b>A. Tract No.</b>	<b>B. Field No.</b>	<b>C. Practice No.</b>	<b>D. Acres</b>	<b>E. Total Estimated Cost-Share</b>
<b>9C. First Year Payment</b> \$	12085	0051	CP8A	2.90	\$ 0.00
<i>(Item 9C is applicable only when the first year payment is prorated)</i>					

<b>11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)</b>						
<b>A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)</b> BENJAMIN ALLEN MCCANDLESS 2020 100TH ST GREENE, IA50636-9271	<b>(2) SHARE</b> 12.50%	<b>(3) SIGNATURE (By)</b> 	<b>(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY</b>	<b>(5) DATE (MM-DD-YYYY)</b> 2-20-25		
<b>B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)</b> GRFFNE ACRES FARMLAND, LLC PO BOX 136 EATON, IA52742-0186	<b>(2) SHARE</b> 50.00%	<b>(3) SIGNATURE (By)</b> 	<b>(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY</b> Co-Manager	<b>(5) DATE (MM-DD-YYYY)</b> 02/04/2025		
<b>C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)</b> BETTY MCCANDLESS 2020 100TH ST GREENE, IA50636-9271	<b>(2) SHARE</b> 12.50%	<b>(3) SIGNATURE (By)</b> 	<b>(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY</b> POA	<b>(5) DATE (MM-DD-YYYY)</b> 2-20-25		

<b>12. CCC USE ONLY</b>	<b>A. SIGNATURE OF CCC REPRESENTATIVE</b> 	<b>B. DATE (MM-DD-YYYY)</b> 2/24/25
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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 (15 U.S.C. 714 of seq), the Food Security Act of 1985 (16 U.S.C. 3801 of seq), the Agricultural Act of 2014 (16 U.S.C. 3831 of 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 exempt from PRA as specified in 16 U.S.C. 3845(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.**

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 prohibitions apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

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FLOYD COUNTY FSA

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FEB 19 2025

FLOYD COUNTY FSA 02/02/2025  
CHARLES CITY IA

**11. PARTICIPANTS (CONTINUED FROM PAGE 1)**

D(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JILL E MCCANDLESS 2020 300TH ST GREENE, IA50636-9271	(2) SHARE BM 12.50 % X	(3) SIGNATURE (By) X	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY Spouse	(5) DATE (MM-DD-YYYY) 2-20-25
E(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) TIMOTHY RAY MCCANDLESS 2020 300TH ST GREENE, IA50636-9271	(2) SHARE BM 12.50 % X	(3) SIGNATURE (By) X	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY POA	(5) DATE (MM-DD-YYYY) 2-20-25
F(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)
G(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)
H(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)
I(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)
J(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)
K(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)
L(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)
M(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)
N(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)
O(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)

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FEB 20 2025

Date Printed: 02/02/2025

FLOYD COUNTY FSA



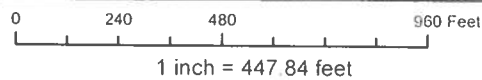
# UNITED STATES DEPARTMENT OF AGRICULTURE

Legend

- HAIP USDA, CONUS, PRIME
- ROB
- Wetland
- Green Grass
- Pr. A. B. C.



FARM: 7467  
 TRACT: 12085  
 SECTION: 35-94-17  
 TWP: UNION



PRINTED  
 February 20, 2018  
 BY FLOYD CO FSA

CROP YEAR 2020

Disclaimer: 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 wetland boundaries and determinations, or contact NRCS.

<b>CRP-1</b> U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	1 STATE & COUNTY CODE & ADMIN. LOCATION 19 067		2 SIGN-UP NUMBER 44
	3 CONTRACT NUMBER 10226B		4 ACRES FOR ENROLLMENT 18.00
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) FLOYD COUNTY FARM SERVICE AGENCY 404 COMMERCIAL STREET 404 COMMERCIAL STREET CHARLES CITY, IA50616		6 TRACT NUMBER 12081	7 CONTRACT PERIOD FROM (MM-DD-YYYY) TO (MM-DD-YYYY) 10-01-2013 09-30-2028
5B COUNTY FSA OFFICE PHONE NUMBER (Include Area Code) (641) 426-4230 x2		8 SIGNUP TYPE CONTINUOUS	

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	\$ 70.20	10 Identification of CRP Land (See Page 2 for additional space)				
9B Annual Contract Payment	\$ 1,426.00	A Tract No	B Field No	C Practice No	D. Acres	E. Total Estimated Cost/Share
9C First Year Payment	\$	12084	0221	CP22	7.20	\$ 0.00
(Item 9C is applicable only when the first year payment is prorated)		12081	0222	CP22	10.80	\$ 1,875.00

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

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) GREENE ACRES FARMLAND, LLC PO BOX 156 KATY, TX 77492 0186	(2) SHARE 100.00 %	(3) SIGNATURE (By) <i>[Signature]</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY Co-Manager	(5) DATE (MM-DD-YYYY) 02/04/2025
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) 02/04/25
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**NOTE:** The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 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 this 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.

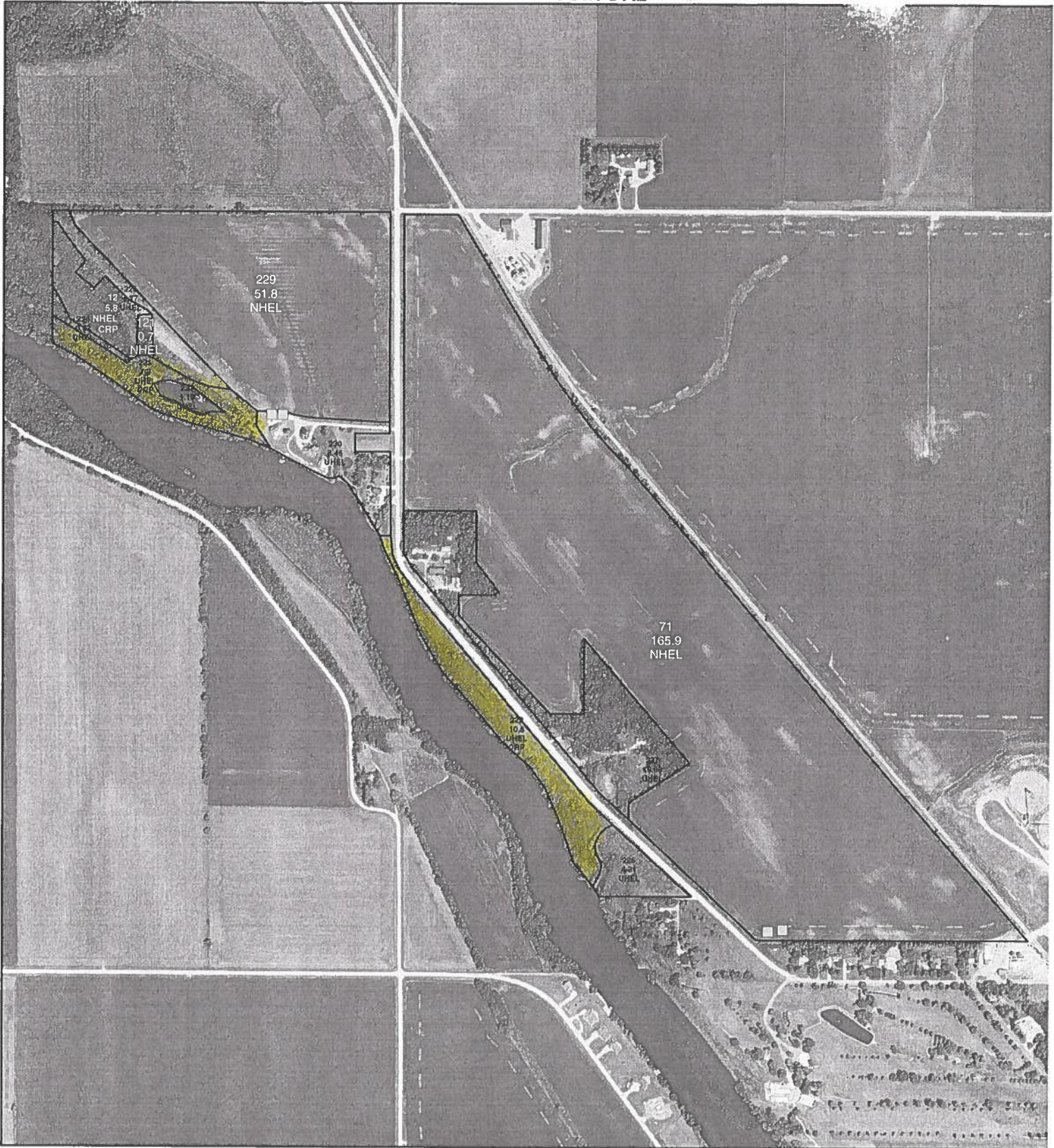
**Paperwork Reduction Act (PRA) Statement:** The information collection is exempt from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

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.

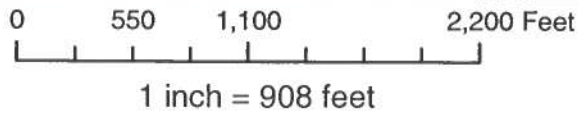
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To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form (AD-3027), found online at [http://www.usda.gov/complaint\\_filing\\_cust.html](http://www.usda.gov/complaint_filing_cust.html) and at any USDA office 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 (AD-3027) (666) 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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider.

**RECEIVED**  
 FEB 19 2025  
 FLOYD COUNTY FSA  
 CHARLES CITY IA  
 Date Printed 02/02/2025



FARM: 7468  
TRACT: 12084  
SECTION: 34 & 35-94-17  
TWP: UNION



Printed  
June 13, 2014  
by FLOYD CO FSA

*recon  
tract split*

CROP YEAR 2014

Disclaimer: 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 wetland boundaries and determinations, or contact NRCS.

CRP-1 (01-08-24)  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	U S DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1 STATE & COUNTY CODE & ADMIN LOCATION 19 067	2 SIGN UP NUMBER 47
			3 CONTRACT NUMBER 11275A	4 ACRES FOR ENROLLMENT 5.80
	5A COUNTY FSA OFFICE ADDRESS (Include Zip Code) FLOYD COUNTY FARM SERVICE AGENCY 401 COMMERCIAL STREET 404 COMMERCIAL STREET CHARLES CITY, IA 50616		6 TRACT NUMBER 12084	7 CONTRACT PERIOD FROM (MM-DD-YYYY) TO (MM-DD-YYYY) 10-01-2015 09-30-2030
	5B COUNTY FSA OFFICE PHONE NUMBER (Include Area Code) (641) 426-4230 x2		8 SIGNUP TYPE: Continuous	

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	\$ 302.07	10 Identification of CRP Land (See Page 2 for additional space)				
9B Annual Contract Payment	\$ 1,752.00	A Tract No	B Field No	C Practice No	D Acres	E Total Estimated Cost-Share
9C First Year Payment	\$	12084	12	CP22	5.80	\$ 0.00
(Item 9C is applicable only when the first year payment is prorated)						

**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)
GREENE ACRES FARMLAND, LLC PO BOX 186 KATY, TX 77492-0186	100.00 %	<i>[Signature]</i>	Co-Manager	02/04/2025
	%			
	%			

12. CCC USE ONLY	A SIGNATURE OF CCC REPRESENTATIVE <i>[Signature]</i>	B DATE (MM-DD-YYYY) 3/24/25
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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 (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 In-Program Act of 2018 (Pub. L. 115-313), 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.

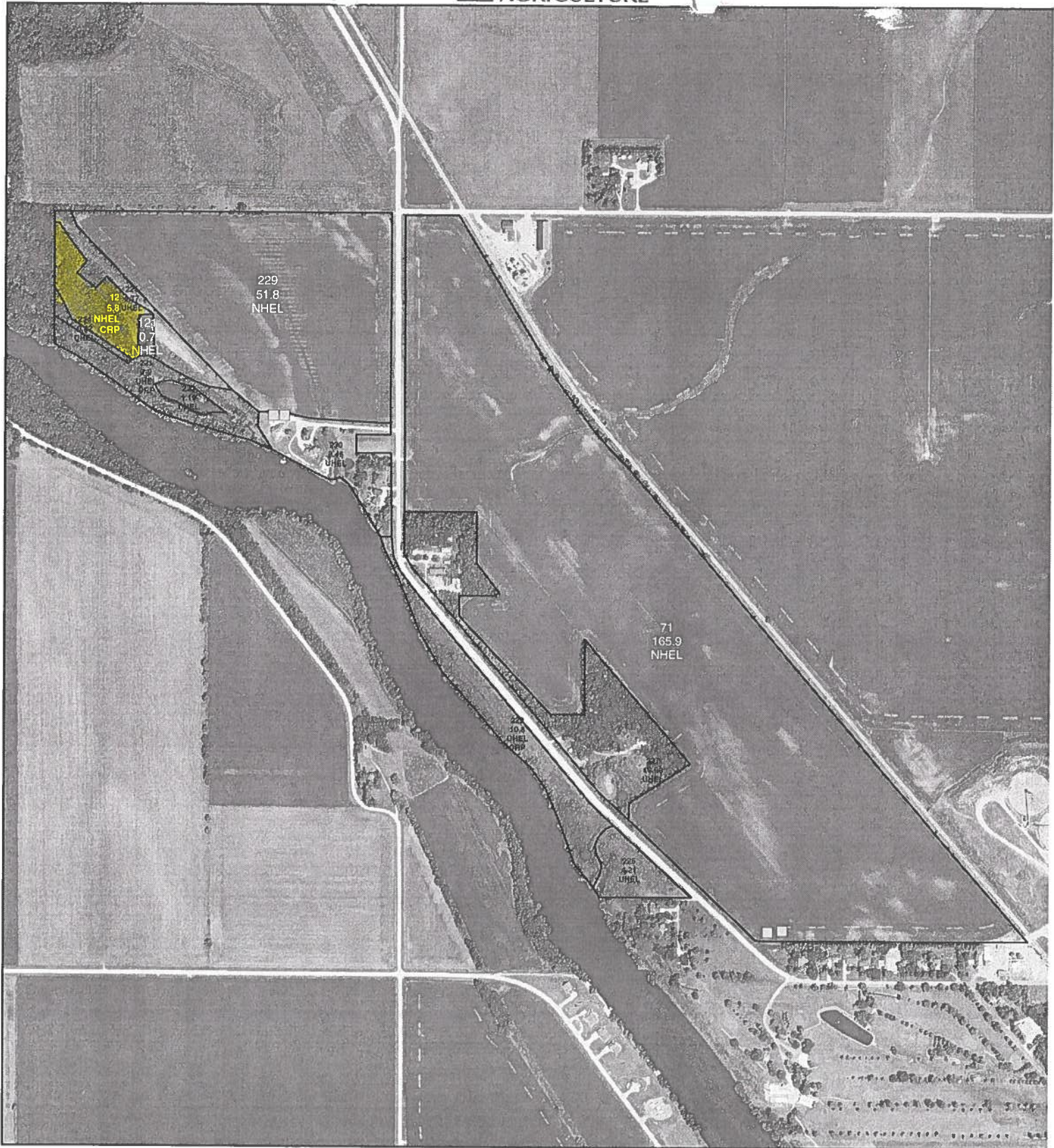
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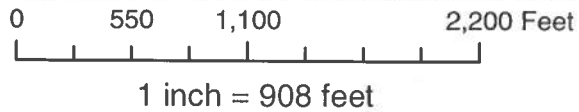
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To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <http://www.usda.gov> or at any USDA office, and mail it to the USDA Office of Civil Rights, 632-R-9902. Submit your completed 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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.

**RECEIVED**  
 FEB 19 2025  
 FLOYD COUNTY FSA  
 CHARLES CITY IA



FARM: 7468  
TRACT: 12084  
SECTION: 34 & 35-94-17  
TWP: UNION



Printed  
June 13, 2014  
by FLOYD CO FSA

CROP YEAR 2016

Disclaimer: 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 wetland boundaries and determinations, or contact NRCS.

CRP-1 (01-08-24)  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1. STATE CODE & ADMIN. LOCATION 19 067	2. SIGNUP NUMBER 47
				3. CONTRACT NUMBER 11464A
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) FLOYD COUNTY FARM SERVICE AGENCY 404 COMMERCIAL STREET 404 COMMERCIAL STREET CHARLES CITY, IA 50616			6. TRACT NUMBER 12084	7. CONTRACT PERIOD FROM (MM-DD-YYYY) TO (MM-DD-YYYY) 11-01-2015 09-30-2030
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code) (641) 426-4230 x2			8. SIGNUP TYPE SAFE - Iowa Gaining Ground	

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	\$ 220.41	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 11,417.00	A. Tract No	B. Field No	C. Practice No	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	12084	1	CP38E-25	51.80	\$ 17,042.00
(Item 9C is applicable only when the first year payment is prorated)						

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

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) GREENE ACRES FARMLAND, LLC PO BOX 186 KATY, TX 77432 0186	(2) SHARE 100.00 %	(3) SIGNATURE (By) <i>[Signature]</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY Co-Manager	(5) DATE (MM-DD-YYYY) 02/04/2025
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) 2/4/25
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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 (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. This 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 Form 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.

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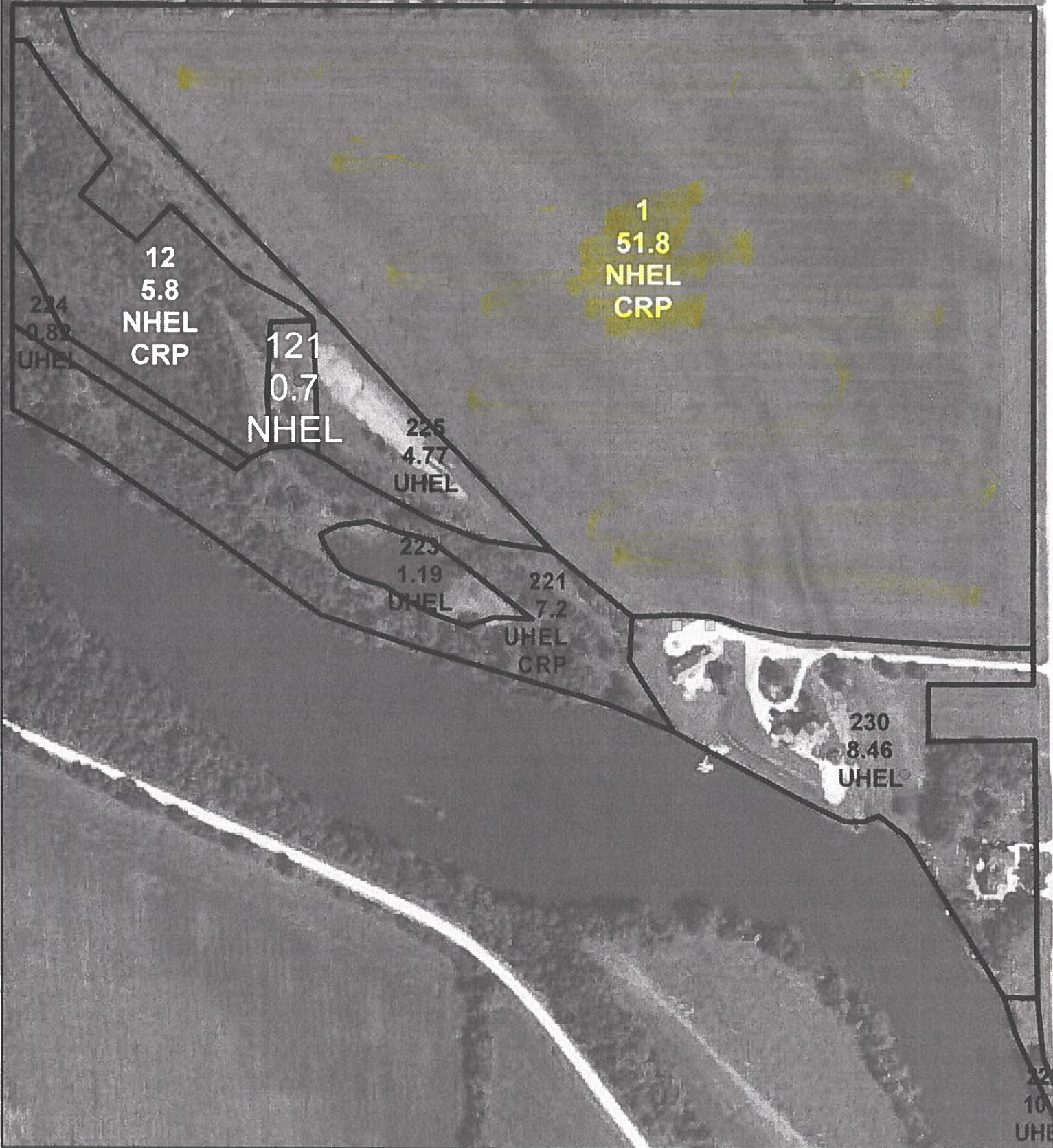
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FEB 19 2025

FLOYD COUNTY FSA  
CHARLES CITY, IA 50616  
02/02/2025

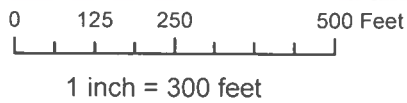


Legend

GIS\_A:\a\da\du\_3\_2007



FARM: 7468  
 TRACT: 12084  
 SECTION: 34-94-17  
 TWP: UNION



Prepared by  
 November 02, 2015  
 FLOYD CO FSA

**CROP YEAR** 2016

Disclaimer: 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 wetland boundaries and determinations, or contact NRCS.

CRP-1 (01-08-24)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1 STATE & CO CODE & ADMIN LOCATION 19 067	2 SIGNUP NUMBER 54
		3 CONTRACT NUMBER 12453A	4 ACRES FOR ENROLLMENT 33.50
<b>CONSERVATION RESERVE PROGRAM CONTRACT</b>		6 TRACT NUMBER 10022	7 CONTRACT PERIOD FROM (MM-DD-YYYY) 10-01-2020 TO (MM-DD-YYYY) 09-30-2030
5A COUNTY FSA OFFICE ADDRESS (Include Zip Code) FLOYD COUNTY FARM SERVICE AGENCY 404 COMMERCIAL STREET 104 COMMERCIAL STREET CHARLES CITY, IA 50516		8 SIGNUP TYPE: General	
5B COUNTY FSA OFFICE PHONE NUMBER (Include Area Code) (641)426-4230 x2			

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9A Rental Rate Per Acre	\$ 131.09	10 Identification of CRP Land (See Page 2 for additional space)				
9B Annual Contract Payment	\$ 4,392.00	A Tract No	B Field No	C Practice No.	D Acres	E Total Estimated Cost-Share
9C First Year Payment	\$	10022	0021	CP4D	33.20	\$ 4,515.00
(Item 9C is applicable only when the first year payment is prorated.)		10022	0023	CP12	0.30	\$ 0.00

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A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) GREENE ACRES FARMLAND, LLC PO BOX 186 KATY, TX 77492 0186	(2) SHARE 100.00%	(3) SIGNATURE (By) <i>[Signature]</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY Co-Manager	(5) DATE (MM-DD-YYYY) 02/04/2025
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)
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12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE <i>[Signature]</i>	B. DATE (MM-DD-YYYY) 02/04/25
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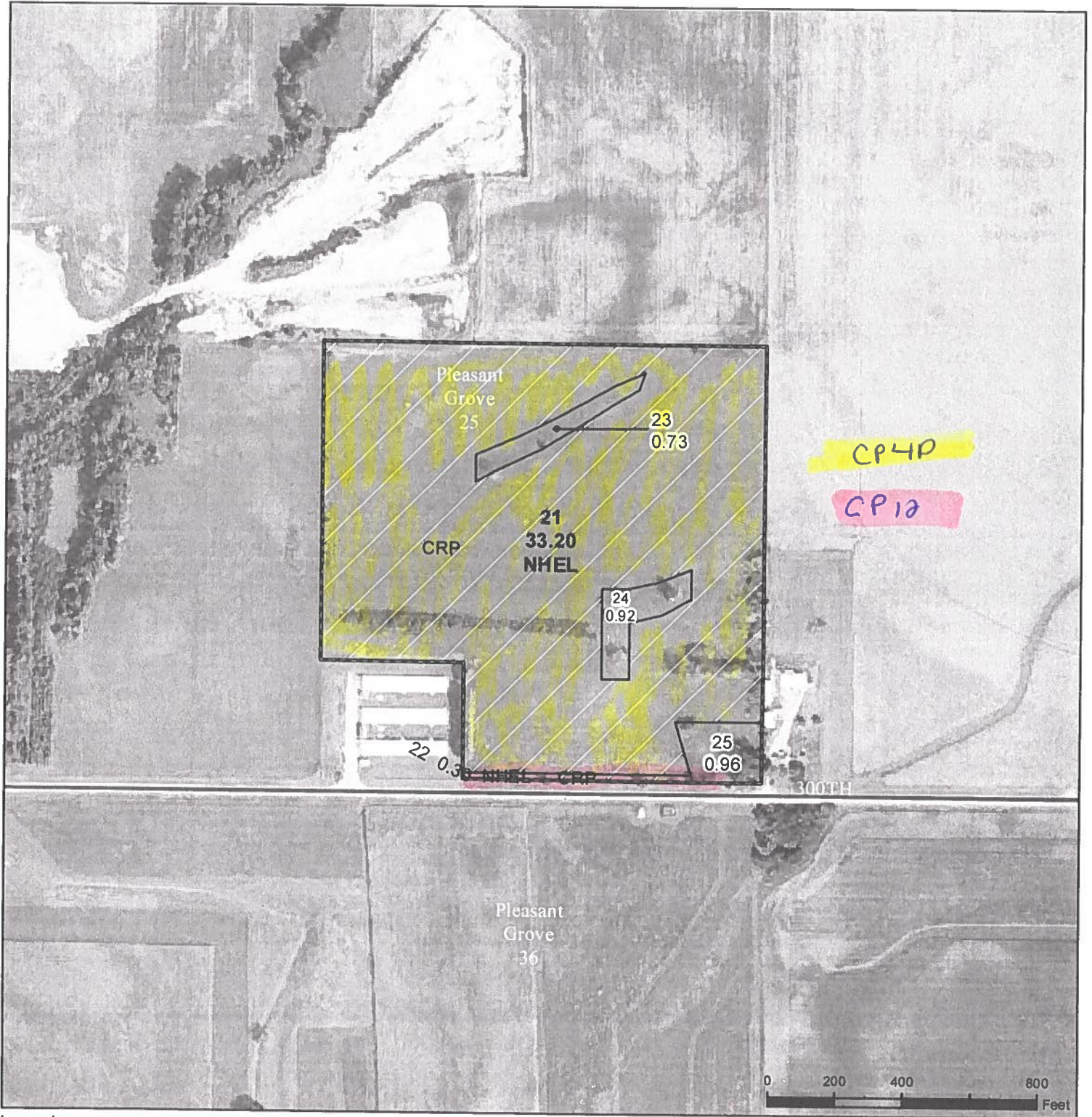
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FEB 19 2025  
FLOYD COUNTY FSA  
CHARLES CITY IA



United States  
Department of  
Agriculture

# Floyd County, Iowa



### Legend

- Non-Cropland
- CRP
- Iowa PLSS
- Cropland
- Tract Boundary
- Iowa Roads

### Wetland Determination Identifiers

- Restricted Use
- ▽ Limited Restrictions
- Exempt from Conservation Compliance Provisions

Tract Cropland Total: 33.50 acres

~~2021~~ 2020 Program Year  
Map Created May 02, 2019

Farm **5433**  
Tract **10022**

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).

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