

Producer Farm Data Report

Crop Year: 2020

Date: 9/27/19 2:25 PM

Page: 1

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained the MIDAS system, which is the system of record for Farm Records.

Producer Name and Address

AMH FARMS INC

Recording County Office Name

Cedar, Iowa

Number of Farms	Number of Tracts	Farmland	Farmland	DCP Cropland	CRP Cropland	Eff DCP Cropland	HEL Cropland	Wetland Code
1	1	323.76	296.21	296.21	1.51	294.7	SA	DNC
		Relationship to Farm Tract		Farmland Cropland		DCP Cropland		Wetland Code
		Owner		323.76		296.21		SA
		AMH FARMS INC		296.21		294.7		DNC

HEL Codes

SA = HEL: Sys Applied
SNA = HEL: Sys Not Applied

SNR = HEL: Sys Not Required
2YR = HEL: 2-yr Implement

DNC = Determination Not Complete
N = Not HEL

Wetland Codes

WL = Wetland
N = No Wetland

DNC = Determination Not Complete

Iowa
Cedar

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

FARM: 6092
Prepared: 9/27/19 2:26 PM
Crop Year: 2020
Page: 2 of 2

Report ID: FSA-156EZ

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Tract Number: 8857 Description A-9 SW1/4 SEC 19 NW1/4 SEC 30 T80N R4W

FSA Physical Location : Cedar, IA ANSI Physical Location: Cedar, IA

BIA Range Unit Number:

HEL Status: HEL: conservation system is being actively applied

Wetland Status: Wetland determinations not complete

WL Violations: None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
323.76	296.21	296.21	0.0	0.0	1.51	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP	Native Sod	
0.0	0.0	294.7	0.0	0.0	0.0	

Crop	Base Acreage	CTAP Tran Yield	PLC Yield	CCC-505 CRP Reduction
CORN	216.1		154	0.0
SOYBEANS	67.2		56	0.0
Total Base Acres:	283.3			

Owners: AMH FARMS INC

Other Producers: None



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

Wetland Determination Identifiers

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

Tract Cropland Total: 296.21 acres

2019 Program Year

Map Created October 11, 2018

Farm 6092

Tract 8857

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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FILE COPY

This form is available electronically.

CRP-1 U.S. DEPARTMENT OF AGRICULTURE
 (03-26-04) Commodity Credit Corporation

CONSERVATION RESERVE PROGRAM CONTRACT

NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection is estimated to average 4 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.

7. COUNTY OFFICE ADDRESS (Include Zip Code):
 USDA SERVICE CENTER
 CEDAR COUNTY FARM SERVICE AGENCY
 205 WEST SOUTH STREET, SUITE #3
 TIPTON, IA 52772

TELEPHONE NUMBER (Include Area Code): (563) 886-6061

1. STATE CODE & ADMIN. LOCATION: 19-031-5

2. SIGN-UP NUMBER: 32

3. CONTRACT NUMBER: 2343C

4. ACRES FOR ENROLLMENT: 1.5

5. FARM NUMBER: 6092

6. TRACT NUMBER(S): 8857

8. OFFER (Select one):
 GENERAL ENVIRONMENTAL PRIORITY

9. CONTRACT PERIOD:
 FROM: (MM-DD-YYYY) 10-01-2008 TO: (MM-DD-YYYY) 09-30-2018

RECEIVED
 APR 12 2010
 CEDAR CO. FSA
 TIPTON, IOWA

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be 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 that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection. 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 PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre	\$	130.71	11. Identification of CRP Land (See Page 2 for additional space)				
B. Annual Contract Payment	\$	196.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
C. First Year Payment	\$	196.00	8857	34	CP4D	0.8	0.00
(Item 10C applicable only to continuous signup when the first year payment is prorated.)			8857	36	CP10	0.7	0.00

12. PARTICIPANTS

A(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code): AMH FARMS INC. (2) SHARE: 100% (3) SOCIAL SECURITY NUMBER: *****9823 (4) SIGNATURE: [Signature] DATE (MM-DD-YYYY): 04-05-2010

B(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code): (2) SHARE: % (3) SOCIAL SECURITY NUMBER: (4) SIGNATURE: DATE (MM-DD-YYYY)

C(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code): (2) SHARE: % (3) SOCIAL SECURITY NUMBER: (4) SIGNATURE: DATE (MM-DD-YYYY)

13. CCC USE ONLY - Payments according to the shares are approved.

A. SIGNATURE OF CCC REPRESENTATIVE: [Signature]

B. DATE (MM-DD-YYYY):

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995 (Pub. L. 104-198), as amended and the Farm Security and Administration Act of 1985 (7 CFR Part 1410) and the Internal Revenue Code (26 USC 6109). The information is voluntary. Failure to furnish the requested information will result in determination of ineligibility administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, and 31 USC 3729, may be applicable to the information provided. RETURN THIS COMPLETED FORM TO

CP field 10 18 .71
 CP field 40 3 .80
 1.51

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Original - County Office Copy Owner's Copy

map 3-10-10
 [Handwritten notes]

CRP-1F Addendum
(05-31-19)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

1A. State Code 19	1B. County Code 031
2. Contract Number 2343C	
3. Farm Number 6092	

**CRP-1 MODIFICATION TO EXTEND THE CONTRACT
EXPIRATION DATE FOR 1 YEAR**

4. TERMS TO EXTEND EXPIRATION DATE OF THE CRP-1 CONTRACT

This contract modification is entered into by the Commodity Credit Corporation (CCC) and the undersigned participant(s) of the Conservation Reserve Program (CRP) under the contract in Item 2 above.

By signing this contract modification, the participant(s) and CCC agree:

- to extend the expiration date of the CRP contract identified in Item 2 above to September 30, 2020.
- to continue to comply with the terms and conditions of the cited contract as contained in the corresponding CRP-1, CRP-1 Appendix, and any addendum thereto.
- to extend the lifespan of all CRP practices established for the contract identified in Item 2 above for 1 year longer than indicated on AD-245, page 2, or the FSA-848A as applicable or for 1 year longer than was agreed to under other extension provisions, whichever results in the later date.

RECEIVED
JUN 28 2019
CEDAR CO. FSA
TIPTON, IOWA

It is so agreed and understood.

4A. Participant's Name (Printed) AMH FARMS INC	4B. Participant's Signature (By) <i>AMH Farms Inc. By [Signature]</i>	4C. Title/Relationship of the Individual Signing in the representative capacity <i>President</i>	4D. Date (MM-DD-YYYY) <i>06-22-2019</i>
4E. Participant's Name (Printed)	4F. Participant's Signature (By)	4G. Title/Relationship of the Individual Signing in the representative capacity	4H. Date (MM-DD-YYYY)
4I. Participant's Name (Printed)	4J. Participant's Signature (By)	4K. Title/Relationship of the Individual Signing in the representative capacity	4L. Date (MM-DD-YYYY)
4M. Participant's Name (Printed)	4N. Participant's Signature (By)	4O. Title/Relationship of the Individual Signing in the representative capacity	4P. Date (MM-DD-YYYY)

5A. Signature of CCC Representative <i>D. Laquits</i>	5B. Date (MM-DD-YYY) <i>8/17/19</i>	6A. County FSA Office Name and Address (Including ZIP Code) CEDAR COUNTY FARM SERVICE AGENCY 205 W SOUTH STREET, STE 3 TIPTON IA 52772	6B. Telephone No. (Including Area Code): 563-886-6061
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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 7 CFR Part 1410, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility for a modification to extend an existing CRP contract. 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 for a modification to extend an existing CRP contract.

This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title II, Subtitle G, Funding and Administration). 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.**

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.

CRP-1F Addendum (06-01-18) CRP-1 MODIFICATION TO EXTEND THE CONTRACT EXPIRATION DATE FOR 1 YEAR	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1A. State Code 19	1B. County Code 031
	2. Contract Number 2343C		
	3. Farm Number 6092		

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It is so agreed and understood.

4A. Participant's Name (Printed) AMH FARMS INC	4B. Participant's Signature (By) <i>AMH Farms Inc</i> by Pamela St. JPM	4C. Title/Relationship of the Individual Signing in the representative capacity <i>President, AMH Farms Inc</i>	4D. Date (MM-DD-YYYY) <i>07/03/2018</i>
4E. Participant's Name (Printed)	4F. Participant's Signature (By)	4G. Title/Relationship of the Individual Signing in the representative capacity	4H. Date (MM-DD-YYYY)
4I. Participant's Name (Printed)	4J. Participant's Signature (By)	4K. Title/Relationship of the Individual Signing in the representative capacity	4L. Date (MM-DD-YYYY)
4M. Participant's Name (Printed)	4N. Participant's Signature (By)	4O. Title/Relationship of the Individual Signing in the representative capacity	4P. Date (MM-DD-YYYY)

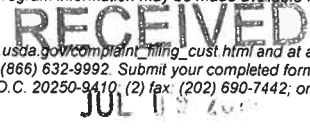
5A. Signature of CCC Representative <i>Devalyn Nitz</i>	5B. Date (MM-DD-YYY) <i>7/20/18</i>	6A. County FSA Office Name and Address (Including ZIP Code) CEDAR COUNTY FARM SERVICE AGENCY 205 W SOUTH ST, STE 3 TIPTON IA 52772
		6B. Telephone No. (Including Area Code): 5638866061

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Handwritten notes:
 arcd
 JKL
 cems
 midas
 CPO
 CABE