*						Page 1 of 1		
CRP-1 U.S. DEPARTMENT OF AGRICULTURE (07-06-20) Commodity Credit Corporation  CONSERVATION RESERVE PROGRAM CONTRACT				& CO. CODE &	2. SIGN-UP			
				17	NUMBER 48			
				NTRACT NUMBI	4. ACRES FOR			
				11:	ENROLLMENT 5.96			
5A. COUNTY FSA OFFICE ADDRESS		6. TRA	CT NUMBER	7. CONTRACT PERIOD				
VERMILION COUNTY FARM SERVICE 1905-A US ROUTE 150			12526	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)			
DANVILLE, IL61832-5396			12320	10-01-2016	09-30-2026			
			NUP TYPE:	1				
5B. COUNTY FSA OFFICE PHONE NUMBER				- Continuous				
(Include Area Code): (217) 442-85								
THIS CONTRACT is entered into betwee (referred to as "the Participant".) The CCC for the stipulated contract period acreage the Conservation Plan develop comply with the terms and conditions Program Contract (referred to as "App applicable contract period. The terms thereto. BY SIGNING THIS CONTRACT addendum thereto; and, CRP-2, CRP-2	Participant agrees to pl from the date the Conti oed for such acreage ai contained in this Contr endix"). By signing bel and conditions of this of T PARTICIPANTS ACKN	ace the designated ract is executed by nd approved by the act, including the A low, the Participant contract are contail IOWLEDGE RECEII	l acreage into the the CCC. The let CCC and the Pappendix to this tacknowledges ned in this Form	e Conservation Participant also Participant. Addi Contract, entitle receipt of a cop	Reserve Program ("CRF agrees to implement on tionally, the Participant : ed Appendix to CRP-1, C y of the Appendix Appendix	") or other use set by such designated and CCC agree to conservation Reserve moles for the		
9A. Rental Rate Per Acre \$ 2	10. Identificati	10. Identification of CRP Land (See Page 2 for additional space)						
9B. Annual Contract Payment \$1,632.00		A. Tract No.	B. Field No.	C. Practic	e No. D. Acres	E. Total Estimated Cost-Share		
9C. First Year Payment \$		12526	6	CP4:	2 3.01	\$ 1,264.00		
(Item 9C is applicable only when the first year payment is		12526	7	CP4:	2 2.95	\$ 1,239.00		
prorated.)								
11. PARTICIPANTS (If more to	han three individua	ls are signing,	see Page 3.)					
A(1) PARTICIPANT'S NAME AND (2) SHARE		(3) SIGNATURE (By)		` <i>'</i>	ATIONSHIP OF THE	(5) DATE		
ADDRESS (Include Zip Code) ALBERT JORDAN LIVING TR SUZANNE NEWTON TIEE		e-Signed by Suzan			L SIGNING IN THE	(MM-DD-YYYY)		
86 AMELIA RD GRIFFIN, GA30223-5910	90.00%	For, if applic		trust	NTATIVE CAPACITY lee	05-03-22		
B(1) PARTICIPANT'S NAME AND (2) SHARE		(3) SIGNATURE (By)		(4) TITLE/REL	(5) DATE			
ADDRESS (Include Zip Code)				` INDIVIDUA	(MM-DD-YYYY)			
C/O DARRELL MORGAN 3966 N 300 W CAYUGA, 1N47928-8106	10.00%	Attachi	d	REPRESEN	NTATIVE CAPACITY			
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) (2) SHARE		(3) SIGNATURE (By)		(4) TITLE/REL	(5) DATE			
				INDIVIDUAL SIGNING IN THE   (MM-DD-YYY)				

A. SIGNATURE OF CCC REPRESENTATIVE 12. CCC USE ONLY

B. DATE (MM-DD-YYYY)

INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY (MM-DD-YYYY)

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 NOTE: 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) and 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(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.

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 <a href="http://www.ascr.usda.gov/complaint-filing\_cust.html">http://www.ascr.usda.gov/complaint-filing\_cust.html</a> 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.

CDD 4					Page 1 of 1				
CRP-1 U.S. DEPARTMENT OF AGRICULT		1. ST. & CO. CODE & ADMIN. LOCATION							
(07-06-20) Commodity Credit Corporatio	n		17	NUMBER 48					
CONSERVATION DESERVE PROCE		_ 3. CONTR	ACT NUMBE	4. ACRES FOR					
CONSERVATION RESERVE PROGR			32C	ENROLLMENT 5.96					
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code	e)	6. TRACT	6. TRACT NUMBER 7. CONTRACT PERI		)				
VERMILION COUNTY FARM SERVICE AGENCY 1905-A US ROUTE 150		12!		FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)				
DANVILLE, IL61832-5396		12:	526	10-01-2016	09-30-2026				
·									
		8. SIGNUF			·				
5B. COUNTY FSA OFFICE PHONE NUMBER	Contin	- Continuous							
(Include Area Code): (217)442-8511 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 \$ 273.79	10. Identificati	10. Identification of CRP Land (See Page 2 for additional space)							
9B. Annual Contract Payment \$ 1,632.00	A. Tract No.	B. Field No.	C. Practice	No. D. Acres	E. Total Estimated Cost-Share				
9C. First Year Payment \$	12526	1 6	CDA2	2 01	2 1 254 22				

12526 3.01 \$ 1,264.00 (Item 9C is applicable only when the first year payment is 12526 7 CP42 2.95 \$ 1,239.00 prorated.) 11. PARTICIPANTS (If more than three individuals are signing, see Page 3.) A(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE ADDRESS (Include Zip Code)
ALBERT JORDAN LIVING TR
SUZANNE NEWTON TTEE
86 AMELIA RD
GRIFFIN, GAJ0223-5910 INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY 90.00% B(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY 10.00% C(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) -Signed by Brian Morgan REPRESENTATIVE CAPACITY % On 05-03-22 05-03-22 member 12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE B. DATE (MM-DD-YYYY) NOTE:

CP42

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