

Tract Cropland Total: 49.90 acres

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**Tract Number** : 12414

Description : W DOUGLAS SEC 25

FSA Physical Location : ILLINOIS/IROQUOIS ANSI Physical Location

: ILLINOIS/IROQUOIS

**BIA Unit Range Number** 

**HEL Status** 

: NHEL: No agricultural commodity planted on undetermined fields

**Wetland Status** 

: Wetland determinations not complete

**WL Violations** 

: None

Owners

: EUGENE MERKLE IRR TRUST, PATRICIA MERKLE TR

Other Producers

: JARED T KEIGHER, JOHN MERKLE

Recon ID

: 17-075-2019-48

Tract Land Data							
Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
53.68	49.90	49.90	0.00	0.00	0.00	0.00	0.0

ILLINOIS

**IROQUOIS** 

Form: FSA-156EZ

United States Department of Agriculture

Farm Service Agency

Abbreviated 156 Farm Record

FARM: 14796

Prepared: 6/10/25 11:56 AM CST

Crop Year: 2025

Troot	12/11	1 Conti	nued

Tract 12414 Con	tinued						
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	CRP	MPL	DCP Ag. Rel Activity	SOD
0.00	0.00	44.40	0.00	5.50	0.00	0.00	0.00

DCP Crop Data							
Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield				
Corn	24.31	0.00	118				
Soybeans	19.81	0.00	38				

0.00 44.12 **TOTAL** 

NOTES

CRP-1 (05-05-25)

## U.S. DEPARTMENT OF AGRICULTURE

Commodity Credit Corporation

3. CONTRACT NUMBER

8. SIGNUP TYPE: Continuous 2. SIGN-UP NUMBER 61

## **CONSERVATION RESERVE PROGRAM CONTRACT**

12735A

1. ST. & CO. CODE & ADMIN. LOCATION

4. ACRES FOR ENROLLMENT 5.50

5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)
IROQUOIS COUNTY FARM SERVICE AGENCY
1001 EAST GRANT STREET SUITE B
WATSEKA, IL60970-0100

6. TRACT NUMBER
12414

7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2024

TO: (MM-DD-YYYY) 09-30-2034

5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (815) 432-3946 x2

INSTRUCTIONS: RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (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 receipt of a copy of the Appendix/Appendices for the applicable contract period. The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.

9A. Rental Rate Per Acre \$ 249.69	10. Identification	on of CRP Land	(See Page 2 for ac	Iditional space)	
9B. Annual Contract Payment \$1,373.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	12414	0003	CP21	5.50	\$ 770.00
(Item 9C is applicable only when the first year payment is prorated.)					

## 11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JOHN MERKLE 533 N LOMBARD AVE LOMBARD, IL60148-1715	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) EUGENNE MERKLE IR TRUST \$33 N LOWBARD AVE LOMBARD, IL60148-1715	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) PATRICIA MERKLE TR 4JOIN MERKLE 533 N LOWBARD AVE LOMBARD, IL60148-1715	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)

## 12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE

B. DATE (MM-DD-YYYY)

NOTE: Privacy Act Statement: 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 the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334), the Further Continuing Appropriations and Other Extensions Act, 2024 (Pub. L. 118-22), the American Relief Act, 2025 (Pub. L. 118-158), and the Conservation Reserve Program 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve 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 Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1).

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