CRP-1 U.S. DEPARTMENT	DE AGRICUI TUT	5					Page 1	of 1
CRP-1 U.S. DEPARTMENT OF AGRICULTURE (07-06-20) Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT			1. ST	1. ST. & CO. CODE & ADMIN. LOCATION			2. SIGN-UP	
				29 111			NUMBER 60	
			3. CC	3. CONTRACT NUMBER			4. ACRES FO	08
			r	11271			ENROLLM	
5A. COUNTY FSA OFFICE ADDRESS (Inc				1/326		38.32	UU	
LEWIS COUNTY FARM SERVICE AGENCY		6. TR			ACT PERIOD			
502 S WASHINGTON ST			10228		M-DD-YYYY)	TO: (MM-DD-Y		
MONTICELLO, MO 63457-9715					10-0	1-2023	09-30-2	033
			8 50	SNUP TYPE:				
5B. COUNTY FSA OFFICE PHONE NUM			eral					
(Include Area Code): (573)767-5274			Jurn 53				10	
THIS CONTRACT is entered into between th (referred to as "the Participant".) The Partic CCC for the stipulated contract period from acreage the Conservation Plan developed fi comply with the terms and conditions conte Program Contract (referred to as "Appendix applicable contract period. The terms and o thereto. BY SIGNING THIS CONTRACT PAR addendum thereto; and, CRP-2, CRP-2C, CH	the date the Contr or such acreage an ined in this Contr "). By signing be conditions of this of	ract is executed by nd approved by the act, including the A low, the Participant Contract are contain	the CCC. The CCC and the l Appendix to this acknowledges	Participant also a Participant. Addit s Contract, entitle s receipt of a copy	reserve Pro agrees to imp ionally, the i of Appendix of the Appe	gram ("CRP") plement on su Participant an to CRP-1, Cou andix/Appendi	or other use so ich designated d CCC agree to iservation Reso ices for the	
9A. Rental Rate Per Acre \$180.			on of CRP 1	nd (See Page 2	for additio			
9B. Annual Contract Payment \$ 6,905.00		A. Tract No.	B Field No.				E. Total Estim Cost-Shar	
9C. First Year Payment \$		10228	0010	CP12		0.30	\$ 0.00	
(Item 9C is applicable only when the first year payment is prorated.)		10228	0012	CP2		38.02	\$ 0.00	
11. PARTICIPANTS (If more than	three individua	ls are signing.	see Page 3					
ALL FARTURANTS NAME AND	(2) SHARE	(3) SIGNATURE ((By) . (
ADDRESS (Include Zip Code) DAVID WURTZBERGER		0.191	The	INDIVIDUAL SIGNING IN THE			BO PATTEED	
14944 BOXWOOD ST	100.00 %	Jarid ha	all very a	REPRESEN	TATIVE CAP	PACITY	}	
LA BELLE, MO 63447-2034 B(1) PARTICIPANT'S NAME AND	(2) 0114 05		/ /			M	AR 2 9 202	3
ADDRESS (Include Zip Code)	(2) SHARE	(3) SIGNATURE (By)		(4) TITLE/RELA	(5) DATE			
, ,				INDIVIDUAL SIGNING IN THEWI REPRESENTATIVE CAPACITY			COUPPTY	MEG
	%			ner negen	INTIVE CAP	ACIT		
C(1) PARTICIPANT'S NAME AND	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE (5) DATE					
ADDRESS (Include Zip Code)				INDIVIDUAL	(5) DATE (MM-DD-YY	m l		
	%			REPRESEN	TATIVE CAP	ACITY		
12. CCC USE ONLY A. SIGNATUR	F OF CCC PEP	DECENTATI						
12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE							B. DATE	
NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the informatic is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seg.), the Food Security Act of 1985 (16 U.S.C. 2001 et and the informatic							S/21 Do	
NOTE: The following statement is made in accor is the Commodity Credit Corporation Cha	dance with the Privat	cy Act of 1974 (5 USC	552a - as amen	ded) The authority	for requesting	the information	identified on this	form
is the Commodity Credit Corporation Cha 3831 et seq), the Agricultural Improveme receive benefits under the Conservation I Tribal agencies, and nongovernmental er identified in the System of Records Noticu the requested information will result in a d	nt Act 61 2018 (Pub.) Reserve Program. Th Nilies that have been for USDA/ESA-2.5	L 115-334) and 7 CFI he information collector authorized access to	R Part 1410. The ed on this form m the information t	information will be ay be disclosed to o by statute or regulation	used to detern ther Federal, t on and/or as d	Agricultural Act (nine eligibility to State, Locat gov escribed in app	of 2014 (16 U.S.C participate in and proment agencies	1
Paperwork Reduction Act (PRA) Staten and civil fraud, privacy, and other statutes	ent: The information	n collection is exempted	d from PRA as s	pecified in 16 U.S.C	3846(b)(1)	The provisions (of appropriate crim	ninal
In accordance with Federal chill cichte low and U.S.	Decedenced - (A			THE COMPLETED P	-ORM 10 70	UR COUNTY F		
institutions participating in or administering USDA p expression), sexual orientation, disability, age, marii civil rights activity, in any program or activity conduc	al alation to all t			ordr, national origin,	religion, sax	Gender identity	lincluding goods	prior
			y to an programs	, Remedies and co	mplaint filing d	leadlines vary b	y program or inci	dent.

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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 <u>http://www.ascr.usda.gov/complaint_filing_cust.html</u> 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_filing_cust.html 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: <u>program intake@usda_gov</u>. USDA is an equal opportunity provider, employer, and lender.