



NEWSLETTER



JUNE 2011

**Pershing County
FSA Office
110 American Blvd.
Lovelock, NV 89419**

775-273-2922 phone
775-273-3508 fax
www.fsa.usda.gov/nv

Hours

Monday - Friday
8:00 a.m. - 4:30 p.m.

County Office Staff:

Claire Neumann,
County Executive Director,
ext 103

Terry Goldsworthy,
Program Technician,
ext 100

County Committee:
Vance Vesco, Chairmen
Mike Phillips, Vice Chair
Colby Burke, Member

COC meets the 2nd
Wednesday of each
Month (subject to change)
at 1:30 pm.

Farm Loan Staff:

Carolyn Persinger,
Farm Loan Chief
775-784-5411 x 110

Daniel Ferraro, FLOT
775-423-5124 x 106

Carly Brown, FLOT
775-423-5124 x 107

Sandra Smith, PT
775-423-5124 x 104

Crop Reporting

The annual requirement of reporting to the FSA office can be referred to as crop reporting, acreage reporting, or crop certification. Filing an accurate and timely report for all crops and land uses, including failed acreage, can prevent loss of benefits for a variety of Farm Service Agency programs. All cropland on the farm must be reported to receive benefits from the Direct and Counter-cyclical Program, Non-Insured Crop Disaster Assistance Program (NAP) and Loan Deficiency Payments.

The certification form FSA-578, Report of Acreage, must account for all cropland on a farm, whether idle or planted. The producer certification deadline for **small grain crops is JUNE 15, 2011; all other crops by JULY 15, 2011.**

NAP Certification

Crop acreage for Non-insured Crop Disaster Assistance Program (NAP) must be reported. Grazing acreage reporting deadline is July 15, 2011.

Prevented Planting:

Prevented planting is to be reported no later than 15 calendar days after the final planting date. Failure to report prevented planting acreage could result in loss of benefits for the SURE program or possibly other disaster assistance programs.

Failed Acreage:

Reports of failed acreage must be filed before disposition of the crop, and producers must be able to establish to the satisfaction of the county committee that the crop failed and was prevented from being replanted through the normal planting period because of natural disaster conditions.

Farm Loan Programs

The Farm Service Agency is committed to providing family farmers with loans to meet their farm credit needs. If you are having trouble getting the credit you need for your farm, or regularly borrow from FSA, direct and guaranteed loans are currently available.

Farm ownership loans or farm operating loans may be obtained as direct loans for a maximum of up to \$300,000. Guaranteed loans can reach a maximum indebtedness of \$1,119,000. Producers are encouraged to apply early so that a loan can be processed and funded in a timely manner.

FSA employees will help you complete the necessary application and other forms, and help you understand what information is required, where to find it or who to contact to get it. To find out more about FSA loan programs, contact the county office staff for an appointment with a farm loan officer.

COC Election Nominations

The election of agricultural producers to Farm Service Agency (FSA) county committee starts with the nomination of eligible candidates.

To become a nominee, eligible individuals must sign nomination form FSA-669A. The form includes a statement that the nominee agrees to serve if elected. This form is available at USDA Service Centers and online at:

http://www.fsa.usda.gov/Internet/FSA_File/fsa0669a_commiteelectform.pdf Nomination forms for the 2011 election must be postmarked or received in the local USDA Service Center by close of business on Aug. 1, 2011.

Agricultural producers who participate or cooperate in an FSA program may be nominated for candidacy for the county committee. Individuals may nominate themselves or others as a candidate. Additionally, organizations representing minority and women farmers or ranchers may nominate candidates. Nomination forms are filed for the county committee of the office that administers a producer's farm records.

FSA-669A
(03-31-11)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

| | | | |
|---|--|---|--|
| 1. NAME OF NOMINEE (<i>Type or Print Nominee's Full Name</i>) | | TO BE COMPLETED BY COUNTY FSA OFFICE | |
| 2. ADDRESS OF NOMINEE | | 4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED | |
| | | 5. COUNTY | |
| 3. NOMINEE'S CERTIFICATION: <i>I hereby agree to have my name placed on the ballot, that I will serve if elected, and if there is a conflict of interest, I will resign such position.</i> <input type="checkbox"/> I DO want to witness the settling of tied votes with another nominee. <input type="checkbox"/> I DO NOT want to witness the settling of tied votes with another nominee. | | 6. LAA | |
| | | 7. STATE | |
| 8. NOMINATOR'S CERTIFICATION: <i>If this nomination is by other than self, the following eligible voter or representative of a community based organization hereby nominates the afore-named person to be a candidate in the next County FSA Committee election for the county.</i> | | 8A. SIGNATURE OF NOMINATOR | |
| 3A. SIGNATURE OF NOMINEE | | 8B. DATE | |
| 3B. DATE | | (If the individual is self nominating, no signature is required). | |
| <input type="checkbox"/> Check here if nominee is a write-in candidate. | | | |

9. TO BE COMPLETED BY NOMINEE

VOLUNTARY INFORMATION FOR MONITORING PURPOSES: The following information is requested by the Federal Government in order to monitor FSA's compliance with federal laws prohibiting discrimination against program participants on the basis of race, color, national origin, religion, sex, marital status, handicapped condition, or age. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your nomination or to discriminate against you in any way.

| | | | | | |
|---|---|--|---------------------------------|---|--|
| ETHNICITY | | RACE (Choose as many boxes as applicable) | | GENDER | |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Black or African-American | <input type="checkbox"/> Male | <input type="checkbox"/> Not Hispanic or Latino | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> | <input type="checkbox"/> Asian | <input type="checkbox"/> | <input type="checkbox"/> Female | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> White | <input type="checkbox"/> | | <input type="checkbox"/> | |

INSTRUCTIONS FOR COMPLETING THIS FORM

Complete the form as follows:

- ITEM 1** Type or Print the nominee's full name. The nominee must be:
 - A. Eligible to vote in the designated County FSA Committee election.
 - B. Eligible to hold the office of County FSA Committee member.
 - C. Willing to serve if elected.
- ITEM 2** Enter the nominee's current address.
- ITEM 3** The nominee must check one of the boxes to indicate a preference regarding the settling of tied votes.
- ITEMS 3A & 3B** The nominee must sign and date.
- ITEMS 8A & 8B** The nominator must sign and date. (*If the individual is self nominating, no signature is required.*)
- ITEM 9** Completing this item is voluntary.

ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 1, 2011.

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 Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246). The information will be used to obtain nominees for election to the County FSA Committee. 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 County Personnel Records, USDA/FSA-6. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for nomination for election to the County FSA Committee.

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 0560-0229. The time required to complete this information collection is estimated to average 10 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. 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.**

LAA-1 (Local Administrative Area) is up for election this year. This area includes all of Lower Valley that is in the PCWCD irrigation district and lands west of Arobio Lane.

Mike Phillips from Nevada Nile Ranch, Inc. currently holds this position.

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

This form allows individuals to nominate themselves or any other person as a candidate. If additional forms are needed, this one may be copied or may be obtained at the County FSA Office or obtained electronically at <http://www.sc.egov.usda.gov>. Each form submitted must be:

- A. Limited to one nominee.
- B. Signed and dated by the nominee in Item 3. Nominee must sign if willing to have his/her name placed on the ballot and agrees to serve if elected.

Note: Name shown on ballot will appear exactly the same as in Agency records.

- C. Delivered to the County FSA Office or postmarked no later than August 1, 2011.
- D. Signed and dated as a write-in candidate if elected as a member and willing to serve on the COC.

The County FSA Committee is responsible for reviewing each form to determine the eligibility of nominees. A person who is nominated on this form and is found ineligible will be so notified and have an opportunity to file a challenge.

Persons nominated should actively participate in the operation of a farm or ranch and be well qualified for committee work. A producer is eligible to be a County FSA committee member if the producer resides in the Local Administrative Area (LAA) in which the election is to be held and is eligible to vote.

This is a non-salary public service position. A small stipend is provided to offset expenses.

Federal regulations may prohibit County FSA Committee members from holding certain positions in some farm, commodity, and political organizations if such positions pose a conflict of interest with FSA duties. The positions include functional offices such as president, vice president, secretary, or treasurer; and positions on boards or executive committees. Conflict of interest restrictions also apply to employees, operators, managers, and majority owners of tobacco warehouses. Questions concerning eligibility should be directed to the County FSA Office.

A candidate has the option to request that all voted ballots for an individual county committee election be returned to the respective State Office in lieu of being returned to the county office. This request must be in writing and submitted to the local County Executive Director prior to the announced end of the nomination period.

The duties of County FSA Committee members include:

- A. Administering farm program activities conducted by the County FSA Office.
- B. Informing farmers of the purpose and provisions of the FSA programs.
- C. Keeping the State FSA Committee informed of LAA conditions.
- D. Monitoring changes in farm programs.
- E. Participating in county meetings as necessary.
- F. Performing other duties as assigned by the State FSA Committee

The U.S. Department of Agriculture (USDA) prohibits discrimination in all of 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, political beliefs, genetic information, 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 (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 to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410, or call toll-free at (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.

Pershing County FSA Office
 110 American Blvd.
 Lovelock, NV 89419



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Farm Loan Programs

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| Selected Interest Rates for June 2011 | |
|---|--------|
| 90-Day Treasury Bill | 0.125% |
| Farm Operating - Direct | 2.750% |
| Farm Ownership - Direct | 5.000% |
| Farm Ownership - Direct Down Payment, Beginning Farmer or Rancher | 1.500% |
| Emergency – Actual Loss | 3.750% |
| Farm Storage Facility 7 year | 2.625% |
| Farm Storage Facility 10 year | 3.250% |
| Farm Storage Facility 12 year | 3.500% |
| Commodity Loans 1996-Present | 1.250% |

| Dates to Remember | |
|-------------------|--|
| June 15 | Acreage report deadline for small grain crops - including corn |
| July 15 | Acreage report deadline for all other crops including grazing |
| July 29 | 2009 SURE filing deadline |
| Aug 1 | COC Nominations Due in County Office |
| Sept 30 | 2012 NAP signup ends – Grain crops |
| Oct 31 | 2012 NAP signup ends – All Other Hay Crops |
| Dec 1 | 2012 NAP signup ends - Grazing |

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