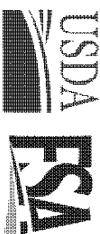


NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

1. NAME OF NOMINEE (Type or print Nominee's Full Name)		TO BE COMPLETED BY COUNTY FSA OFFICE	
2. ADDRESS OF NOMINEE		5. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE (MM-DD-YYYY)	
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>		6A. COUNTY Adams	
<input type="checkbox"/> I DO want to witness the settling of tied votes with another nominee.		6B. LAA NO. LAA # 1; northern 1/3 of County	
<input type="checkbox"/> I DO NOT want to witness the settling of tied votes with another nominee.		7. STATE Washington	
4A. SIGNATURE OF NOMINEE	4B. DATE (MM-DD-YYYY)	DATE OF ELECTION IS 1st MONDAY OF DECEMBER OF EACH CALENDAR YEAR	
8. TO BE COMPLETED BY NOMINEE			
<p>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.</p>			
ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		RACE (Choose as many boxes as applicable) <input type="checkbox"/> America Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
		GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
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.			
ITEM 4 The nominee must sign and date.			
ITEM 8 Completing this item is voluntary.			
ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 3.			
<p>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 7 CFR Part 7. The information will be used to obtain nominees for County FSA Committee.</p> <p>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. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</p>			



United States
Department
of Agriculture

Farm and Foreign
Agricultural Services

Adams County FSA Office
506 Weber Ave. Ste A
Ritzville, WA 99169-2118

May 1, 2009

Dear Producer:

You are encouraged to nominate yourself or someone else to represent your interests on the Farm Service Agency County Committee. FSA county committees are a unique arrangement that allow local guidance for federal farm programs. These committees are a direct link between the farm community and the U.S. Department of Agriculture. Committee members are a critical component of ensuring FSA agricultural programs serve the needs of local producers. Committee members are compensated for their time and travel related to county committee duties.

The duties of county FSA committee members include:

- Monitoring changes in farm programs and assisting with delivery of FSA farm programs at the local level.
- Informing farmers of the purpose and provisions of FSA programs.
- Notifying the State FSA Committee of LAA conditions.
- Hearing producer appeals at the local county level.
- Performing other duties as assigned by the State FSA Committee.

This year, nominations are for a committee member to represent producers in Local Administrative Area (LAA) # 1. LAA # 1 is located in the northern 1/3 of Adams County, delineated on the north, west and east, by the Lincoln, Grant and Whitman County lines; and on the south by the line dividing Township 18 North and Township 19 North, running from the Grant County line in the west, to the Whitman County in the east. Please feel free to call the County Office for a more detailed description or a copy of the LAA map.

To hold office as a county committee member, a person must meet the basic eligibility requirements described below:

- Actively participate in the operation of a farm or ranch.
- Be eligible to vote in a county committee election. (Be of legal voting age and have an interest in a farm or ranch; not of legal voting age but supervises and conducts farming operations on an entire farm; participates in any FSA program.)
- Reside in the LAA in which the person is a candidate.

The nomination form FSA-669A allows individuals to nominate themselves or any other person as a candidate. Each form submitted must be limited to one nominee and signed and dated by the nominee (Item 4A & 4B) to indicate a willingness to have their name placed on the ballot and agree to serve if elected. For detailed instructions on completing the nomination form or requesting a form, please contact your local county FSA office, or refer to the website <http://www.fsa.usda.gov/via>.

The deadline for nominations is **August 3, 2009**. Completed nomination forms are to be submitted to the county FSA address listed at the top of this letter and should be returned, delivered, or postmarked no later than August 3, 2009.

Sincerely,
/s/ Chris Holt
County Executive Director

"The U.S. Department of Agriculture (USDA) prohibits discrimination in all 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, genetic information, political beliefs, 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, audiotapes, 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, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer."



May 2009

ADAMS COUNTY FSA NEWS

Adams County FSA

506 Weber Ave. Ste. A
Ritzville, WA 99169-2118
(509)659-1761
FAX (509)659-4722

Office Hours

Monday – Friday
8:00 AM – 4:30 PM

County Committee

Greg Galbreath, Chair
LeRoy Watson Jr., V-Chair
Matt Miller, Member
Elizabeth Lyle, Advisor

Office Staff

Chris Holt, CED
Jullie Cain, PT
Angela Melcher, PT
Rae Ann Telecky, PT
Karin Talkington, PT

Farm Loan Staff

Everett Purrington, FLM
Nancy Seger, FLO
Libby Anderson, FLO
Joyce Nevins-Ginsberg, FLO
Barbara Williams, FLT
Beth Farias, FLT

2145 Basin St SW Ste A
Ephrata, WA 98823-9617
(509)754-2463



2009 Average Crop Revenue Election (ACRE) Signup April 27 – August 14

2009 ACRE signup will occur April 27-August 14, 2009. ACRE is an alternate to DCP participation. ACRE participants earn direct payments, but with a 20% reduction. Grain loan rates on ACRE-enrolled farms are reduced by 30%. The benefit of ACRE is potential revenue protection payments on **planted crops** when market prices, state yields, and/or farm yields are below established guarantees. Producers must “elect” to place a FSA farm in ACRE for 2009-12, then “enroll” annually in an ACRE contract. The opportunity to elect ACRE will be offered each year 2009-12, but once elected the decision is irrevocable through 2012. All producers on a farm must agree to the election.

2009 Direct and Counter-Cyclical Payment Program (DCP) Signup Ends August 14

DCP participants must enroll and submit the signature of all parties with a share of the crop, by August 14, 2009. Plan on signup taking significantly longer this year. 2008 Farm Bill provisions require all participants, including landowners, to submit new payment limitation forms. Pulse crop bases and yields must be elected by August 14 and are based on 1998-2001 planting history. Letters will be mailed to applicable producers.

Crop Acreage Must Be Reported by June 30

Participants in DCP, ACRE, NAP, CRP, commodity loans or LDP's must report their crop acreages by June 30 to remain eligible. Acreage reports filed after June 30 will only be accepted if you pay a fee for a FSA field visit to verify the crops and acreages. Acreage must be reported on all farms the producer has an interest in.

2008 Supplemental Revenue (SURE) Program Enrollment Extended to May 18

Producers who want to earn benefits on 2008 losses under the new SURE program must have crop insurance or NAP coverage on all crop acreage grown in 2008. If you did not cover all crops, you can obtain SURE eligibility by paying a SURE buy-in fee on any uncovered crops by May 18. The fee is \$100/crop, not to exceed \$300/county.

Important Deadlines

May 18 – Pay fees for any uninsured 2008 crops to obtain 2008 SURE coverage.
June 30 – Report crop acreage for DCP, ACRE, NAP, loans, LDP.
August 14 – Enroll in DCP or ACRE; elect pulse crop base acres and yields.