**FARM:** 3596  
**Prepared:** 6/13/17 12:29 PM  
**Crop Year:** 2017  
**Page:** 1 of 1

**Operator Name:** LYNN R GODBERSEN  
**Farm Identifier:** A40006  
**Recon Number:**

**Farms Associated with Operator:** None

**CRP Contract Number(s):** 9348, 11075

<table>
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<tr>
<th>Farmland</th>
<th>Cropland</th>
<th>DCP Cropland</th>
<th>WBP</th>
<th>WRP/EWP</th>
<th>CRP Cropland</th>
<th>GRP</th>
<th>Farm Status</th>
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<th>MPL/FWP</th>
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**ARC-IC:** NONE  
**ARC-CO:** CORN  
**PLC:** NONE  
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<th>Crop</th>
<th>Base Acreage</th>
<th>CTAP Tran Yield</th>
<th>PLC Yield</th>
<th>CCC-505 CRP Reduction</th>
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<td>SOYBEANS</td>
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**Tract Number:** 3858  
**Description:** G9 N1/2 SEC 27 R

**BIA Range Unit Number:**

**HEL Status:** NHEL: no agricultural commodity planted on undetermined fields

**Wetland Status:** Tract does not contain a wetland

**WL Violations:** None

<table>
<thead>
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<th>DCP Cropland</th>
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<td>11.4</td>
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**Owners:** LYNN R GODBERSEN  
**Other Producers:** None  
**MURIEL R GODBERSEN**
**INDIVIDUAL CONTRACT**

**Contract Number:** 934B  
**Contract Status:** Active  
**Signup Name:** 28 Continuous  

**Physical State:** IA  
**Physical County:** Harrison  

**Original CRP-1 Start Date:** 01/01/2004  
**Original CRP-1 End Date:** 09/30/2018  
**Effective Start Date:** 08/17/2009  
**Effective End Date:** 09/30/2018

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<th>CLU Number</th>
<th>CLU Acres</th>
<th>Program Year</th>
<th>Rental Rate</th>
<th>Acres Approved</th>
<th>Annual Payment</th>
<th>Approval Date</th>
<th>Cropland Acres</th>
<th>Marginal Pastureland Acres</th>
<th>Non-Cropland Acres</th>
<th>Wellhead Acres</th>
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<th>Producer Name</th>
<th>Producer Share %</th>
<th>Producer Involvement</th>
<th>Extension Type Description</th>
<th>Extension Rate</th>
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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, gathering or maintaining the data need, and completing and reviewing the collection of information.

7. COUNTY OFFICE ADDRESS (Include Zip Code):
Harrison County FSA Office
2710 Hwy 127
Logan La 71546-0169

TELEPHONE NUMBER (Include Area Code)
712-644-2040

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owner, 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 $ 112.05
B. Annual Contract Payment $ 1132
C. First Year Payment $ 3658

(Item 10C applicable only to continuous sign up when the first year payment is prorated.)

11. Identification of CRP Land (See Page 2 for additional space)

12. PARTICIPANTS

A(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code):
Lynn R Godberson
2431 St Charles Rd
Winterset La 50273-8129

A(2). SHARE
100%

A(3). SOCIAL SECURITY NUMBER:
9542

A(4). SIGNATURE: 
DATE (MM-DD-YYYY)
06/30/2009

B(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code):
Muriel R Godberson
2431 St Charles Rd
Winterset La 50273-8129

B(2). SHARE
0%

B(3). SOCIAL SECURITY NUMBER:
9352

B(4). SIGNATURE: 
DATE (MM-DD-YYYY)
06/30/2009

C(1). PARTICIPANT'S NAME AND ADDRESS (Zip Code):

C(2). SHARE

C(3). SOCIAL SECURITY NUMBER:

C(4). SIGNATURE: 
DATE (MM-DD-YYYY)

A. SIGNATURE OF CCC REPRESENTATIVE

B. DATE (MM-DD-YYYY)
07/20/09

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

NOTE:
The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L. 99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 FR 1.1410 and the Internal Revenue Code 26 USC 6109. The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program Contract, to assist in determining eligibility, and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 266, 267, 371, 541, 651, 1001, 15 USC 714a, and 31 USC 3729 may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, sexual identity, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information should contact USDA. This US Department of Agriculture is an equal opportunity employer and provider.

Original - County Office Copy
Owner's Copy
Operator's Copy

RECEIVED
**INDIVIDUAL CONTRACT**

**Contract Number:** 11075  
**Contract Status:** Active  
**Signup Name:** Continuous SU47

**Physical State:** IA  
**Physical County:** Harrison

**Original CRP-1 Start Date:** 01/01/2015  
**Original CRP-1 End Date:** 09/30/2025  
**Effective Start Date:** 01/01/2015  
**Effective End Date:** 09/30/2025

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