



Purpose

The purpose of this work instruction is to show how to create an FSA Power of Attorney.

Trigger



Perform this procedure when requested by a Customer.




Prerequisites

- The Customer Record for the individual or organization **granting** the Power of Attorney must be in Business Partner.
- The Customer Record for the person or organization **receiving** the Power or Attorney must be in Business Partner.

Helpful Hints

- You may limit the validity period of a Power of Attorney, by entering a date in the Revoked/Cancelled field causing the Power of Attorney to be revoked automatically on the specified date.
- "xxxx" within a document represents a variable, which may consist of a name, number, etc.
- In the field description tables, **R** indicates the action is required, **O** indicates the action is optional, and **C** indicates the action is conditional.
- The following notes may be used throughout this work instruction:

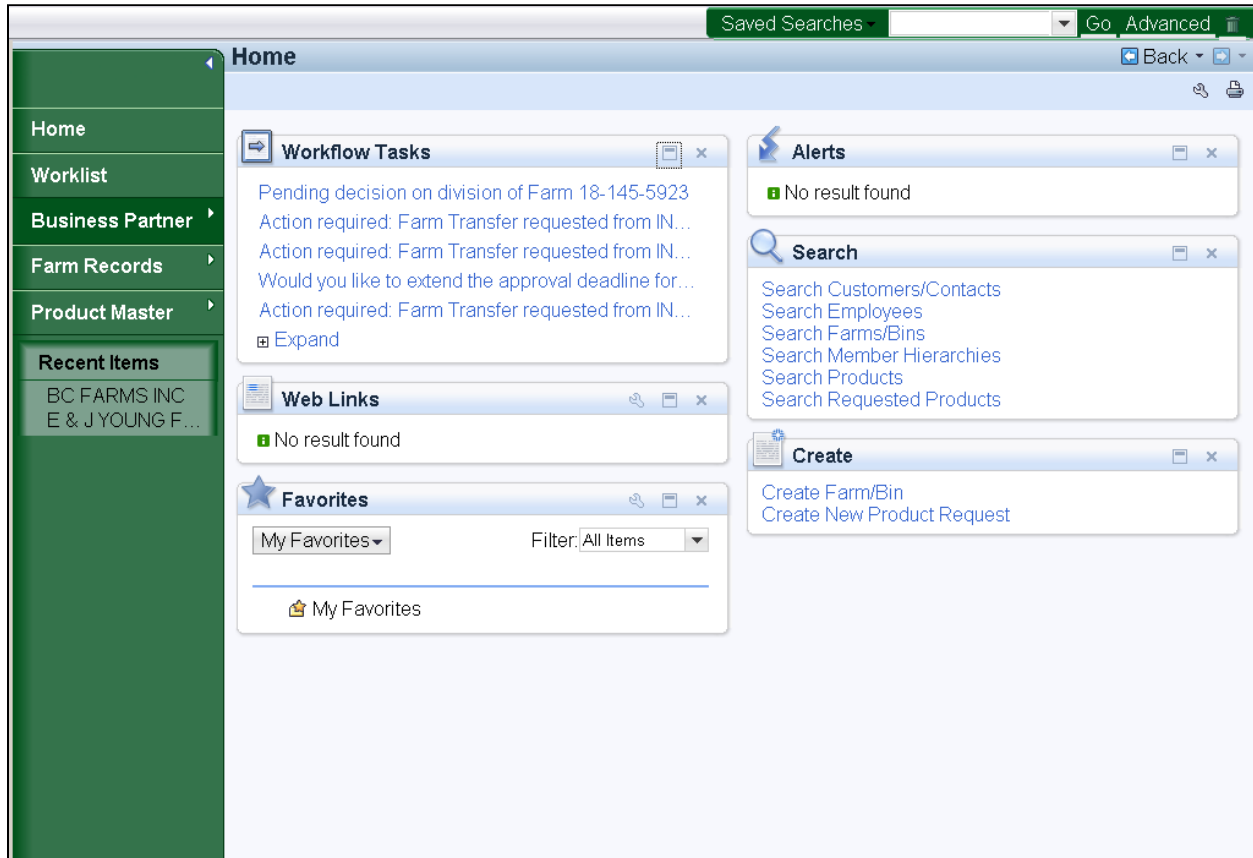
Note type	Icon	Description
A general note of information		This is the most commonly used note icon. It is the default icon in the uPerform system for all notes. Use this icon for general information that falls out of the scope of these other icons.
A cautionary note		Use this note to communicate to the end-user of something that MUST be completed or another trigger that should be started and is related to the

		procedure.
A critical note		Use this note to specify something that MUST NOT be done during the procedure.
Contact someone		Use this icon to specify to the end-user the need to initiate a communication within the organization due to an event in the procedure.
A reference is available		Use this note to specify that more information is available in another location. You may reference SOPs, another system, or document.

Procedure

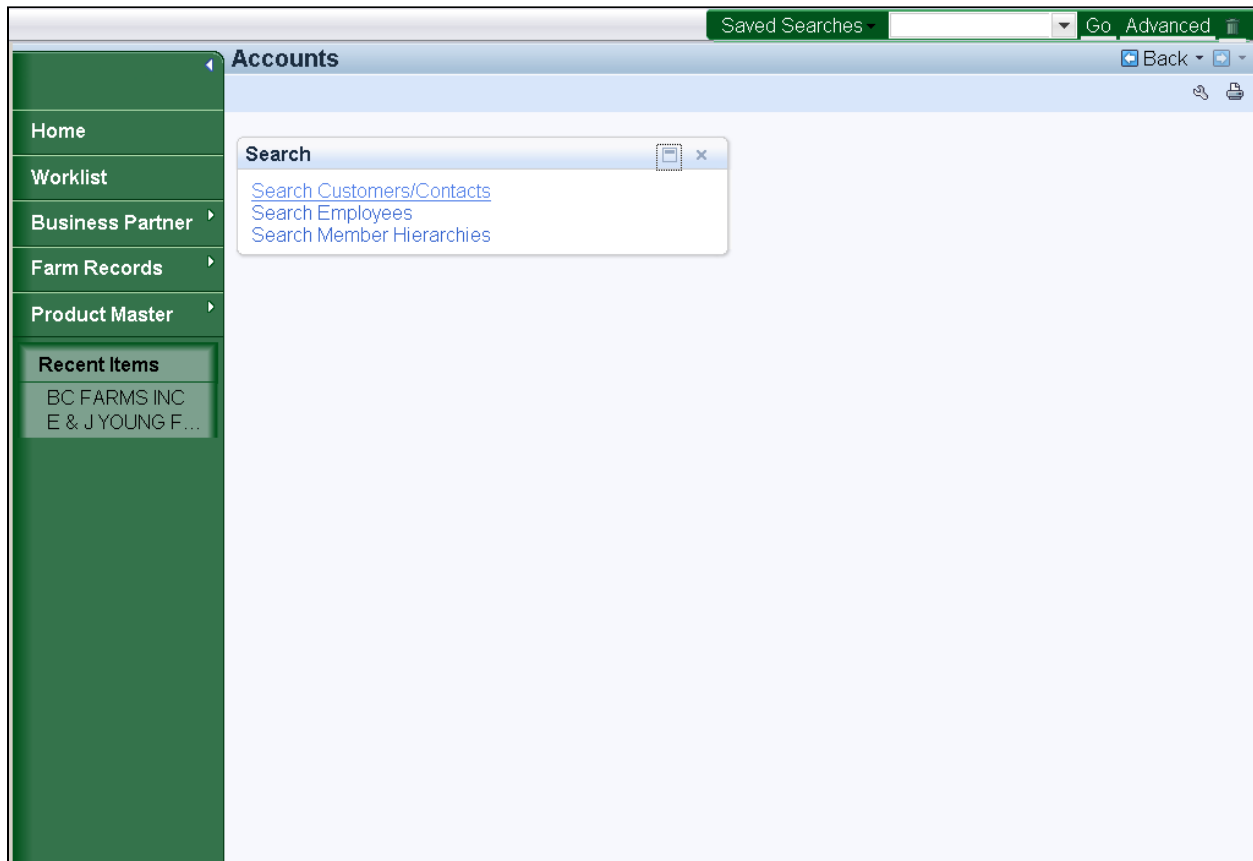
1. Start the transaction from the MIDAS CRM Home Page.

Home




2. Click **Business Partner** button  to go to the Accounts page.

Accounts



3. Click **Search Customers/Contacts** label [Search Customers/Contacts](#) to go to the Search Customers page.

 We will create an FSA Power of Attorney for a Business. An End User would follow the same process when creating an FSA Power of Attorney for an Individual.



Search: Customers

Saved Searches -
Go Advanced

[Home](#)
[Worklist](#)
[Business Partner](#)
[Farm Records](#)
[Product Master](#)
Recent Items
[BC FARMS INC](#)
[E & J YOUNG F...](#)

[Hide Search Fields](#)

Search: Customers

Search for: All Accounts

Business Name	is	<input type="text"/>	⊕ ⊖
First Name	is	<input type="text"/>	⊕ ⊖
Last Name	is	<input type="text"/>	⊕ ⊖
Middle Name	is	<input type="text"/>	⊕ ⊖
Common Customer Name	is	<input type="text"/>	⊕ ⊖
BP Number/ID	is	<input type="text"/>	⊕ ⊖
Role	is	<input type="text"/>	⊕ ⊖
Tax ID Number	is	<input type="text"/>	⊕ ⊖
Tax ID Type	is	<input type="text"/>	⊕ ⊖
Associated State	is	INDIANA	⊕ ⊖
Associated County	is	RUSH	⊕ ⊖
Service Center	is	ALL CENTERS	⊕ ⊖

Maximum Number of Results:

Save Search As:

Result List

[New Customer](#)

In...	BP...	Common Cu...	Tax ID...	Tax ID...	Add...	City	State	ZIP...	Tel...	E-Mail
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4. As required, complete/review the following fields:

Field	R/O/C	Description
Business Name	R	Business Partner name for corporation, LLC, general partnership, etc. Example: BC Farms Inc

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BP_Create_an_FSA_Power_of_Attorney_4_13.udc

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Search: Customers

Search: Customers

Search Criteria Hide Search Fields

Search for: All Accounts

Business Name	is	BC Farms Inc	⊕ ⊖
First Name	is		⊕ ⊖
Last Name	is		⊕ ⊖
Middle Name	is		⊕ ⊖
Common Customer Name	is		⊕ ⊖
BP Number/ID	is		⊕ ⊖
Role	is		⊕ ⊖
Tax ID Number	is		⊕ ⊖
Tax ID Type	is		⊕ ⊖
Associated State	is	INDIANA	⊕ ⊖
Associated County	is	RUSH	⊕ ⊖
Service Center	is	ALL CENTERS	⊕ ⊖

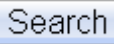
Maximum Number of Results: 100

Search Clear Reset Save Search As: Save

Result List

New Customer

In...	BP...	Common Cu...	Tax ID...	Tax ID...	Add...	City	State	ZIP...	Tel...	E-Mail
-------	-------	--------------	-----------	-----------	--------	------	-------	--------	--------	--------

- Click the **Search** button  to display the search results of the Business Name.

Search: Customers

Saved Searches -
Go Advanced

Search: Customers
Back

[Home](#)
[Worklist](#)
[Business Partner](#)
[Farm Records](#)
[Product Master](#)
Recent Items
[BC FARMS INC](#)
[E & J YOUNG F...](#)

Search Criteria
[Hide Search Fields](#)

Search for: All Accounts

Business Name	is	BC FARMS INC	⊕ ⊖
First Name	is		⊕ ⊖
Last Name	is		⊕ ⊖
Middle Name	is		⊕ ⊖
Common Customer Name	is		⊕ ⊖
BP Number/ID	is		⊕ ⊖
Role	is		⊕ ⊖
Tax ID Number	is		⊕ ⊖
Tax ID Type	is		⊕ ⊖
Associated State	is	INDIANA	⊕ ⊖
Associated County	is	RUSH	⊕ ⊖
Service Center	is	ALL CENTERS	⊕ ⊖

Maximum Number of Results:

Save Search As:

Result List: 1 Customer Found

[New Customer](#)

In...	BP...	Common Cu...	Tax ID...	Tax ID...	Add...	City	State	ZIP...	Tel...	E-Mail
<input type="checkbox"/>	800...	BC FARMS!	NOTAXID	No Tax I...	185...	RUS...	Indiana	461...	+1...	test@...

BC FARMS INC

- Click the **Common Customer Name** from the Result List **BC FARMS INC** [BC FARMS!](#) to go to the Customer page.

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Customer: BC FARMS INC

Customer: BC FARMS INC

Save | Cancel | Fact Sheet | PDF Fact Sheet | More

Customer Details | Customer Profile | Roles | Identification

Edit

General Data	Main Address and Communication Data
Current Role: Corporation	Information Line:
BP Number / ID: 8000004...	Address Line: 1852 Main St.
Business Name: BC FARMS INC	PO Box:
Legal Name: No	City: RUSHVILLE
Common Custo.: BC FARMS INC	State: IN Indiana
Data Origin: SCIMS	ZIP Code: 46173-7...
Tax ID Type: No Tax ID Type	Country: US USA
Tax ID Number: No Tax I...	Telephone Num.: 800-000-0000
	E-Mail Address: test@training.com
	Communication: E-Mail

Notes

Control Flags

Archived:

Inactive:

Addresses | Address Types | Communication Numbers | E-Mails

7. Scroll to the **Representative Capacity** tab.



Customer: BC FARMS INC Representative Capacity

Customer: BC FARMS INC

Save | Cancel | Fact Sheet | PDF Fact Sheet | More

Notes

Control Flags

Archived:
Inactive:

Addresses | Address Types | Communication Numbers | E-Mails

New

Acti...	Address	Curr...	Valid From	Valid To
	1852 Main St. / RUSHVILLE IN 46173-...	<input checked="" type="checkbox"/>	03/04/2010	12/31/9999

Representative Capacity | Relationships | Member Signatures

New | History Data


A...	Type	Business Partner	Status	Effective Date	Revoked/Canc...
<input checked="" type="checkbox"/>	Has FSA Attom...	JULIE R VANDE...	Active	03/05/2010	12/31/9999

Program Participation | Associated Counties

Edit

A...	Customer Type	Organization Name	General Program Int...	Current Participant
	FSA CUSTOMER	SHELLBY COUNTY F...	Has interest in the pr...	Application made


Member Share Percentage

8. Click the **New** button  under the **Representative Capacity** tab to go to the Customer Relationships page.



Customer: BC FARMS INC Relationships

The screenshot shows the FSA system interface. At the top, it displays the USDA FSA logo, the text 'United States Department of Agriculture Farm Service Agency', and a user greeting 'Welcome MITEST42 TRAIN42'. There are links for 'Personalize' and 'System News'. A search bar contains 'Saved Searches' and a 'Go' button. The main content area is titled 'Customer: BC FARMS INC' and features a 'Representative Capacity Relationships' section with a 'Relationship Cat.' dropdown menu. A left-hand navigation menu includes options like Home, Worklist, Business Partner, Farm Records, Product Master, and Recent Items, with 'BC FARMS INC' and 'E & J YOUNG F...' listed under Recent Items.

9. Click the **Relationship Category** dropdown icon  to display the list of Relationship Categories.



Customer: BC FARMS INC Relationships

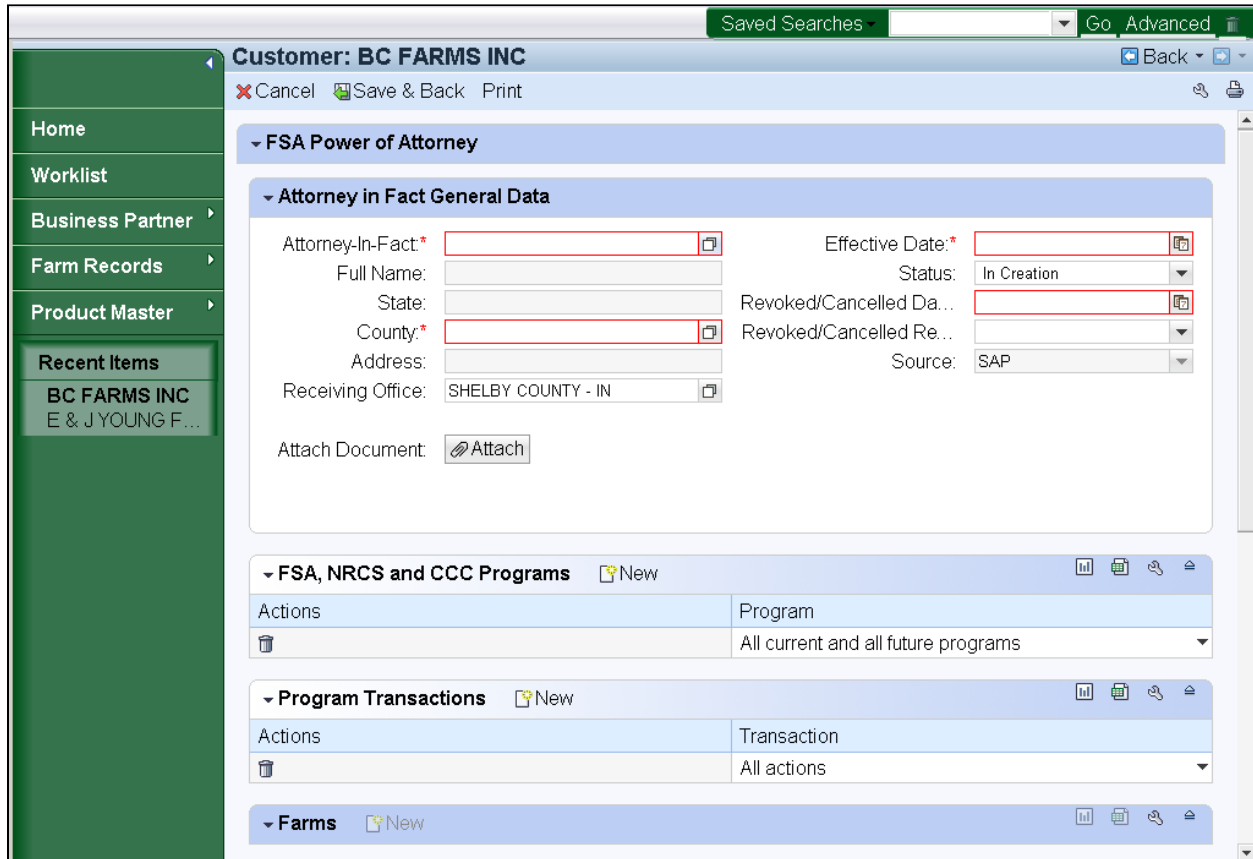
Customer: BC FARMS INC Relationships

Relationship Cat.

- Has FSA Attorney in Fact
- Has Non-FSA Attorney in Fact
- Has Signature Authority

10. Click **Has FSA Attorney in Fact** from the dropdown list.

Customer: BC FARMS INC FSA Power of Attorney













Customer: BC FARMS INC


Cancel Save & Back Print





FSA Power of Attorney


Attorney in Fact General Data





Attorney-In-Fact*  Effective Date* 
 Full Name: Status: In Creation
 State: Revoked/Cancelled Da... 
 County*  Revoked/Cancelled Re...
 Address: Source: SAP
 Receiving Office: SHELBY COUNTY - IN 
 Attach Document: 


FSA, NRCS and CCC Programs    


Actions	Program
	All current and all future programs

Program Transactions    

Actions	Transaction
	All actions

Farms    

- Click the **Attorney-In-Fact** Open Input Help button  to go to the Search Criteria window.

 You will now be searching for the Business Partner that will become the Attorney-In-Fact.



Search Criteria

Search Criteria
[Hide Search Fields](#)

Search for:

Business Name	▼	is	▼	<input type="text"/>	⊕ ⊖
First Name	▼	is	▼	<input type="text"/>	⊕ ⊖
Last Name	▼	is	▼	<input type="text"/>	⊕ ⊖
Middle Name	▼	is	▼	<input type="text"/>	⊕ ⊖
Common Customer Name	▼	is	▼	<input type="text"/>	⊕ ⊖
BP Number/ID	▼	is	▼	<input type="text"/>	⊕ ⊖
Role	▼	is	▼	<input type="text"/>	⊕ ⊖
Tax ID Type	▼	is	▼	<input type="text"/>	⊕ ⊖
Tax ID Number	▼	is	▼	<input type="text"/>	⊕ ⊖
Legacy State	▼	is	▼	INDIANA	⊕ ⊖
Legacy County	▼	is	▼	SHELBY	⊕ ⊖
Service Center	▼	is	▼	SHELBY COUNTY - IN	⊕ ⊖

Maximum Number of Results:

Result List

Ina...	BP Num...	Common Customer N...	Tax I...	Tax I...	Addre...	City	State	ZIP C...	Telep...	E-Mail
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12. As required, complete/review the following fields:

Field	R/O/C	Description
Last Name	R	Business Partner's Last Name Example: Mildred
First Name	R	Business Partner's First Name Example: Harris



Search Criteria

Search Criteria
[Hide Search Fields](#)

Search for: Customer ▼

Business Name	▼	is	▼		⊕	⊖
First Name	▼	is	▼	Mildred	⊕	⊖
Last Name	▼	is	▼	Harris	⊕	⊖
Middle Name	▼	is	▼		⊕	⊖
Common Customer Name	▼	is	▼		⊕	⊖
BP Number/ID	▼	is	▼		⊕	⊖
Role	▼	is	▼		⊕	⊖
Tax ID Type	▼	is	▼		⊕	⊖
Tax ID Number	▼	is	▼		⊕	⊖
Legacy State	▼	is	▼	INDIANA	⊕	⊖
Legacy County	▼	is	▼	SHELBY	⊕	⊖
Service Center	▼	is	▼	SHELBY COUNTY - IN	⊕	⊖

Maximum Number of Results:

Result List

New Customer

Ina...	BP Num...	Common Customer N...	Tax I...	Tax I...	Addre...	City	State	ZIP C...	Telep...	E-Mail
--------	-----------	----------------------	----------	----------	----------	------	-------	----------	----------	--------

13. Click the **Search** button .



Search Criteria

Search Criteria
[Hide Search Fields](#)

Search for:

Business Name	▼	is	▼	<input type="text"/>	⊕ ⊖
First Name	▼	is	▼	MILDRED	⊕ ⊖
Last Name	▼	is	▼	HARRIS	⊕ ⊖
Middle Name	▼	is	▼	<input type="text"/>	⊕ ⊖
Common Customer Name	▼	is	▼	<input type="text"/>	⊕ ⊖
BP Number/ID	▼	is	▼	<input type="text"/>	⊕ ⊖
Role	▼	is	▼	<input type="text"/>	⊕ ⊖
Tax ID Type	▼	is	▼	<input type="text"/>	⊕ ⊖
Tax ID Number	▼	is	▼	<input type="text"/>	⊕ ⊖
Legacy State	▼	is	▼	INDIANA	⊕ ⊖
Legacy County	▼	is	▼	SHELBY	⊕ ⊖
Service Center	▼	is	▼	SHELBY COUNTY - IN	⊕ ⊖

Maximum Number of Results:

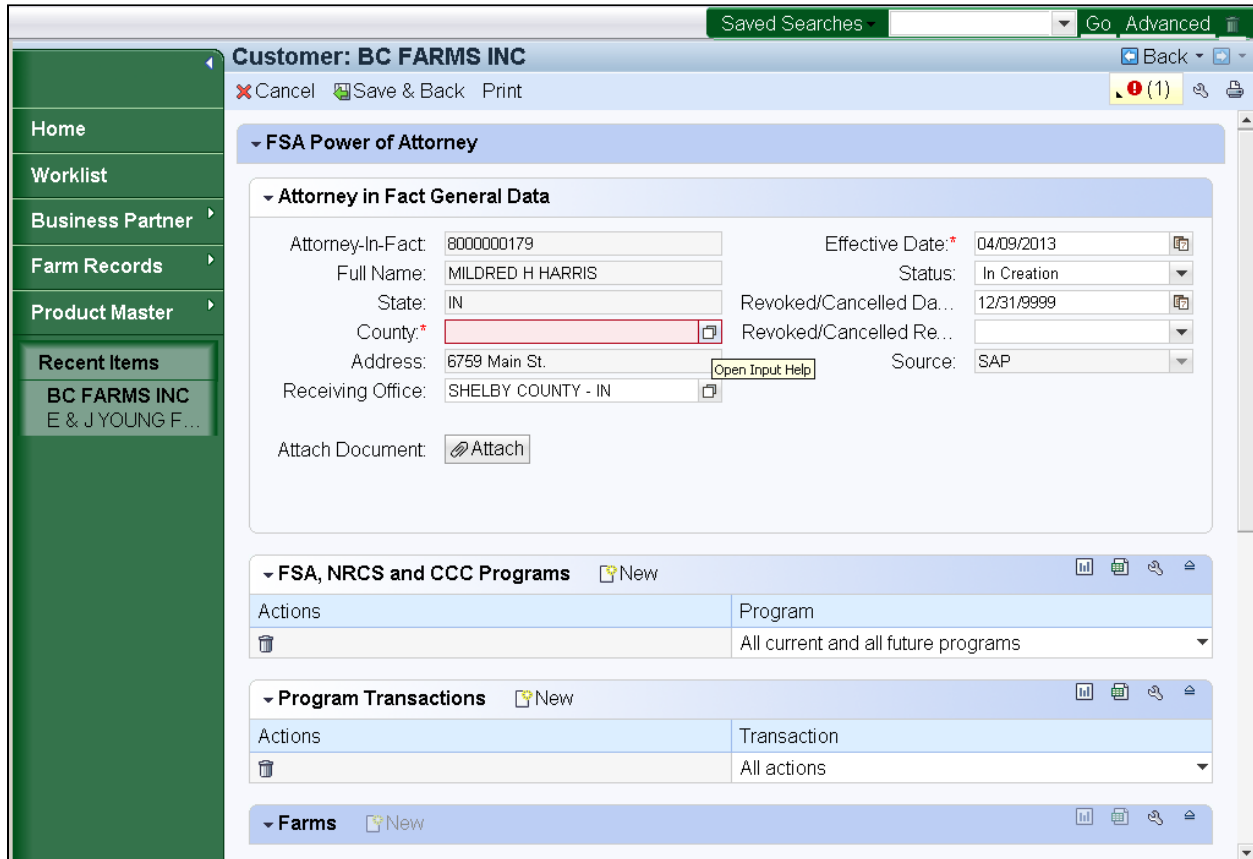
Result List: 1 Customer Found

[New Customer](#) 📄 🔍

Ina...	BP Num...	Common Customer N...	Tax I...	Tax I...	Addre...	City	State	ZIP C...	Telep...	E-Mail
<input type="checkbox"/>	8000000...	MILDRED H HARRIS	NOTA...	No Ta...	6759...	FRAN...	Indiana	46131...		

14. Click the **Common Customer Name** from the Result List MILDRED H HARRIS [MILDRED H HARRIS](#) to go to the Customer FSA Power of Attorney page.

Customer: BC FARMS INC FSA Power of Attorney



Customer: BC FARMS INC

Cancel Save & Back Print

Go Advanced

Back

(1)

▼ FSA Power of Attorney

▼ Attorney in Fact General Data

Attorney-In-Fact: 8000000179 Effective Date*: 04/09/2013

Full Name: MILDRED H HARRIS Status: In Creation

State: IN Revoked/Cancelled Da... 12/31/9999

County*: Revoked/Cancelled Re...

Address: 6759 Main St. Open Input Help Source: SAP

Receiving Office: SHELBY COUNTY - IN

Attach Document: [Attach](#)

▼ FSA, NRCS and CCC Programs [New](#)


Actions	Program
	All current and all future programs


▼ Program Transactions [New](#)

Actions	Transaction
	All actions

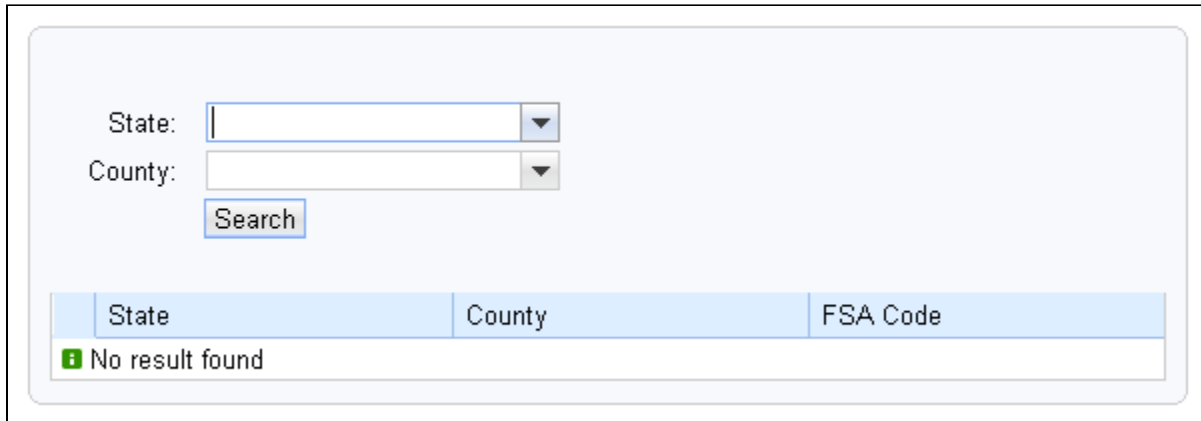
▼ Farms [New](#)

15. Click the **County** field Open Input Help button  to go to the search window.


 The message status will remain red until all required entries are completed.

 This is the County of the Attorney-In-Fact.

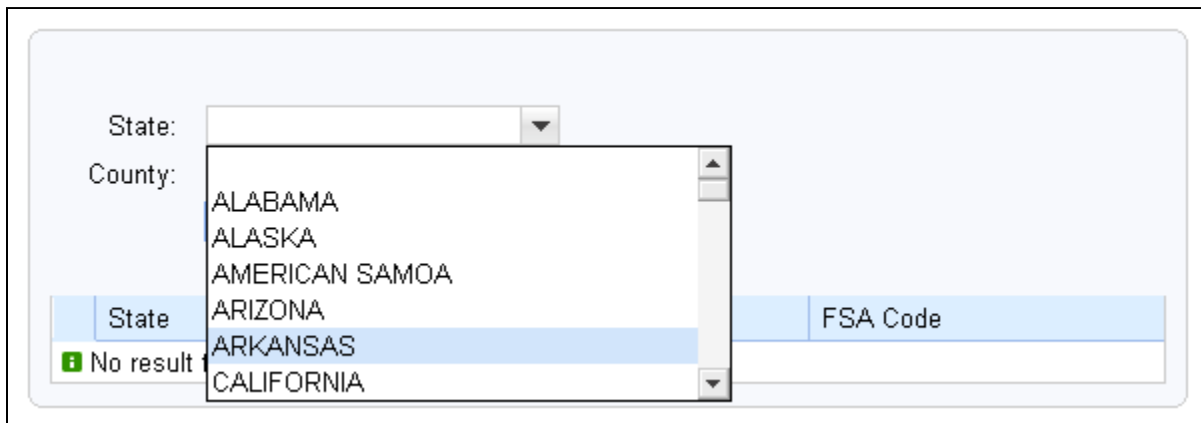
FSA Codes



State	County	FSA Code
No result found		

16. Click the **State** field dropdown icon  to display the list of states.

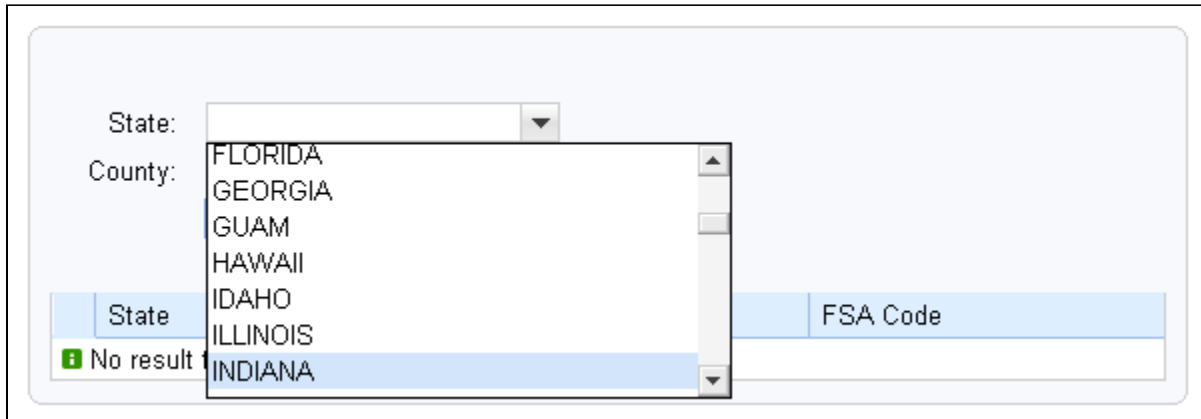
FSA Codes



State	County	FSA Code
No result		

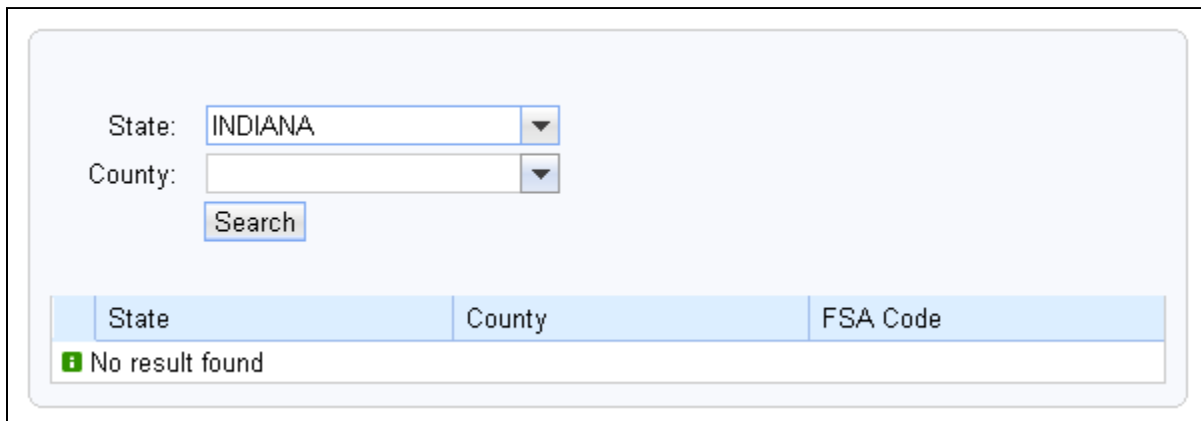
17. Scroll to the State.

FSA Codes



18. Click the State INDIANA .

FSA Codes



19. Click the **County** dropdown icon ▼ to display the list of Counties.

20. Scroll to the County.

21. Click the **County** RUSH .

22. Click the **Search** button to display the County.

FSA Codes

State: ▼

County: ▼

State	County	FSA Code
INDIANA	RUSH	18139

23. Click on the State **INDIANA** to populate the County field and to return to the Customer FSA Power of Attorney page.

Customer: BC FARMS INC FSA Power of Attorney

Saved Searches ▼
Go Advanced

Customer: BC FARMS INC
Back

Cancel
Save & Back

▼ FSA Power of Attorney

▼ Attorney in Fact General Data

Attorney-In-Fact:	<input type="text" value="8000000179"/>	Effective Date:*	<input type="text" value="04/09/2013"/>
Full Name:	<input type="text" value="MILDRED H HARRIS"/>	Status:	<input type="text" value="In Creation"/> ▼
State:	<input type="text" value="IN"/>	Revoked/Cancelled Da...:	<input type="text" value="12/31/9999"/>
County:*	<input type="text" value="RUSH"/>	Revoked/Cancelled Re...:	<input type="text" value=""/> ▼
Address:	<input type="text" value="6759 Main St."/>		
Receiving Office:	<input type="text" value="SHELBY COUNTY - IN"/>		
Source:	<input type="text" value="SAP"/> ▼		

Attach Document:

▼ FSA, NRCS and CCC Programs New

Actions	Program
	All current and all future programs ▼

▼ Program Transactions New

Actions	Transaction
	All actions ▼


▼ Farms New

24. Click the **Receiving Office** field Open Input Help icon

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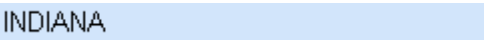

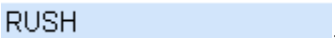

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-  The system will default to the County Office, of the user, into the Receiving Office field. If the correct value is in the field, you can skip the next 9 steps and go directly to step View FSA, NRCS and CCC Programs assignment block.

Service Center Search

State:	<input type="text"/>	▼				
County:	<input type="text"/>	▼				
	<input type="button" value="Search"/>					
<table border="1"> <thead> <tr> <th>Service Center Short Name</th> <th>Service Center Long Name</th> </tr> </thead> <tbody> <tr> <td colspan="2">No result found</td> </tr> </tbody> </table>			Service Center Short Name	Service Center Long Name	No result found	
Service Center Short Name	Service Center Long Name					
No result found						

25. Click State dropdown icon  to display the list of states.
26. Scroll to the State
27. Click the state INDIANA .
28. Click the County dropdown icon  to display the list of Counties.
29. Scroll to the County.
30. Click the County RUSH .
31. Click the **Search** button  to display the County Office Service Center.

Service Center Search

State:	INDIANA	▼						
County:	RUSH	▼						
	<input type="button" value="Search"/>							
<table border="1"> <thead> <tr> <th>Service Center Short Name</th> <th>Service Center Long Name</th> </tr> </thead> <tbody> <tr> <td>RUSH COUNTY - IN</td> <td>SHELLBY COUNTY FARM SERVICE AG...</td> </tr> <tr> <td>RUSH COUNTY - IN</td> <td></td> </tr> </tbody> </table>			Service Center Short Name	Service Center Long Name	RUSH COUNTY - IN	SHELLBY COUNTY FARM SERVICE AG...	RUSH COUNTY - IN	
Service Center Short Name	Service Center Long Name							
RUSH COUNTY - IN	SHELLBY COUNTY FARM SERVICE AG...							
RUSH COUNTY - IN								

32. Click the Service Center Short Name  to populate the



County Office Name in the Receiving Office field and to return to the Customer FSA Power of Attorney page.

Customer: BC FARMS INC FSA Power of Attorney

Customer: BC FARMS INC

State: IN Revoked/Cancelled Da... 12/31/9999

County: RUSH Revoked/Cancelled Re...

Address: 6759 Main St. Source: SAP

Receiving Office: SHELLBY COUNTY FARM SERVICE

Attach Document: Attach

- FSA, NRCS and CCC Programs New
 Actions: Program
 All current and all future programs

- Program Transactions New
 Actions: Transaction
 All actions

- Farms New
 All Farms Farm
 No result found

- Insured Crops New
 All Crops Crop

33. View the **FSA, NRCS and CCC Programs** assignment block and complete as required.



The default is "All current and all future programs." The scope of what the person with the Power of Attorney can do, may be limited by selecting specific programs from the "Program" dropdown list.

Customer: BC FARMS INC FSA Power of Attorney

Customer: BC FARMS INC

State: IN Revoked/Cancelled Ua... 12/31/9999

County: RUSH Revoked/Cancelled Re...

Address: 6759 Main St. Source: SAP

Receiving Office: SHELLBY COUNTY FARM SERV(

Attach Document: Attach

FSA, NRCS and CCC Programs

Actions	Program
<input type="checkbox"/>	All current and all future programs

Program Transactions

Actions	Transaction
<input type="checkbox"/>	All actions

Farms

All Farms Farm

No result found

Insured Crops

All Crops Crop

34. View the **Program Transactions** assignment block and complete as required.



The default is "All Actions". The scope of what the person with the Power of Attorney can do, may be limited by selecting specific program transactions from the "Transaction" dropdown list.



Customer: BC FARMS INC FSA Power of Attorney

USDA FSA United States Department of Agriculture Farm Service Agency Welcome MITEST42 TRAIN42 Personalize System News Log Off

Saved Searches Go Advanced

Customer: BC FARMS INC Back

Cancel Save & Back Print

Actions	Program
	All current and all future programs

Program Transactions New

Actions	Transaction
	All actions

Farms New

All Farms Farm

No result found

Insured Crops New

All Crops Crop

No result found

Crop Insurance Transactions New

Actions	Transaction
	No result found

Signatures New

Signature count:

35. View the **Farms** assignment block and complete as required.



The default is "All Farms". The scope of what the person with the Power of Attorney can do, may be limited by selecting Farm and adding specific farms to the Power of Attorney. Farms are selected from Farm Records.



BC FARMS INC FSA Power of Attorney

USDA FSA United States Department of Agriculture Farm Service Agency Welcome MITEST42 TRAIN42 Personalize System News Log Off

Customer: BC FARMS INC

Cancel Save & Back Print

Actions	Program
	All current and all future programs

Program Transactions New

Actions	Transaction
	All actions

Farms New

All Farms Farm

No result found

Insured Crops New

All Crops Crop

No result found

Crop Insurance Transactions New

Actions	Transaction
	No result found

Signatures New

Signature count:

36. View **Insured Crops** Assignment Block and complete as required.



This step is Optional. The scope of what the person with the Power of Attorney can do, may be limited by selecting all crops or designating specific crops.



BC FARMS INC FSA Power of Attorney

USDA FSA United States Department of Agriculture Farm Service Agency Welcome MITEST42 TRAIN42 Personalize System News Log Off

Saved Searches Go Advanced

Customer: BC FARMS INC Back

Cancel Save & Back Print

Actions	Program
	All current and all future programs

Program Transactions New

Actions	Transaction
	All actions

Farms New

All Farms Farm

No result found

Insured Crops New

All Crops Crop

No result found


Crop Insurance Transactions New

Actions	Transaction
	No result found

Signatures New

Signature count:

37. View Crop Insurance Transactions Assignment Block.

-  This step is Optional. By clicking New the scope of what the person with the Power of Attorney can do, may be limited by selecting specific transactions from the Transaction dropdown.



Customer: BC FARMS INC

Actions	Signature Date	Witnessed	Partner ID
	04/11/2013	Notarized	JOHN E TAYLOR

38. Click the **Save & Back** button

Submit Relationship

Is all the data displayed complete and accurate? Active representative capacity data cannot be modified after it is submitted. It can only be revoked. Are you sure you wish to continue?

39. Click the **Yes** button if all information is accurate and complete.

Customer: BC FARMS INC

Save | Cancel | Fact Sheet | PDF Fact Sheet | More ▾

Control Flags

Archived:
Inactive:



Addresses | Address Types | Communication Numbers | E-Mails

New

Actions	Address	Current	Valid From
	391 S 350 E / RUSHVILLE IN 46173-7847	<input checked="" type="checkbox"/>	10/05/2012


Representative Capacity | Relationships | Member Signatures

New | History Data


Actions	Type	Business Partner	Status	Effective Date
 	Has FSA Attorney in Fact	MILDRED H HARRIS	In Creation	04/16/2013

Program Participation | Associated Counties


Edit

40. Click **Print** Action button  to print out the "Created" FSA Power of Attorney.


File Download

File Download 

Do you want to open or save this file?

 Name: uif_callback.pdf
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41. Click **Open** button .



Print Preview

Click to print this PDF file or pages from it

FSA-211
(12-17-08)

U. S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Natural Resources Conservation Service -
Commodity Credit Corporation - Federal Crop Insurance Corporation - Risk Management Agency

POWER OF ATTORNEY

THE UNDERSIGNED does hereby appoint the following grantee:
(1) MILDRED H HARRIS of the following address: (2) 1445 W 650 N RUSHVILLE
RUSH in the county of: (3) RUSH in the State of:
(4) IN the attorney-in-fact for (5) BC FARMS INC

(insert grantor's name) in connection with the Farm Service Agency, Natural Resources Conservation Service Agency, or Commodity Credit Corporation programs checked **NOTE: This power of attorney form is not valid for FSA Farm Loan Program purposes.**

A. FSA, NRCS and CCC PROGRAMS
(Check applicable programs)

<input type="checkbox"/> 1. All current programs.	<input type="checkbox"/> 10. Noninsured Crop Disaster Assistance Program.
<input checked="" type="checkbox"/> 2. All current and all future programs.	<input type="checkbox"/> 11. Marketing Assistance Loans and Loan Deficiency Payments.
<input type="checkbox"/> 3. Direct and Counter-Cyclical Program.	<input type="checkbox"/> 12. Milk Income Loss Contract Program.
<input type="checkbox"/> 4. Average Crop Revenue Election Program.	<input type="checkbox"/> 13. Farm Storage Facility Loan Program.
<input type="checkbox"/> 5. Supplemental Revenue Assistance Payments Program (SURE).	<input type="checkbox"/> 14. FSA Conservation Programs.
<input type="checkbox"/> 6. Tree Assistance Program (TAP).	<input type="checkbox"/> 15. NRCS Conservation Programs.
<input type="checkbox"/> 7. Livestock Indemnity Program (LIP).	<input type="checkbox"/> 16. Tobacco Programs.
<input type="checkbox"/> 8. Livestock Forage Disaster Program (LFP).	<input type="checkbox"/> 17. Other (Specify):
<input type="checkbox"/> 9. Emergency Assistance for Livestock, Honey Bees, and Farm-Raised Fish (ELAP).	

B. TRANSACTIONS for FSA, NRCS and CCC PROGRAMS
(Check applicable actions)

<input checked="" type="checkbox"/> 1. All actions.
<input type="checkbox"/> 2. Signing applications, agreements, and contracts.
<input type="checkbox"/> 3. Making reports.
<input type="checkbox"/> 4. Conducting all marketing assistance loan and LDP transactions.
<input type="checkbox"/> 5. AGI Certification
<input type="checkbox"/> 6. Routing Banking Accounts
<input type="checkbox"/> 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 FCIC crop insurance policies. Checking any of the FCIC transactions does not have any impact as to the FSA, NRCS or CCC transactions checked above:

C. INSURED CROPS/STATE/COUNTY
(Enter "All" or specify each crop, state, county and year(s))


1. _____	<input type="checkbox"/> 1. All actions.	<input type="checkbox"/> 5. Making transfers and cancellations.
2. _____	<input type="checkbox"/> 2. Making application for insurance.	<input type="checkbox"/> 6. Making contract changes.
3. _____	<input type="checkbox"/> 3. Reporting crop acreage and production reports.	<input type="checkbox"/> 7. Other (Specify):
4. _____	<input type="checkbox"/> 4. Reporting a notice of damage or loss and making claim for indemnity.	

D. CROP INSURANCE TRANSACTIONS
(Check applicable actions)

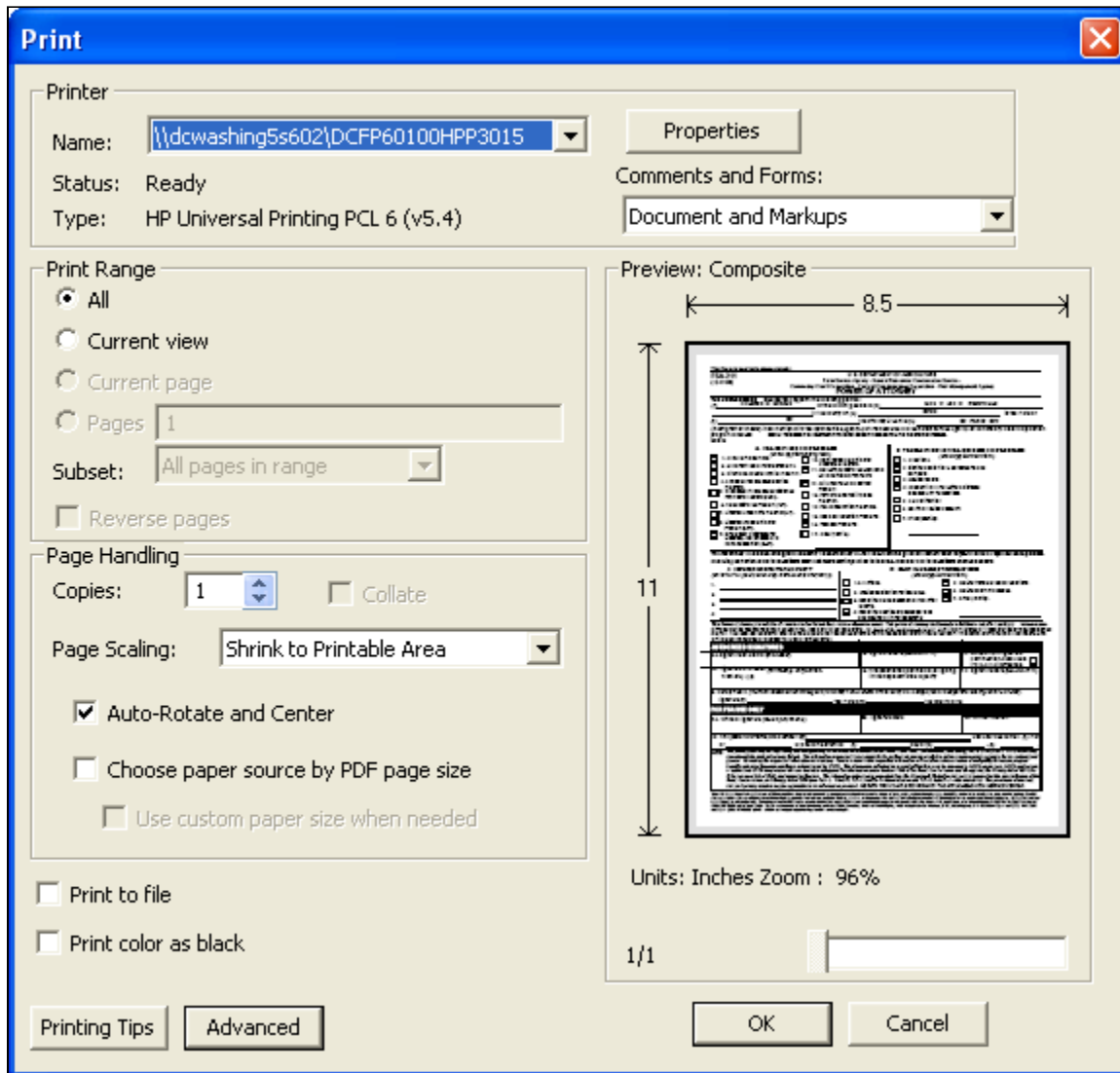
This Power of Attorney is valid in all counties in the United States unless otherwise noted. This power of attorney shall remain in full force and effect until (1) written notice of its revocation has been duly served upon FSA, NRCS or CCC as appropriate; (2) death of the undersigned grantor; or (3) 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 USDA Service Center.

AUTHORIZED SIGNATURES

6A. Signature of Grantor (Individual)	6B. Signature Date (MM-DD-YYYY)	6C. For Grantor's Signature Continuation, check here if FSA-211A is attached. <input type="checkbox"/>
7A. Signature of Grantor (Partnership, Corporation)	7B. Title/Relationship of Individual Signing	7C. Signature Date (MM-DD-YYYY)

42. Click **Print** button  to print the FSA-Power of Attorney.

Print



43. Click **OK** button .



Print Preview -- Webpage Dialog

Print Preview -- Webpage Dialog

This form is available electronically.

FSA-211
(12-17-08)

U. S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Natural Resources Conservation Service -
Commodity Credit Corporation - Federal Crop Insurance Corporation - Risk Management Agency

POWER OF ATTORNEY

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RUSH in the county of: (3) RUSH in the State of:
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(insert grantor's name) in connection with the Farm Service Agency, Natural Resources Conservation Service Agency, or Commodity Credit Corporation programs checked **NOTE: This power of attorney form is not valid for FSA Farm Loan Program purposes.**

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(Check applicable programs)

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 2. All current and all future programs.
 3. Direct and Counter-Cyclical Program.
 4. Average Crop Revenue Election Program.
 5. Supplemental Revenue Assistance Payments Program (SURE).
 6. Tree Assistance Program (TAP).
 7. Livestock Indemnity Program (LIP).
 8. Livestock Forage Disaster Program (LFP).
 9. Emergency Assistance for Livestock, Honey Bees, and Farm-Raised Fish (ELAP).
 10. Noninsured Crop Disaster Assistance Program.
 11. Marketing Assistance Loans and Loan Deficiency Payments.
 12. Milk Income Loss Contract Program.
 13. Farm Storage Facility Loan Program.
 14. FSA Conservation Programs.
 15. NRCS Conservation Programs.
 16. Tobacco Programs.
 17. Other (Specify):

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(Check applicable actions)

1. All actions.
 2. Signing applications, agreements, and contracts.
 3. Making reports.
 4. Conducting all marketing assistance loan and LDP transactions.
 5. AGI Certification
 6. Routing Banking Accounts
 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 FCIC crop insurance policies. Checking any of the FCIC transactions does not have any impact as to the FSA, NRCS or CCC transactions checked above:

C. INSURED CROPS/STATE/COUNTY
(Enter "All" or specify each crop, state, county and year(s))

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


D. CROP INSURANCE TRANSACTIONS
(Check applicable actions)

1. All actions.
 2. Making application for insurance.
 3. Reporting crop acreage and production reports.
 4. Reporting a notice of damage or loss and making claim for indemnity.
 5. Making transfers and cancellations.
 6. Making contract changes.
 7. 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, NRCS or CCC as appropriate; (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 USDA Service Center.

AUTHORIZED SIGNATURES

6A. Signature of Grantor (Individual)	6B. Signature Date (MM-DD-YYYY)	6C. For Grantor's Signature Continuation, check here if FSA-211A is attached. <input type="checkbox"/>
7A. Signature of Grantor (Partnership, Corporation)	7B. Title/Relationship of Individual Signing	7C. Signature Date (MM-DD-YYYY)

44. Click the **Close** button  once you are through printing the form.



Customer: BC FARMS INC Representative Capacity

USDA FSA United States Department of Agriculture Farm Service Agency Welcome MITEST42 TRAIN42 Personalize System News

Customer: BC FARMS INC

E-Mail Address: test@training.com
Communication.. E-Mail

Notes

Control Flags
Archived:
Inactive:

Addresses Address Types Communication Numbers E-Mails
New

Acti...	Address	Curr...	Valid From	Valid To
	1852 MAIN ST. / RUSHVILLE IN 46173...	<input checked="" type="checkbox"/>	03/04/2010	12/31/9999


Representative Capacity Relationships Member Signatures
New History Data


A...	Type	Business Partner	Status	Effective Date	Revoked/Canc...
<input checked="" type="checkbox"/>	Has FSA Attorn...	JULIE R VANDE...	Active	03/05/2010	12/31/9999
<input checked="" type="checkbox"/>	Has FSA Attorn...	MILDRED H HA...	In Creation	04/09/2013	12/31/9999

Program Participation Associated Counties
Edit

A...	Customer Type	Organization Name	General Program Int...	Current Participant
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45. Click the **HOME** button  to go to the CRM Home page.

 See the **Signature and Attachments for FSA Power of Attorney** simulation and work instructions for how to activate the Power of Attorney once it is signed and completed.

 The FSA Power of Attorney will now reflect as "In Creation".



Result

You have created an FSA Power of Attorney with an in creation status.



Next Steps

See the **Signature and Attachments for FSA Power of Attorney** simulation and work instructions for how to activate the Power of Attorney once it is created.