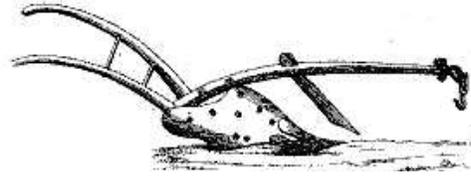




News for People Interested in  
Agriculture  
Serving  
Jackson & Josephine Counties

# THE FSA PLOWSHARE \*



## Summer 2010

### Inside this issue:

- Committee Election
- 2010 Wool LDP
- NAP Crop Assistance

USDA Service Center  
573 Parsons Dr. Suite 101  
Medford, OR 97501-3795

Phone: 541-776-4270 ext. 2  
Fax: 541-776-4295

Hours: Monday – Friday  
8:00 am – 4:30 pm

### County Committee:

LAA-1 Suzanne Ginet, Chair  
LAA-2 Charlie Boyer, Member  
LAA-3 Lori Mefford, Vice-Chair

### County Office Staff:

Joe Hess, CED  
Diane Rabbe, PT  
Donna Finch, PT  
Chris Kirby, Farm Loan Manager  
(Klamath Co. FSA Office,  
541-883-6924 ext. 104)

[www.fsa.usda.gov/or/jackson.html](http://www.fsa.usda.gov/or/jackson.html)  
[www.fsa.usda.gov/farmbill](http://www.fsa.usda.gov/farmbill)

Reasonable accommodations will be made, upon request, for individuals with disabilities, vision impairment or hearing impairment. If special accommodations are required, please call the FSA County Office staff, and we will be happy to make any arrangements that are necessary.

\*A plowshare is the leading or cutting edge of a plow which cuts the soil and turns it over.

## LAA-3 County Committee Election

County committee members are a critical component of the operations of FSA. They help deliver FSA farm programs at the local level. Farmers and ranchers who serve on county committees help with the decisions necessary to administer the programs in their counties.

The 2010 County Committee election is for Local Administrative Area #3, Southern Jackson County, including the communities of Central Point, Medford, Phoenix, Talent, Ashland, Jacksonville areas. The nomination period begins June 15, 2010. Please stop by or contact the Jackson/Josephine County FSA for nomination forms (FSA-699A) or use the form provided in this newsletter. The last day to return nominations is **Aug. 2, 2010**.

## Wool Loan Deficiency Program Payments – LDP

Wool producers are being reminded to complete and submit form CCC-633EZ page 1, prior to losing beneficial interest of the wool. Sales receipts cannot be accepted without the form having been previously filed in this office. The closing date for this program has been changed to **Dec. 31**.

Wool does not have to be sold for participation. If you still have the wool, you can certify to the amount that you have. The payment rate is then the date the completed form CCC-633EZ page 4 “Request for Payment” is received in our office. The current rate for ungraded wool is \$0.29 per pound.

2008 Farm Bill provisions apply to all LDP programs; Individual & Entity Eligibility, US Citizenship, Adjusted Gross Income and Highly Erodible Land and Wetland Conservation certification, crop acreage reporting for croppled farmland. Please contact the office if you have questions.

**FARM LOAN PROGRAMS**, FSA 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. Ask your lender about an FSA loan guarantee if you’ve had a setback and your lender is reluctant to extend or renew your loan. Farm Loan staff will help you complete the necessary application and other forms, and help you understand what information is required. Contact the loan staff in the Klamath Co. Service Center listed in this newsletter heading.

**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 2, 2010.
  - 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.

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, audiotope, 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.*

FSA-669A  
(03-24-10)

U.S. DEPARTMENT OF AGRICULTURE  
Farm Service Agency

### NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

1. NAME OF NOMINEE (Type or Print Nominee's Full Name)	<b>TO BE COMPLETED BY COUNTY FSA OFFICE</b>	
2. ADDRESS OF NOMINEE	4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED	
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>	5. COUNTY	
	6. LAA	7. STATE
<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.	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>	
3A. SIGNATURE OF NOMINEE	3B. DATE	8A. SIGNATURE OF NOMINATOR
<input type="checkbox"/> Check here if nominee is a write-in candidate.		<i>(If the individual is self nominating, no signature is required).</i>

**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.

<b>ETHNICITY</b>	<b>RACE (Choose as many boxes as applicable)</b>	<b>GENDER</b>
<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> American 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	<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.
- 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 2, 2010.**

**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.*

## Return Service Requested

**NON- INSURED ASSISTANCE PROGRAM (NAP)** NAP is available for all crops not covered under Federal Crop Insurance. NAP provides catastrophic level of coverage (50% yield / 55% price) to crops damaged by the eligible weather events that occur before or during harvest. Fees are \$250/crop, maximum of \$750/county, and a maximum of \$1875/multi county producers. NAP coverage may be required in order to meet the eligibility requirements for the 2008 Farm Bill. Contact Diane with your questions.

- **August 31, 2010** - Fall planted vegetable seeds, canola, carrots, radish, onions, other seed crops; Christmas trees, cut flowers, herbs
- **October 1, 2010** - Asparagus, garlic, mint, hops, meadowfoam, sugarbeet, triticale grain
- **November 20, 2010** - Apples, apricots, blueberries, caneberries, chestnuts, cherries, cranberries, grapes, hazelnuts, strawberries, nectarines, peaches, pears, prunes, walnuts, & honey
- **November 30, 2010** - All forage and grazing crops except oat forage. All grasses & legumes for seed.
- **March 15, 2011**- All spring planted crops not mentioned above, beans, broccoli, Camelina, cantaloupe, cauliflower, corn, cucumber, lentils, mustard, oats, peas, potatoes, pumpkins, safflower, sunflower, squash, tomato, watermelon and oat forage
- **May 15, 2011** - Buckwheat

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