UNITED STATES DEPARTMENT OF AGRICULTURE
Farm Service Agency
Washington, DC 20250

Common Management and Operating Provisions 1-CM (Revision 3)	Amendment 27

Approved by: Deputy Administrator, Farm Programs

Amendment Transmittal

A Background

In response to many questions and concerns received about signature authority and power of attorney regulations and procedure:

- clarifications have been made to applicable paragraphs, tables, and exhibits
- a change has been made related to general partnerships
- a question and answer exhibit has been added to address common questions and concerns.

B Reasons for Amendment

Paragraph 707 has been amended to:

- add policy for obtaining and maintaining documentation to support signature authority
- add an exception for husband/wife joint ventures
- address husband and wife joint ventures.

Paragraph 709 has been amended to:

- provide rule changes and examples for signature authority for general partnerships
- reflect changes made in subparagraph 709 A
- provide updated examples.

Subparagraph 710 C has been amended to correct example 4.

Subparagraphs 711 A and B have been amended to address LLC's.

Subparagraph 728 C has been amended to provide that FSA-211's are **not** effective until they are correctly executed.

Exhibit 51 has been added to provide signature/power of attorney questions and answers.

B Reasons for Amendment (Continued)

Exhibit 60 has been amended to:

- correct subparagraph A, Item 6 A-C
- add procedure to subparagraphs H and I about when a grantor of power of attorney is a corporation.

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Section 3 General Rules of Authority

707 Policy on Evidence of Authority and Signature Limitations

A General Rule for Signature Authority

[7 CFR Part 718.9] County Offices shall verify that a signature authority is on file in the County Office before accepting a signature on any program or related documents on behalf of another. See subparagraph B for special rules for spouses.

--**The following types of evidence for authorized signature may be acceptable, if dated on or before the signature date. COC may require any of the following for authentication:**--

- presentation of the original document, such as corporate charter, bylaws, court orders of appointment, trust agreement, last will and testament, articles of partnership
- FSA-211
- notarization
- an affixed official seal.

Example: Documentation, such as corporate charter, indicating who is authorized to sign for a corporation must be on file in the County Office before County Office may accept a signature on any program document for the corporation.

Note: Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State and County Offices.

County Office may also require the person receiving authority to:

- provide ID
- file a signature with the County Office.

*--B Maintaining Documentation

The entire document presented does **not** have to be maintained. However, all applicable pages that identify the entity, pertinent authority, and any limitations, etc, **must** be maintained.

Example: If the trust is represented to be an irrevocable trust, procedure in 1-PL requires review of the trust agreement to determine if it contains a provision that would result in the trust being considered a revocable trust for payment limitation purposes (see 1-PL, subparagraph 362 B). All pages needed for all programs **must** be maintained.**--***

707 Policy on Evidence of Authority and Signature Limitations (Continued)

C Signature Authority for Spouses

Spouses:

- may sign documents on behalf of each other for FSA and CCC programs in which either has an interest, effective August 1, 1992, unless written notification denying a spouse this authority has been provided to the County Office

- shall not sign FSA-211 on behalf of the other

- shall not sign on behalf of the other as an authorized signatory for partnerships, joint ventures, corporations, or other similar entities

--Exception:** Spouses may sign on behalf of each other for a husband/wife joint venture with a permanent tax ID number, unless written notification denying a spouse authority has been provided to the County Office (see subparagraph 710 F).**--

Note: See paragraphs 709 through 711.

- must have a power of attorney on file or sign personally for claim settlements, such as promissory notes.

Important: A spouse's authority to sign documents on behalf of the other spouse does **not**:

- override the FOIA/PA requirements of 5 U.S.C. 552 and 552A

- entitle a spouse to review or receive Agency records of the other spouse.

Note: See 2-INFO for more information about FOIA/PA requirements and Agency records.

County Office shall not provide Agency records of a producer to that producer's spouse unless written authority to provide such records has been provided to the County Office.

Example: Joe and Jane Black, husband and wife, may sign documents on behalf of each other because no written notification denying such authority has been provided to the County Office. Jane Black has requested a copy of Joe Black's Agency records. County Office shall not provide the records to Jane Black unless Joe Black provides the County Office written authority to release the records to Jane Black.

708 Individual (Continued)

B Acceptable Signatures for Spouses

The signature of a spouse on behalf of the other shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
  - name of individual signing in representative capacity
  - name of individual signing in representative capacity and name of spouse
  - name of individual signing in representative capacity followed by “spouse”.

C Spouse Signature Examples

Following are examples of signatures that may be accepted when one spouse signs on behalf of the other spouse.

Name on Document	Acceptable Signatures
John R. Smith	*by Sharon H. Smith* *John R. Smith by Sharon H. Smith* *by Sharon H. Smith, Spouse* *Sharon H. Smith for John H. Smith*
John R. Smith Sharon H. Smith	*John R. Smith* *by John R. Smith* *John R. Smith* *Sharon H. Smith by John R. Smith*

Note: Other forms may be accepted only if approved by DAFP.

709 General Partnership

A General Rules

*--A partnership must provide the Articles of Partnership. If no Articles of Partnership are available, IRS documents such as Form 1065 (Schedule K-1) showing member and their respective shares may be used.

Note: Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State and County Offices.

Any member of a general partnership may sign for the general partnership and bind all members unless the Articles of Partnership are more restrictive.

Note: This policy is adopted by FSA because the majority of States have laws that provide for this; however, this is **not** the case for any other business enterprise.

A member of a general partnership may execute FSA-211 to appoint an attorney-in-fact to act on behalf of the general partnership and bind all members, unless the Articles of Partnership restrict member's authority.--*

Note: Certain FSA and CCC forms, such as CCC-502's, require each member's individual signature. Accordingly, each member or individual authorized by the members, **must** sign such forms regardless of whether an individual has authority to act on behalf of the general partnership.

Spouses shall **not** sign on behalf of each other as an authorized signatory for a partnership. Individuals that are appointed as an attorney-in-fact for another individual shall **not** sign for that individual as an authorized signatory for a partnership.

Example: John Smith is a member of ABC partnership. The articles of partnership provide John Smith the authority to sign for the partnership and bind all members of the *--partnership. John Smith's spouse is not a member of the partnership and shall **not** sign for John Smith as the authorized signatory for ABC partnership. John Smith appointed Bill Brown as his personal attorney-in-fact on FSA-211. Bill Brown shall **not** sign for John Smith as the authorized signatory for ABC partnership.

A spouse that is not a member of the partnership may sign on behalf of the other spouse's individual interest in a partnership, unless a written notification denying a spouse this authority is provided to County Office. Individuals that are appointed as an attorney-in-fact for another individual may sign for only that individual's interest in a partnership.

Example: John Smith and Fred Brown have formed a general partnership called JF Farms. Other than the 2 general partners, no other person has been authorized by JF Farms to sign on behalf of the partnership. John's wife, Sally Smith, may sign as attorney-in-fact for John's individual interest in the partnership. Sally **may not** sign for the general partnership as she has not been authorized to sign.--*

709 General Partnership (Continued)

A General Rules (Continued)

*--A general partnership must have a permanent tax ID number to receive payments as a partnership.

If a permanent tax ID number is not available, FSA doesn't consider them a general partnership. The individual may receive payments if they are requesting payments as individuals and complete all supporting documentation as individuals.--*

* * *

B Examples of Signature Requirements for General Partnerships

Following are examples of signature requirements for general partnerships.

Example 1:

ABC General Partnership:

- has a permanent tax ID number
- is comprised of Jane Black, Bob Green, and Mike Brown.

*--Partnership papers are on file for ABC General Partnership and contain no specifications or restrictions regarding signature authority.

ABC General Partnership is a producer on FSN 100 and elects to enroll FSN 100 in 2005 DCP. ABC General Partnership, not the individual members, shall be listed on CCC-509.

Because there are no specifications or restrictions in the partnership papers, any 1 of the partners (Jane Black, Bob Green, or Mike Brown) may sign CCC-509 on behalf of ABC General Partnership and bind all members.--*

709 General Partnership (Continued)

B Examples of Signature Requirements for General Partnerships (Continued)

Example 2:

XYZ General Partnership:

- has a permanent tax ID number
- is comprised of John White, Jack Blue, and Mary White.

--**There are no partnership papers for XYZ General Partnership. However, IRS documents have been provided, showing the members and their respective shares. In addition, **all--members of XYZ General Partnership signed and executed FSA-211 appointing Mr. White attorney-in-fact for XYZ General Partnership.

--**XYZ General Partnership is a producer on FSN 200 and elects to enroll FSN 200 in**--2005 DCP. XYZ General Partnership, not the individual members, shall be listed on CCC-509 *** * ***.

***--**Because Mr. White is authorized to act for XYZ General Partnership, Mr. White can sign CCC-509 on behalf of XYZ General Partnership. FSA-211 does **not** negate the provision of subparagraph A. Either Jack Blue or Mary White would also have authority to sign the CCC-509 on behalf of XYZ General Partnership.

Example 3:

LMB General Partnership:

- has a permanent tax ID number
- is comprised of Steve Gray, Tim Silvers, and Gary Gold.

Partnership papers are on file for LMB General Partnership, specifying that Gary Gold shall sign all documents for LMB General Partnership.

LMB General Partnership is a producer on FSN 300 and elects to enroll FSN 300 in the 2005 DCP. LMB General Partnership, not the individual members, shall be listed on CCC-509. Because there are specific restrictions in the partnership papers on file stating that Gary Gold shall sign all documents for LMB General Partnership, only Gary Gold may sign the CCC-509 on behalf of LMB General Partnership, which will bind all members.**--***

709 General Partnership (Continued)

C Acceptable Signatures

The signature for an individual authorized to sign for a general partnership shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
  - individual’s name
  - individual’s name and capacity
  - individual’s name, capacity, and name of partnership.

D Partnership Signature Examples

Following are examples of signatures that may be accepted for general partnerships.

Name on Document	Acceptable Signature
John R. Smith & Sons, a Partnership	• *by George C. Smith* • *by George C. Smith, Partner*
Smith & Roe Partnership	• *by John R. Smith* • *Smith and Roe Partnership, by John R. Smith, Partner*
Jones and Smith, a Partnership	• *by Richard H. Roe* • *Richard H. Roe, Agent for Jones and Smith, a Partnership*
XYZ Company	• *by Richard Roe* • *XYZ Company by Richard Roe*

Note: Other forms and title may be accepted only if approved by DAFP.

710 Joint Venture (Continued)

C Examples of Signature Requirements for Joint Ventures (Continued)

--Note:** Because RST Joint Venture does not have a permanent ID number, payments**-- cannot be issued to the joint venture. When a joint venture does not have a permanent ID number, payments must be issued to the individual members using their respective ID numbers.

Because Mr. Jackson is authorized to act for RST Joint Venture, only Mr. Jackson is required to sign CCC-509 for RST Joint Venture zero share.

In addition, each member (Mr. Jackson, Mrs. Doe, and Mrs. Green) must sign for their individual interest on CCC-509.

D Acceptable Signatures

The signature for an individual authorized to sign for a joint venture shall consist of 1 of the following:

- individual's name
- individual's name and capacity
- individual's name, capacity, and name of the joint venture.

E Joint Venture Signature Examples

The following are examples of signatures that may be accepted for joint ventures.

Name on Document	Acceptable Signatures
Bob and Bill Joint Venture	• *by Joe Black* • *Joe Black for Bob and Bill Joint Venture*
Jones and Smith Joint Venture	• *by Jim Smith* • *Mary Brown, POA for Jones and Smith Joint Venture*

*--F Husband and Wife Joint Ventures

Spouses may sign documents on behalf of each other for a husband and wife joint venture with a permanent tax ID number, effective August 1, 1992, unless written notification denying a spouse this authority has been provided to the County Office.**--***

711 Corporations, Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies, and Other Similar Entities

A * * * Authorization

***--**A copy of either of the following applicable documents will authorize an officer, manager, or member to sign:

- the corporate charter, bylaws, Articles of Organization, or partnership papers executed according to State law, that designates the officer, member, or manager**--***

- resolution by the corporation's board of directors, signed by the corporation's secretary or other officer other than the designated agent

•*****--signed corporate minutes.**--***

Notes: The identification/listing of officers and/or shareholders of a corporation does not, by itself, provide sufficient evidence of who has authority to act on behalf of the corporation.

Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State and County Offices.

Spouses shall not sign on behalf of each other as an authorized signatory for a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity. Individuals who are appointed an attorney-in-fact for another individual shall not sign for that individual as an authorized signatory for a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity.

Example: Joe Blue is a member of B Inc. The charter for B Inc. authorizes Joe Blue to sign for the corporation. Joe Blue's spouse shall not sign for Joe Blue as the authorized signatory for B Inc. Joe Blue appointed Mary Smith as his personal attorney-in-fact on FSA-211. Mary Smith shall not sign for Joe Blue as the authorized signatory for B Inc.

Spouses may sign on behalf of each other's individual interest in a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity; unless a written notification denying a spouse this authority is provided to County Office. Individuals who are appointed as an attorney-in-fact for another individual may sign for that individual's interest in a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity.

Example: Jane Brown is a member of JBB Inc. The corporate charter for JBB Inc. requires all members to sign documents for the corporation. Jane Brown's spouse may sign for Jane Brown's individual member interest in the corporation. Jane Brown appointed Mike Black as her personal attorney-in-fact on FSA-211. Mike Black may sign for Jane Brown's individual member interest in the corporation.

711 Corporations, Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies, and Other Similar Entities (Continued)

*--B Redelegation of Signature Authority

Use the following table to determine how an agent may be granted authority to sign for a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity.

IF...	THEN...
the entity documents allow for redelegation of signature authority	the person authorized to sign for the entity according to subparagraph A may redelegate their authority to an agent on FSA-211. **Notes:** See Section 4 for power of attorney. See paragraph 707 if the agent granted signature authority is an entity. **Important:** The person authorized to sign for the entity according to subparagraph A shall not redelegate this authority if the entity documents do not allow for redelegation of signature authority. **Example 1:** The XYZ Corporation charter designates Mary Brown as the corporate officer with signature authority for the corporation. The corporate charter provides that the authority to sign for XYZ Corporation may be redelegated. Mary Brown may redelegate her signature authority for XYZ Corporation to an agent by completing FSA-211. **Example 2:** The ABC Corporation charter designates Mike Jones as the corporate officer with signature authority for the corporation. The corporate charter does not indicate that the authority to sign for ABC Corporation may be redelegated. Mike Jones shall not redelegate his signature authority for XYZ Corporation.

--*

711 Corporations, Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies, and Other Similar Entities (Continued)

B Redelegation of Signature Authority (Continued)

IF...	THEN...

the entity documents do **not** allow for redelegation of signature authority	the following may be used to authorize an agent to sign for the entity for:
	
	• corporations, either of the following:
	
	  • FSA-211 signed by all officers
	
	  • resolution of the board of directors, signed by an officer of the corporation, providing name of agent authorized to sign for the corporation
	
	• limited partnerships, limited liability partnerships, *** * *** and other similar entities, FSA-211 signed by all members of the entity
	
	•***--**limited liability companies, FSA-211 signed by all members or authorized managers.**--***
	
	Notes: Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State and County Offices.
	
	--**An individual serving as agent may **not** individually redelegate that authority on FSA-211.**--
	
	Example: The ABC Corporation charter designates Mike Jones as the corporate officer with signature authority for the corporation. The corporate charter does not indicate that the authority to sign for ABC Corporation may be redelegated. Mike Jones shall not redelegate his signature authority for XYZ Corporation. However, an agent may be authorized to sign for ABC Corporation if all officers of ABC Corporation sign FSA-211.
	
	Notes: See Section 4 for power of attorney.
	
	See paragraph 707 if the agent granted signature authority is an entity.

728 Policy for Powers of Attorney (Continued)

B FSA-211 (Continued)

FSA-211 authority does **not** provide the appointed attorney-in-fact the authority to sign or act on behalf of the grantor for any of the following:

- COC elections

*** * ***

- FSA-211
- requesting electronic access
- any program that is not a FSA or CCC program, such as TAA program.

Notes: See subparagraph F for procedure about routing payments to financial institution accounts.

See subparagraph G for procedure about executing CCC-605 using FSA-211.

FSA shall:

- process and record properly executed FSA-211's
- **not** process nor record FSA-211 that is:
  - incomplete
  - inaccurate
  - not properly witnessed by an FSA employee or acknowledged by a valid Notary Public.

    Note: When the grantor is a corporation, the corporate seal of the grantor may be accepted in place of FSA employee witness or notarization.

See Exhibit 60 for:

- instructions for completing FSA-211
- instructions for completing FSA-211A
- an example of FSA-211
- an example of FSA-211A.

728 Policy for Powers of Attorney (Continued)

C Duration

***--**FSA-211 shall remain in full force and effect from the date the FSA-211 is correctly executed until 1 of the following occurs:

- grantor cancels FSA-211 in writing by either of the following:
  - providing written notification of cancellation of FSA-211 to the County Office

    Important: The County Office shall attach written notification to the applicable FSA-211.

  - writing "CANCELED" on original FSA-211, and initialing and dating
- either grantor or appointed attorney-in-fact:
  - dies
  - becomes incompetent or incapacitated
  - is a legal entity, and the entity becomes dissolved
- if FSA-211 is for specific FSN's only and applicable FSN's no longer exist.

The County Office shall immediately delete FSA-211 data from the automated power of attorney file when FSA-211 is no longer in effect.**--***

D Changes

Changes made to an accepted power of attorney require the authority to be reissued on a new FSA-211 *** * ***.

Note: Transferring a farming operation to a different County Office does not invalidate a power of attorney.

Signature Authority/Power of Attorney Questions and Answers

A Signature Authority

Question: When signing documents with pre-printed legal names on them, such as James David Doe, would Jim D. Doe be an acceptable signature?

Answer: Yes, per subparagraph 678 A, signatures may contain variations that do not cause the signature to be in disagreement. Jim D. Doe would be acceptable in this case.

Question: A County Office is required to review and maintain entity documents to make signature authority determinations. Is it required that County Offices copy the entire entity document and keep them on file?

Answer: The entire document does not have to be maintained. However, all applicable pages that identify the entity, pertinent authority, and any limitations, etc. are maintained.

> **Example:** If the trust is represented to be an irrevocable trust, procedure in 1-PL requires review of the trust agreement to determine if it contains a provision that would result in the trust being considered a revocable trust for payment limitation purposes (see 1-PL, subparagraph 362 B). At a minimum, all pages needed for all programs **must** be maintained.

Question: During a County Office review, it was discovered that copies of proper signature authority documentation were not on file to validate a customer's signature; for example, on an application, contract, or report. Can the County Office obtain the missing documentation after the fact?

Answer: The County Office may secure the documentation, after the fact, to validate the applicable signatures **only** if the respective documentation is valid and was in existence at the time the signature was obtained. If documentation that includes FSA-211 was not in existence, the signature is invalid.

Question: Can any member of a General Partnership sign on behalf of the partnership without specific authorization?

Answer: Yes, any member of a General Partnership may sign on behalf of the partnership and bind all members, unless the articles of partnership are more restrictive (see paragraph 709).

Question: Do trust agreements have to bear signatures or a certification by the officer of the issuing court?

Answer: No, trusts are exempt from this requirement (see subparagraph 713 B).

Signature Authority/Power of Attorney Questions and Answers (Continued)

A Signature Authority (Continued)

Question: Several paragraphs in procedure indicate that a properly executed affidavit on file before July 20, 2004, may continue to be used as acceptable signature authority. Why can affidavits no longer be used as acceptable signature authority?

Answer: An affidavit is a written declaration of facts confirmed by the oath or affirmation of the party making the declaration or statement of fact and is **not** an instrument that is used to convey authority upon an individual or entity; therefore, we no longer consider them as acceptable evidence for signature authority.

Question: What constitutes a valid resolution? Do they have to be notarized or witnessed?

Answer: A valid resolution by a board of directors is dependent on the corporate charter or bylaws. Each charter and/or set of bylaws is unique and may contain certain requirements for a resolution to be valid. Some do require a notarized signature, while others may only require a corporate seal or may require the witness of a specific officer. Corporate charters and bylaws can and will vary.

Note: The County Office is required to have a copy of the charter or bylaws on file per subparagraph 711 A and shall ensure that the resolution is valid according to the applicable charter and/or bylaws.

Question: If a trust or an estate appoints co-trustees or co-executors, do we need to obtain both applicable signatures?

Answer: Generally only 1 signature would be required, although County Offices should thoroughly review applicable documents to ensure that multiple signatures are not specifically required and/or other signature restrictions do not apply.

Question: When someone is signing in a representative capacity, is a “by” or “for” required to accompany their signature?

Answer: All signature examples in 1-CM about someone signing in a representative capacity note that an indicator, such as “by” or “for”, is required to illustrate that the individual is signing in a representative capacity (see subparagraphs 681 B, 708 B, 709 D, 711 C, 712 A, 713 D, 714 A, 715 D and 728.5 A & B).

Signature Authority/Power of Attorney Questions and Answers (Continued)

A Signature Authority (Continued)

Question: Are illegible signatures acceptable? If so, how are they to be handled?

Answer: Yes; however, if the signature is illegible, the person accepting the signature **must** know the correct name of the person signing and initial the document **(s**ee subparagraph 676 A).

Question: What establishes signature authority for an estate, trust, conservatorship, or guardianship?

Answer: Signature authority is limited to the specifications of the documents listed in subparagraph 713 A.

Notes: If applicable documentation is not specific, signature authority may be redelegated.

Applicable court orders need to be carefully reviewed.

Question: 1-DCP, subparagraph 390 E allows producers to submit written leases, rental agreements, or other documents signed by the owner as proof that the producer has the land cash leased for the applicable FY. If a written lease is submitted and the lease was signed by someone other than the owner as the owner's representative, are County Offices required to validate signature authority?

Answer: No, FSA signature authorities apply to signatures that we require from our customers on FSA forms or certifications to FSA. FSA requirements do **not** apply to documents signed for other purposes, such as leases, bank documents, and other documents created for other purposes. 1-CM, subparagraph 707 A references program documents, such as a NAP application and related documents such as AD-1026, **must** contain valid signatures.

Question: Can a general partnership appoint an attorney-in fact on a FSA-211?

Answer: Yes, unless the Articles of Partnership or other documents provided by the partnership prohibit it. Any member of the partnership may execute an FSA-211 unless the Articles of Partnership restrict the authority for any member to bind the partnership (see paragraph 709).

Question: Are joint ventures allowed to appoint a power of attorney?

Answer: Yes, a joint venture may execute a FSA-211 to appoint an attorney-in-fact; however, all members of the joint venture, including the appointed attorney-in-fact, if a member of the joint venture must sign the FSA-211/FSA-211A.

Signature Authority/Power of Attorney Questions and Answers (Continued)

B Power of Attorney

Question: Why are we required to identify the special designations such as "routing payments to financial institutions", "Executing CCC-605", and "Executing CCC-526"on a FSA-211? Wouldn't checking "All current programs" and "All actions" suffice?

Answer: These special designations were intentionally added to procedure in 1-CM for completing a FSA-211 to ensure that the grantor is fully aware of the obligations that are associated with these specific transactions.

Question: During a County Office review it was discovered that FSA program documents had been signed by a representative and a valid FSA-211 was not on file to grant this authority. Can the County Office obtain a new FSA-211 to retroactively make the signature good?

Answer: No, an FSA-211 is effective **only** from the date the FSA-211 is correctly executed, and forward (see subparagraph 728 C).

--FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet--

A Completing FSA-211

Use the following instructions to complete FSA-211. It is the producer's responsibility to provide a copy of FSA-211 to the applicable crop insurance agent.

Item Number/ Section	Instructions
1	Enter the name of the person to whom power or attorney is being granted (attorney-in-fact).
2	Enter the address of the person to whom power of attorney is being granted (attorney-in-fact).
3	Enter the county of the person to whom power of attorney is being granted (attorney-in-fact).
4	Enter the State of the person to whom power of attorney is being granted (attorney-in-fact).
5	If an: • **individual** is granting authority to act on their behalf, enter the name of the person granting the power of attorney authority (Grantor) • **entity**, such as corporation, partnership, trust, joint venture, or other similar entity is granting authority to act for the entity and bind all members, enter the name of the entity granting the power of attorney authority (Grantor).
A	Check the applicable CCC and FSA programs for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor. To have the appointed attorney-in-fact act on specific CCC and FSA programs not listed, enter the specific CCC and FSA programs in item A 11, "Other".
B	Check the applicable CCC and FSA transactions for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor. To have the appointed attorney-in-fact act for specific transactions not listed, only specific farms, or only in specific counties, enter the specific CCC and FSA transactions, farm numbers, and/or counties, as applicable, in item B 7, "Other". **Important:** The appointed attorney-in-fact shall **not** have the authority to route payments to financial institution accounts on behalf of the grantor unless **both** of the following are met according to paragraph 728: • grantor selects item B 7 • grantor enters "routing payments to financial institution accounts".
C	Enter the specific FCIC crops for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor. To have the appointed attorney-in-fact act for **all** FCIC crops, enter "ALL".
D	Check the applicable FCIC transactions for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor. To have the appointed attorney-in-fact act on specific FCIC transactions not listed, enter the specific transactions in item D 6, "Other".

FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet (Continued)

A Completing FSA-211 (Continued)

Item Number/ Section	Instructions
6 A-C	If the grantor is an individual, the person granting the authority must sign, date, and enter their Social Security number in items 6 A, B, and C, respectively. If the grantor is an entity, such as a *** * *** general partnership, trust, joint venture, or other similar entity, and there is no individual already authorized to act for the entity, **all** members of the entity must sign FSA-211. *** * *** ***--**If the grantor is a corporation and there corporate documents do not provide for redelegation of authority, **all** officers of the corporation or members of the entity **must** sign FSA-211. If there are no more than 2 member/officer signatures are required:**--*** • check box in item 6D • attach completed FSA-211A to FSA-211. **Note:** Check the box in item 6D only when FSA-211A will be attached to FSA-211. See item 7 if the grantor is an entity and there is an individual already authorized to act for the entity. **Important:** Signature must be witnessed by an FSA employee who verifies the identity of the grantor according to item 8. Alternatively, FSA-211 may be acknowledged by a valid Notary Public according to item 9.
7 A-D	If the grantor is an entity, such as a corporation, partnership, trust, or joint venture, the person or persons granting the authority must sign, enter their official title, date, and enter the identification number of the entity in items 7 A, B, C, and D, respectively. See item 6 for individuals. **Important:** Signatures must be witnessed by an FSA employee who verifies the identity of the grantor according to item 8. Alternatively, FSA-211 may be acknowledged by a valid Notary Public according to item 9.
8 A-C	At least one FSA employee must witness the signature in item 6 or 7, as applicable. **The FSA employee must verify the grantor's identity by either personal knowledge or by reviewing the grantor's government-issued picture identification, such as a valid driver's license.** The employee must sign, date, and enter his or her official position in items 8 A, B, and C, respectively. Notarized FSA-211's may be accepted instead of forms witnessed by an FSA employee. See item 9. When the grantor is a corporation, the corporate seal of the grantor may be accepted in place of FSA employee witness or notarization.
9 (a)-(c)	If the signatures in item 6 or 7, as applicable, are not witnessed by at least one FSA employee, **FSA-211 must be acknowledged by a valid Notary Public in item 9**. The Notary Public's signature, State and county of commission, and certification are required.
10 (a)-(e)	Enter the county and State of the County Office the FSA-211 is served in items 10 (a) and (b), respectively. Enter the day, month, and year the properly completed FSA-211 was served to the County Office in items 10 (c), (d), and (e), respectively. **Note:** FSA-211 is effective **only** when **all** the following are met: • all required items are completed • a valid signature and date is obtained, and witnessed or notarized • FSA-211 is served to the County Office.

FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet (Continued)

H Example of FSA-211 for General Partnership When All Members Signatures Are Required

The following is an example of FSA-211 for a general partnership when the partnership papers *--prohibit an individual from acting on behalf of the partnership. The partnership is comprised--* of 3 individuals who executed FSA-211 to appoint 1 of the members as attorney-in-fact for the partnership.

This form is available electronically. Form Approved - OMB No. 0560-0190

FSA-211
(07-26-05)

U. S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Commodity Credit Corporation - Federal Crop Insurance Corporation

POWER OF ATTORNEY

THE UNDERSIGNED does hereby appoint *(1)* John White, of *(2)* 999 My Street Leesburg *(3)* Loudoun County, State of *(4)* Virginia, the attorney-in-fact to act for *(5)* XYZ General Partnership in connection with Farm Service Agency and Commodity Credit Corporation program number(s) checked below. Checking any of the FSA or CCC programs does not have any impact as to the FCIC transactions checked below:

A. FSA and CCC PROGRAMS
(Check applicable program numbers)

- ☐ 1. All current programs.
- ☑ 2. All current and all future programs.
- ☐ 3. Direct and Counter-Cyclical Program except 2002 peanuts covered by Item A4.
- ☐ 4. 2002 Direct and Counter-Cyclical Peanut Program.
- ☐ 5. Peanut Quota Buy-Out Program.
- ☐ 6. Noninsured Crop Disaster Assistance Program.
- ☐ 7. Tobacco programs.
- ☐ 8. Marketing Assistance Loans and Loan Deficiency Payments.
- ☐ 9. Conservation programs.
- ☐ 10. Milk Income Loss Contract Program.
- ☐ 11. Other *(Specify)*

B. Transactions for FSA and CCC Programs
(Check applicable program numbers)

- ☑ 1. All actions.
- ☐ 2. Signing applications, agreements, and contracts.
- ☐ 3. Election of bases and yields except peanut designation covered by Item B4.
- ☐ 4. Designation of peanut historical base and yield to a farm.
- ☐ 5. Making reports.
- ☐ 6. Conducting all marketing assistance loan and LDP transactions.
- ☐ 7. Other *(Specify)*

This form may also be used to grant authority to an attorney-in-fact to act on the grantor's behalf with respect to certain FCIC programs and crops. Checking any of the FCIC transactions does not have any impact as to the FSA or CCC transactions checked above:

C. FCIC CROPS
(Enter "All" or specify each crop and year)

1.
2.
3.
4.

D. TRANSACTION NUMBERS USED BY FCIC
(Check applicable numbers)

- ☐ 1. All actions.
- ☐ 2. Making application for insurance.
- ☐ 3. Reporting crop acreage and notice of damage reports.
- ☐ 4. Making claim for indemnity.
- ☐ 5. Making contract changes.
- ☐ 6. Other *(Specify)*

This Power of Attorney is valid in all counties in the United States unless otherwise noted. This power of attorney shall remain in full force and effect until *(1)* written notice of its revocation has been duly served upon FSA; *(2)* death of the undersigned grantor; or *(3)* incompetence or incapacitation of the undersigned grantor. The undersigned grantor shall provide separate written notice of revocation to the applicable crop insurance agent. This power of attorney shall not be effective until properly executed and served to a FSA Service Center.

AUTHORIZED SIGNATURES:

6A. Signature*(s)* of Grantor*(s) (Individual)*	B. Date *(MM-DD-YYYY)*	C. Social Security Number	D. For Grantors Signature Continuation, check here if FSA-211A is attached.
			☑

7A. Signature of Grantor *(Partnership, Corporation, Trust, etc.)*	B. Title	C. Date *(MM-DD-YYYY)*	D. Identification No. of Entity

8A. Witness Signature *(FSA Employee Only)*	B. Date *(MM-DD-YYYY)*	C. Official Position

9. Notary Public *(this form **shall** be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed).*

Signature *(a)* _____ State of *(b)* _____ County of *(c)* _____

10. This power of attorney was served to *(a)* Prince William County FSA Office, *(b)* State of Virginia and became effective this *(c)* 12 day of *(d)* September, *(e)* 2005.

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 and Rural Investment Act of 2002 (Pub. L. 107-171) and 7 CFR Part 718. The information will be used to legally document your opinion to appointing an attorney-in-fact, identify the person and authorities granted to the appointee. Furnishing the requested information is voluntary; however, failure to furnish the requested information will result in the individual or entity not be able to act as your attorney-in-fact. 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 286, 287, 371, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0190. The time required to complete this information collection is estimated to average 15 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. ***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, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.

***--FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet (Continued)**

I Example of FSA-211A

The following is an example of FSA-211A.

This form is available electronically.

Form Approved - OMB No. 0560-0190

FSA-211A
(07-26-05)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Commodity Credit Corporation - Federal Crop Insurance Corporation

POWER OF ATTORNEY SIGNATURE CONTINUATION SHEET
Attach to Form FSA-211

Attachment Pages 1 of 1

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 and Rural Investment Act of 2002 (Pub. L. 107-171) and 7 CFR Part 718. The information will be used to legally document your opinion to appointing an attorney-in-fact, identify the person and authorities granted to the appointee. Furnishing the requested information is voluntary; however, failure to furnish the requested information will result in the individual or entity not be able to act as your attorney-in-fact. 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 286, 287, 371, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0190. The time required to complete this information collection is estimated to average 15 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. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

1. Name of Attorney-In-Fact *(Item (1) from FSA-211)*	2. Name of Grantor *(Item (5) from FSA-211)*
John White	XYZ General Partnership

AUTHORIZED SIGNATURES

3A. Signature of Grantor /s/ John White	3B. Date *(MM-DD-YYYY)* 9/12/2005	3C. Social Security Number 999-99-9999
3D. Witness Signature *(FSA Employee Only)* /s/ Joe Green	3E. Date *(MM-DD-YYYY)* 9/12/2005	3F. Official Position Program Technician
3G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ State of _____ County of _____		
4A. Signature of Grantor /s/ Jack Blue	4B. Date *(MM-DD-YYYY)* 9/12/2005	4C. Social Security Number 999-99-9999
4D. Witness Signature *(FSA Employee Only)* /s/ Mike Jones	4E. Date *(MM-DD-YYYY)* 9/12/2005	4F. Official Position Program Technician
4G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ State of _____ County of _____		
5A. Signature of Grantor /s/ Mary White	5B. Date *(MM-DD-YYYY)* 9/12/2005	5C. Social Security Number 999-99-9999
5D. Witness Signature *(FSA Employee Only)* /s/ Sue Black	5E. Date *(MM-DD-YYYY)* 9/12/2005	5F. Official Position Program Technician
5G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ State of _____ County of _____		
6A. Signature of Grantor	6B. Date *(MM-DD-YYYY)*	6C. Social Security Number
6D. Witness Signature *(FSA Employee Only)*	6E. Date *(MM-DD-YYYY)*	6F. Official Position
6G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ State of _____ County of _____		
7A. Signature of Grantor	7B. Date *(MM-DD-YYYY)*	7C. Social Security Number
7D. Witness Signature *(FSA Employee Only)*	7E. Date *(MM-DD-YYYY)*	7F. Official Position
7G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ State of _____ County of _____		

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, D.C. 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.

--*

FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet (Continued)

J Example of FSA-211 for General Partnership When Only 1 Signature Is Required

***--**The following is an example of FSA-211 for a general partnership when Albert Jones, a member, further delegates authority. Albert Jones executed FSA-211 on behalf of the partnership to appoint Allen Smith as attorney-in-fact for the partnership.

This form is available electronically. Form Approved - OMB No. 0560-01

FSA-211
(07-26-05)

U. S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Commodity Credit Corporation - Federal Crop Insurance Corporation

POWER OF ATTORNEY

THE UNDERSIGNED does hereby appoint *(1)* Allen Smith, of *(2)* 123 Way Street Manassas *(3)* Prince William County, State of *(4)* Virginia, the attorney-in-fact to act for *(5)* AAA General Partnership in connection with Farm Service Agency and Commodity Credit Corporati program number(s) checked below. Checking any of the FSA or CCC programs does not have any impact as to the FCIC transactions checked below:

A. FSA and CCC PROGRAMS
(Check applicable program numbers)

- ☐ 1. All current programs.
- ☒ 2. All current and all future programs.
- ☐ 3. Direct and Counter-Cyclical Program except 2002 peanuts covered by Item A4.
- ☐ 4. 2002 Direct and Counter-Cyclical Peanut Program.
- ☐ 5. Peanut Quota Buy-Out Program.
- ☐ 6. Noninsured Crop Disaster Assistance Program.
- ☐ 7. Tobacco programs.
- ☐ 8. Marketing Assistance Loans and Loan Deficiency Payments.
- ☐ 9. Conservation programs.
- ☐ 10. Milk Income Loss Contract Program.
- ☐ 11. Other *(Specify)*

B. TRANSACTIONS for FSA and CCC PROGRAMS
(Check applicable program numbers)

- ☒ 1. All actions.
- ☐ 2. Signing applications, agreements, and contracts.
- ☐ 3. Election of bases and yields except peanut designation covered by Item B4.
- ☐ 4. Designation of peanut historical base and yield to a farm.
- ☐ 5. Making reports.
- ☐ 6. Conducting all marketing assistance loan and LDP transactions.
- ☐ 7. Other *(Specify)*

This form may also be used to grant authority to an attorney-in-fact to act on the grantor's behalf with respect to certain FCIC programs and crops. Checking any of the FCIC transactions does not have any impact as to the FSA or CCC transactions checked above:

C. FCIC CROPS
(Enter "All" or specify each crop and year)

1. _____
2. _____
3. _____
4. _____

D. TRANSACTION NUMBERS USED BY FCIC
(Check applicable numbers)

- ☐ 1. All actions.
- ☐ 2. Making application for insurance.
- ☐ 3. Reporting crop acreage and notice of damage reports.
- ☐ 4. Making claim for indemnity.
- ☐ 5. Making contract changes.
- ☐ 6. Other *(Specify)* _____

This Power of Attorney is valid in all counties in the United States unless otherwise noted. This power of attorney shall remain in full force and effect until *(1)* written notice of its revocation has been duly served upon FSA; *(2)* death of the undersigned grantor; or *(3)* incompetence or incapacitation of the undersigned grantor. The undersigned grantor shall provide separate written notice of revocation to the applicable crop insurance agent. This power of attorney shall not be effective until properly executed and served to a FSA Service Center.

AUTHORIZED SIGNATURES:

6A. Signature*(s)* of Grantor*(s)* *(Individual)*	B. Date *(MM-DD-YYYY)*	C. Social Security Number	D. For Grantors Signature Continuation, check here if FSA-211A is attached.
			☐

7A. Signature of Grantor *(Partnership, Corporation, Trust, etc.)*	B. Title	C. Date *(MM-DD-YYYY)*	D. Identification N of Entity
/s/ Albert Jones	General Partner	09/12/2005	999999999

8A. Witness Signature *(FSA Employee Only)*	B. Date *(MM-DD-YYYY)*	C. Official Position
/s/ Joe Green	09-12-2005	Program Technician

9. Notary Public *(this form **shall** be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed).*

Signature *(a)* _____ State of *(b)* _____ County of *(c)* _____

10. This power of attorney was served to *(a)* Prince William County FSA Office, *(b)* State of Virginia and became effective this *(c)* 12 day of *(d)* September, *(e)* 2005.

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 and Rural Investment Act of 2002 (Pub. L. 107-171) and 7 CFR Part 718. The information will be used to legally document your opinion to appointing an attorney-in-fact, identify the person and authorities granted to the appointee. Furnishing the requested information is voluntary; however, failure to furnish the requested information will result in the individual or entity not be able to act as your attorney-in-fact. 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 286, 287, 371, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0190. The time required to complete this information collection is estimated to average 15 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. ***RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***

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--*