FSA - 578 (09-13-16)

Farm Number: 5679

Operator Name and Address

19150 COUNTY ROAD 13 HERMAN, NE 68029-5 68029-5026

REPORT OF COMMODITIES ARM SUMMARY

DATE: 5-25-201

PROGRAM YEAR: 2018

Revision: Original:

PAGE:

Cropland: 50.05

Farmland: 59.41

NOTE: 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) and USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information may result in a denial of the producers request to participate in and receive benefits under FSA programs. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information 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 7 CFR Part 718, the Farm Security and Rural Investment Act of 2002 (Pub L. 107-171), and the Agricultural Act of 2014 (Pub L. 113-79). The information will be used to collect producer certification of the report of acreage of crops/commodities and land use data which is needed in order to determine producer eligibility to participate in and receive benefits under FSA programs. The information collected on the form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been collection is 0560-0175. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The provisions of criminal and civil fraud privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

	Planting Period			
SOYBN	Crop/ Commodity	GRANT T RAY	Producer Name	privacy, aria o
COM	Variety/	TRAY	r Name	מומומוט
	Irrigation Practice			o may be a
GR :	Intended	SOYBN	Crop/ Commodity	privacy, and carrier states may be applicable to the illicitiation provided. THE ONIN THIS COMPLETED I
50.05	Reported	COM	Variety/ Type	וווסווומנוסוו
, s	Dete	100.00	Share	טוסעומפט. וענ
	Determined F		Crop/ Variety/ Commodity Type	- I OIVIN I I IN
	Planting		Variety/ Type	COMIL
Commodity	Crop/		Share	
	Variety/		Crop/ Commodi	CAM TO TOOK COOKET FOR OFFICE
Igonoc	Irrigation		Crop/ Variety/ Commodity Type	CONTR
G	Intended		/ Share	OA OFFICE
Guarinty	Reported			•
Quality	Determined			

CERTIFICATION: I certify to the best of my knowledge and belief that the acreage of crops/commodities and land uses listed herein are true and correct and that all required crops/commodities and land uses have been reported for the farm as applicable. Absent any different or contrary prior subsequent certification filed by any producer for any crop for which NAP coverage has been purchased, I certify that the applicable crop, type, practice, and intended use is not planted if it is not included on the Report of Commodities for this crop year. The signing of this form gives FSA representatives authorization to enter and inspect crops/commodities and land uses on the above identified land. A signature date (the date the producer signs the FSA-578) will also be captured.

Operator's Signature (By)

Date

In accordance with Federal civil rights law and U.S. Repartment 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, 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., Braile, large print, andiotape, 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 Rose, and Program information may be made available in languages other than English. To file a program discrimination complete the USDA Program Discrimination Complaint Form, AD-3027, found e 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) 832-8992. 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, and lender.

Washington, Nebraska

FSA - 578 (09-13-16)

Farm Number: 5679

*Operator Name and Address

GRANT T RAY 19150 COUNTY ROAD 13 "HERMAN, NE 68029-5026

REPORT OF COMMODITIES FARM AND TRACT DETAIL LISTING

PROGRAM YEAR: 2018 DATE: 5-25-2018 PAGE: 1

Original: _ Revision:

Cropland: 50.05

Farmland: 59.41

1800	PP 01		()		5253	Tract Number
Cro	Cr/Co SOYBN		11		2		1	CLU/ Field
Cropland: 50.05	Var/Type In COM	P	SOYBN	P	SOYBN	Pr	SOYBN	Crop/ Commodity
	Irr Prc Int Use N GR	Producer GRANT T RAY	COM N GR	Producer GRANT T RAY	COM N	Producer GRANT T RAY	COM	Variety/ Type
		RANT T	z	T TNAS		RANT T	z	Pro Tr
Repo	Non-Irr 50.05	RAY	GR	RAY	GR	RAY	GR	Int Use
rted on (=							Actual Land Use Use
Croplano	79							Land Use
Reported on Cropland: 50.05	Cr/Co		C		C		C	Organic Status
		Share	z	Share	z	Share	z	-
	ar/Type	Share 100.00	-	9 100.00		Share 100.00	-	Vative C/C Sod Status
	Var/Type Irr Prc Int Use	J	Þ		>	_	A	Reporting
Difference	nt Use Non-Irr	FS,	0.81	FS,	37.27	FS	11.97	Repo
rence: 0.00	r In PP	FSA Physical Location: Washington, Nebraska		FSA Physical Location: Washington, Nebraska	7	FSA Physical Location: Washington, Nebraska	7	rted Determined ntity Quantity
1	1	n: Washin	Yes	n: Washin	Yes	n: Washin	Yes	Crop
Reg	ν Va	gton, Ne		gton, Ne		gton, Ne		Field
Reported on Non-Cropland: 0.00	Cr/Co Var/Type in Prc Int Use Non-in	braska		braska		braska		Official/ Measured
-Cropland: 0.	rc Int Use		5-10-2018 01		5-10-2018 01		5-10-2018 01	Planting Planting End Date Period Date
8	Non-irr	NAP Unit 2172	2	NAP Unit 2172	2	NAP Unit 2172	2	Planting Period
	a	2172		2172		2172		End Date



Common Land Unit

Tract Boundary
PLSS

2016 NAIP Ortho Imagery

1002 Grant

2018 Program Year
Map Created April 03, 2018

Wetland Determination Identifiers

Restricted Use

Cropland

- Exempt from Wetland Provisions

Tract Cropland Total: 50.05 acres

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).

