

1. PROGRAM YEAR 2017	2. STATE CODE 46	3. COUNTY CODE 037	4. FARM NUMBER 1080
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CONTINUATION OF OWNER'S OR PRODUCER'S CROP INFORMATION (From Page 1)

12A. Owner or Producer's Name and Address JUNE SWANSON C/O JAMES SWANSON 419 MAIN ST S BRISTOL, SD 57219-2043	13. Commodity	14. Payment Share	13. Commodity	14. Payment Share
	CORN		SOYBEANS	
	WHEAT			
12B. Email Address				
12C. Telephone No.				

15A. Refused Payment Information: <input type="checkbox"/> All ARC-CO Payments are Refused <input type="checkbox"/> All PLC Payments are Refused	15B. Producer's Initials
	15C. Date Initiated (MM-DD-YYYY)

16A. Producer's Signature (By) Cash Rent Certification <i>Cash lease on file - 2015</i>	16B. Title/Relationship of the Individual Signing in the Representative Capacity	16C. Date (MM-DD-YYYY)
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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 1412, 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 to participate in and receive benefits under the Agriculture Risk Coverage Program and Price Loss Coverage 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 Agriculture Risk Coverage Program and Price Loss Coverage Program.

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

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.**

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If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.es.cr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.