

Tract Number	CLU/Field	Crop/Commodity	Var/Type	Int Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Qty	Crop Land	Field ID	Planting Date	Planting Period	End Date
3	2	CORN	YEL	GR	N	C	N	I	A	12.09		Yes		04/10/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
3		CORN	YEL	GR	N	C	N	I	A	49.99		Yes		04/10/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
5		SOYBN	COM	GR	N	C	N	I	A	48.08		Yes		05/22/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
6		CORN	YEL	GR	N	C	N	I	A	40.19		Yes		04/09/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
8		SOYBN	COM	GR	N	C	N	I	A	30.98		Yes		05/22/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
20		SOYBN	COM	GR	N	C	N	I	A	103.90		Yes		05/22/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	
21		CORN	YEL	GR	N	C	N	I	A	64.92		Yes		04/10/2024	01	
Share 50.00 FSA Physical Location Saline, Missouri										50.00				NAP Unit 4190	Signature Date 06/03/2024	

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 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 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 producer's 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 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.

Crop/Commodity							Variety/Type		Share		Crop/Commodity							Variety/Type		Share	
SOYBN							COM		50.00		CORN							YEL		50.00	
SOYBN							COM		50.00		CORN							YEL		50.00	
PP	Crop/Commodity	Variety/Type	Intended Use	Irrigation Practice	Reporting Unit	Reported Quantity	Determined Quantity		PP	Crop/Commodity	Variety/Type	Intended Use	Irrigation Practice	Reporting Unit	Reported Quantity	Determined Quantity					
01	SOYBN	COM	GR	N	A	182.96			01	CORN	YEL	GR	N	A	167.19						

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.

Producer's Signature (By)	Title/Relationship of Individual Signing in the Representative Capacity	Date

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) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.