

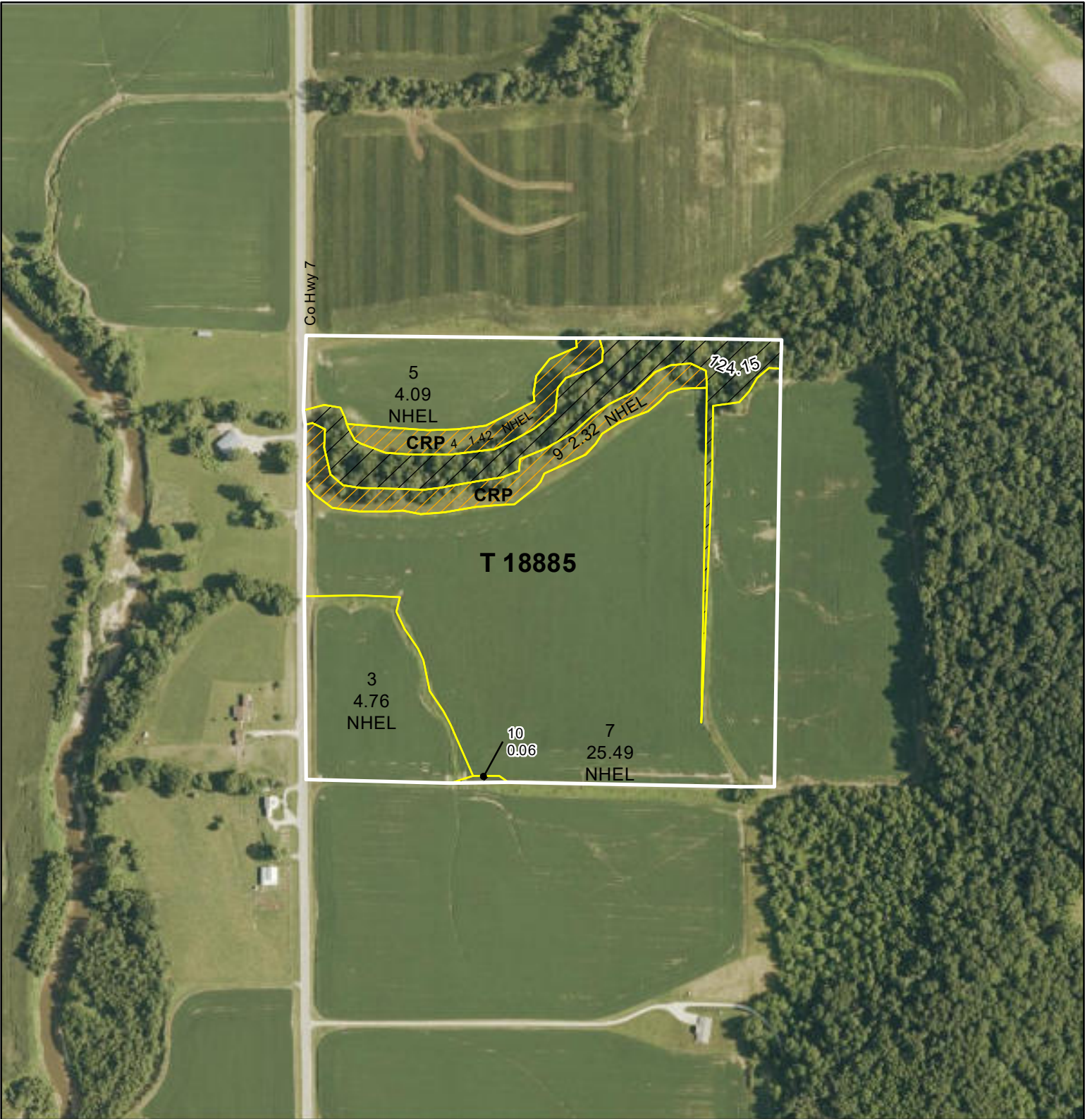
CRP INFO
CRP CONTRACTS, MAPS AND CPOS
TRACT 4



ELIZABETH L LACY ESTATE

PIKE CO ILLINOIS 564± ACRES
OFFERED IN 5 TRACTS

RANCHANDFARMAUCTIONS.COM



Common Land Unit

Non-Cropland	Conservation Reserve Program
clu_classification_code	
Cropland	Tract Boundary

street100k_1_il_utm

2025 Program Year
Map Created May 12, 2025

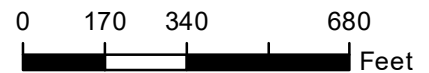
Farm 10719
Tract 18885

Wetland Determination Identifiers

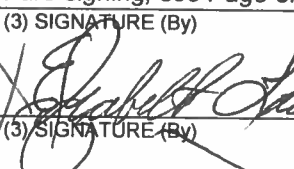

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions



Tract Cropland Total: 38.08 acres



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).

CRP-1 (07-06-20)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1. ST. & CO. CODE & ADMIN. LOCATION 17 149		2. SIGN-UP NUMBER 55	
CONSERVATION RESERVE PROGRAM CONTRACT				3. CONTRACT NUMBER 11,618		4. ACRES FOR ENROLLMENT 3.74	
				6. TRACT NUMBER 18885		7. CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 10-01-2021 09-30-2036	
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) PIKE COUNTY FARM SERVICE AGENCY 1319 W. WASHINGTON ST. PITTSFIELD, IL 62363-0000				8. SIGNUP TYPE: Continuous			
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (217) 285-5448 x2				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. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.			
9A. Rental Rate Per Acre \$ 259.46		10. Identification of CRP Land (See Page 2 for additional space)					
9B. Annual Contract Payment \$ 970.00		A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share	
9C. First Year Payment \$		18885	0004	CP21	1.42	\$ 199.00	
(Item 9C is applicable only when the first year payment is prorated.)		18885	0009	CP21	2.32	\$ 325.00	
11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)							
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) ELIZABETH LACY 349 W FAYETTE ST PITTSFIELD, IL 62363-1878		(2) SHARE 100.00 %	(3) SIGNATURE (By) 		(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(5) DATE (MM-DD-YYYY) 8-6-21
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)		(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)		(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) 08-25-2021
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 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) and 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). 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.							

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, audiotope, 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.

RECEIVED

AUG 06 2021

Pike County FSA

Date Printed: 06/17/2021

MLK
8-6-21

PARTICIPANT ELIZABETH LACY	COUNTY AND STATE Pike County, Illinois	PROGRAM AND CONTRACT NUMBER 11.618	FUND CODE
LAND UNITS OR LEGAL DESCRIPTION Tract: 18885 Fields: 4, 9	WATERSHED	ACRES 3.74	EXPIRATION DATE 9/30/2036

Contract Item 1 Filter Strip (393)

CRP Re-enrollment - Maintain existing filter strip to meet the planned CRP objectives.

Fields: Tract: 18885 Fields: 4, 9

Contract Item	PLANNED CONSERVATION TREATMENT	Planned Amount	Unit Cost	Cost Share Rate/Method	Completion Schedule and Estimated Cost Share or Payment by Year												
					2022	2023	2024	2025	2026	2027	2028	2029	2030	2031			
1	Filter Strip (393)	3.74 Ac		\$240	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
1a	Seed - Filter Strips (CRPSEED 21)	3.74 Ac	\$72.00/Ac	50% AM	135												
1b	Site Prep and Seeding (No Seed Costs) - Grass (IL2 SP GRASS)	3.74 Ac	\$56.32/Ac	50% AM	105												


RECEIVED

AUG 25 2021

PARTICIPANT ELIZABETH LACY	COUNTY AND STATE Pike County, Illinois	PROGRAM AND CONTRACT NUMBER 11,618	FUND CODE
LAND UNITS OR LEGAL DESCRIPTION Tract: 18885 Fields: 4, 9	WATERSHED	ACRES 3.74	EXPIRATION DATE 9/30/2036


Total Cost-Share or Payment by Year											
Year	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	Total Payment
Amount(\$)	240										\$240

NOTES: A. All items numbers on form NRCS-CPA-1155 must be carried out as part of this contract to prevent violation.
 B. When established, the conservation practices identified by the numbered items must be maintained by the participant at no cost to the government.
 C. All cost share rates are based on average cost (AC) with the following exceptions.
 AA = Actual costs not to exceed average cost. FR = Flat rate. NC = Non cost-shared. AM = Actual cost not to exceed the specified maximum.
 NP = Non-Participant Payment.
 D. By signing, the participant acknowledges receipt of this conservation plan including this form NRCS-CPA-1155 and agrees to comply with the terms and conditions here of.

Certification of Participants
Signature 
ELIZABETH LACY
Date 8-24-21

U.S. DEPARTMENT OF AGRICULTURE NATURAL RESOURCES CONSERVATION SERVICE		CONSERVATION PLAN OR SCHEDULE OF OPERATIONS		NRCS-CPA-1155 03/2019
PARTICIPANT ELIZABETH LACY	COUNTY AND STATE Pike County, Illinois	PROGRAM AND CONTRACT NUMBER 11.1018	FUND CODE	
LAND UNITS OR LEGAL DESCRIPTION Tract: 18885 Fields: 4, 9	WATERSHED	ACRES 3.74	EXPIRATION DATE 9/30/2036	


Signature of Reviewing Officials

NRCS Approving Official
 Signature  Date 8-24-21

Approved By
 Signature _____ Date _____

Pike County Soil and Water Conservation District

Signature **BRADLEY SMITH (Affiliate)** Digitally signed by BRADLEY SMITH (Affiliate) Date: 2021.08.24 11:08:26 -05'00'

Farm Service Agency
 Signature  Date 8/25/21

Approving Official

PRIVACY ACT

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 522a). Furnishing this information is voluntary; however failure to furnish correct, complete information will result in the withholding or withdrawal of such technical or financial assistance. The information may be furnished to other USDA agencies, the Internal Revenue Service, the Department of Justice, or other state or federal law enforcement agencies, or in response to orders of a court, magistrate, or administrative tribunal.

This information collection is exempted from the Paperwork Reduction Act under 16 U.S.C. 3801 note and 16 U.S.C. 3846.

NONDISCRIMINATION STATEMENT

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 [How to File a Program Discrimination Complaint](#) 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.

Persons with disabilities who require alternative means for communication of program information (e.g., Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).