

## Purpose

Section 14003 of the Food, Conservation, and Energy Act of 2008 (2008 Farm Bill) amended section 2501A of the Food, Agriculture, Conservation, and Trade Act of 1990 (7 U.S.C. 2279-1) by adding a provision requiring FSA, NRCS, and RD to provide a receipt, upon request, to any current or prospective producer or landowner requesting a USDA benefit or service.

The requirements established by the 2008 Farm Bill were further amended by Section 12204 of the Agricultural Act of 2014 (2014 Farm Bill) to **require** FSA, NRCS and RD to provide a receipt when a current or prospective producer or landowner requests a USDA benefit or service. Specifically, 7 U.S.C. 2779-1, as amended by the 2014 Farm Bill, provides:

***“(e) Receipt for service or denial of service***

*In any case in which a current or prospective producer or landowner, in person or in writing, requests from the Farm Service Agency, the Natural Resources Conservation Service, or an agency of the Rural Development Mission Area any benefit or service offered by the Department to agricultural producers or landowners, the Secretary shall issue, on the date of the request, a receipt to the producer or landowner that contains-*

- (1) the date, place, and subject of the request; and*
- (2) the action taken, not taken, or recommended to the producer or landowner.”*

In many situations, program applicants or participants are routinely provided with copies of forms and documents in delivery of USDA benefits and services. These forms and documents will serve as a receipt, with the exception of certain loan programs. FSA, NRCS, and RD collaboratively developed webRFS to issue and maintain receipts when a request for benefit or service does not result in the generation of a form or document, or when the request pertains to certain loan programs. FSA, NRCS, and RD employees will use webRFS to issue a receipt:

- when required by Section C2 of the webRFS User’s Guide, or
- any time a customer requests a receipt.

## Trigger

Receipts shall be issued to all actual and prospective producers and landowners, who visit, mail or email a USDA Service Center.

Receipts shall be issued for anyone requesting a benefit or service in which paper based copies are not provided back to the customer and for loan programs listed on the webRFS input screen.

*A RFS should be provided any time a customer requests one.*

## Prerequisites

- Internet connectivity
- Access to webRFS
- eAuth Level 2

## Helpful Hints

- 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 <b>general</b> 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 <b>cautionary</b> note		Use this note to communicate to the end-user of something that <b>MUST</b> be completed or another trigger that should be started and is related to the procedure.
A <b>critical</b> note		Use this note to specify something that <b>MUST NOT</b> be done during the procedure.

<b>Contact</b> 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 <b>reference</b> 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 webRFS Home Page.}

### Home Page - Receipt For Service

**USDA** Receipt For Service

User: JULIE  
Session Timeout: 20 Min.  
LOGOUT

RECEIPT ENTRY    RECEIPT SEARCH

#### What is the USDA Receipt for Service (RFS) system?

The USDA RFS system allows NRCS, FSA and RD employees to create a receipt for services provided to customers in accordance with the 2014 Farm Bill. There are options to send the receipts via email, printed and handed to the customer in person or printed and sent via US mail. RFS also offers search functionality across all receipts in the event a receipt needs to be emailed or printed again.

#### Who can access the USDA Receipt for Service (RFS) system?

Access is maintained by the USDA eAuth system. Any NRCS, FSA or RD user with a USDA eAuth level 2 account can generate and search for receipts in the system.

[NRCS Home](#) | [FSA Home](#) | [RD Home](#) | [USDA.gov](#) | [Civil Rights](#) | [FOIA](#) | [Accessibility Statement](#)

2. Click Receipt Entry link label .

## Receipt Entry - Receipt For Service



### Receipt For Service

[RECEIPT ENTRY](#)   
 [RECEIPT SEARCH](#)

User: JULIE  

Session Timeout: 20 Min.

[LOGOUT](#)

**Agency: \***     NRCS     FSA     RD

**Customer Name: \***            Suffix: --

**Business Entity:**   

**Customer Street Address:**   

**Customer Zip Code:**   

**Customer Email:**   

**Contact Method: \***     Office Visit     Email     Fax     U.S. Mail

**Service Requested (Multi-Select): \***     FLP Direct Loan Application Requested     FLP Direct Loan Application Received

FLP Subordination Application Requested     FLP Subordination Application Received     FLP Primary Loan Servicing Application Requested

FLP Primary Loan Servicing Application Received     FSFL Application Requested     FSFL Application Received     Report NAP Loss

FR Benefit Requested     General Program Information     County Committee Elections     Other (Describe Below)

3. Click Customer Name: \* text box .

 The Agency radio button will default to the user's agency via eAuthentication. The user can change the agency by selecting a different radio button.

## Receipt Entry - Receipt For Service



### Receipt For Service

[RECEIPT ENTRY](#)   
 [RECEIPT SEARCH](#)

User: JULIE  

Session Timeout: 20 Min.

[LOGOUT](#)

**Agency: \***     NRCS     FSA     RD

**Customer Name: \***            Suffix: --

**Business Entity:**   

**Customer Street Address:**   

**Customer Zip Code:**   

**Customer Email:**   

**Contact Method: \***     Office Visit     Email     Fax     U.S. Mail

**Service Requested (Multi-Select): \***     FLP Direct Loan Application Requested     FLP Direct Loan Application Received

FLP Subordination Application Requested     FLP Subordination Application Received     FLP Primary Loan Servicing Application Requested

FLP Primary Loan Servicing Application Received     FSFL Application Requested     FSFL Application Received     Report NAP Loss

FR Benefit Requested     General Program Information     County Committee Elections     Other (Describe Below)

#### 4. As required, complete/review the following fields:

Field	R/O/C	Description
Customer Name: *	R	<b>Example:</b> Joe



Customer Name is a required field. The user can enter the first name, the first and last name, a partial name or 'guest' for those customers who decline to give a name.

## Receipt Entry - Receipt For Service



### Receipt For Service

[RECEIPT ENTRY](#)    [RECEIPT SEARCH](#)

User: JULIE  

Session Timeout: 20 Min.

[LOGOUT](#)

**Agency: \***     NRCS     FSA     RD

**Customer Name: \***            Suffix: --

**Business Entity:**   

**Customer Street Address:**   

**Customer Zip Code:**   

**Customer Email:**   

**Contact Method: \***     Office Visit     Email     Fax     U.S. Mail

**Service Requested (Multi-Select): \***     FLP Direct Loan Application Requested     FLP Direct Loan Application Received

FLP Subordination Application Requested     FLP Subordination Application Received     FLP Primary Loan Servicing Application Requested

FLP Primary Loan Servicing Application Received     FSFL Application Requested     FSFL Application Received     Report NAP Loss

FR Benefit Requested     General Program Information     County Committee Elections     Other (Describe Below)

5. Click Customer Name: \* text box .



With more common names, be as specific as possible, including the suffix when available.

## Receipt Entry - Receipt For Service

Receipt For Service

 User: JULIE [REDACTED]  
 Session Timeout: 20 Min.  
 LOGOUT

**Agency: \***
 NRCS
  FSA
  RD

**Customer Name: \***

**Business Entity:**

**Customer Street Address:**

**Customer Zip Code:**

**Customer Email:**

**Contact Method: \***
 Office Visit
  Email
  Fax
  U.S. Mail

**Service Requested (Multi-Select): \***
 FLP Direct Loan Application Requested
  FLP Direct Loan Application Received  
 FLP Subordination Application Requested
  FLP Subordination Application Received
  FLP Primary Loan Servicing Application Requested  
 FLP Primary Loan Servicing Application Received
  FSFL Application Requested
  FSFL Application Received
  Report NAP Loss  
 FR Benefit Requested
  General Program Information
  County Committee Elections
  Other (Describe Below)

6. As required, complete/review the following fields:

Field	R/O/C	Description
Customer Name: *	O	<b>Example:</b> Farmer

7. Click Customer Zip Code: text box .

Business Entity, Street Address, Zip Code and Email are all optional fields. Entering an email address will trigger a RFS to automatically be emailed to the customer when the user selects 'Email' as the receipt type and then submit at the end of the process.

Inserting a Zip Code will prompt the Office Location to auto-populate when there is a Service Center in that zip code.

## Receipt Entry - Receipt For Service


Receipt For Service

User: JULIE  

Session Timeout: 20 Min.

LOGOUT

RECEIPT ENTRY
RECEIPT SEARCH

**Agency:** \*  NRCS  FSA  RD

**Customer Name:** \*   Suffix: --

**Business Entity:**

**Customer Street Address:**

**Customer Zip Code:**

**Customer Email:**

**Contact Method:** \*  Office Visit  Email  Fax  U.S. Mail

**Service Requested (Multi-Select):** \*  FLP Direct Loan Application Requested  FLP Direct Loan Application Received  
 FLP Subordination Application Requested  FLP Subordination Application Received  FLP Primary Loan Servicing Application Requested  
 FLP Primary Loan Servicing Application Received  FSFL Application Requested  FSFL Application Received  Report NAP Loss  
 FR Benefit Requested  General Program Information  County Committee Elections  Other (Describe Below)

### 8. As required, complete/review the following fields:

Field	R/O/C	Description
Customer Zip Code:	O	<b>Example:</b> 74467

## Receipt Entry - Receipt For Service


Receipt For Service

User: JULIE  

Session Timeout: 20 Min.

LOGOUT

RECEIPT ENTRY
RECEIPT SEARCH

**Agency:** \*  NRCS  FSA  RD

**Customer Name:** \*   Suffix: --

**Business Entity:**

**Customer Street Address:**

**Customer Zip Code:**

**Customer Email:**

**Contact Method:** \*  Office Visit  Email  Fax  U.S. Mail

**Service Requested (Multi-Select):** \*  FLP Direct Loan Application Requested  FLP Direct Loan Application Received  
 FLP Subordination Application Requested  FLP Subordination Application Received  FLP Primary Loan Servicing Application Requested  
 FLP Primary Loan Servicing Application Received  FSFL Application Requested  FSFL Application Received  Report NAP Loss  
 FR Benefit Requested  General Program Information  County Committee Elections  Other (Describe Below)

9.

Click Office Visit radio button



Only one Contact Method may be selected.

## Receipt Entry - Receipt For Service

<b>Customer Zip Code:</b>	74467
<b>Customer Email:</b>	For Sending Receipt
<b>Contact Method: *</b>	<input checked="" type="radio"/> Office Visit <input type="radio"/> Email <input type="radio"/> Fax <input type="radio"/> U.S. Mail
<b>Service Requested (Multi-Select): *</b>	<input type="checkbox"/> FLP Direct Loan Application Requested <input type="checkbox"/> FLP Direct Loan Application Received <input type="checkbox"/> FLP Subordination Application Requested <input type="checkbox"/> FLP Subordination Application Received <input type="checkbox"/> FLP Primary Loan Servicing Application Requested <input type="checkbox"/> FLP Primary Loan Servicing Application Received <input type="checkbox"/> FSFL Application Requested <input type="checkbox"/> FSFL Application Received <input type="checkbox"/> Report NAP Loss <input type="checkbox"/> FP Benefit Requested <input type="checkbox"/> General Program Information <input type="checkbox"/> County Committee Elections <input type="checkbox"/> Other (Describe Below)
<b>Service Requested Additional Description:</b>	Optional
<b>Contact Resolution (Multi-Select): *</b>	<input type="checkbox"/> Publication/Fact Sheet/Form Provided <input type="checkbox"/> Follow Up Contact/Appointment Scheduled <input type="checkbox"/> Referral Made to: (enter name of organization below) <input type="checkbox"/> Customer Registered <input type="checkbox"/> Customer Data Updated <input type="checkbox"/> Program Application Taken (Enter Program Name Below) <input type="checkbox"/> Application Provided (Enter Program Name Below) <input type="checkbox"/> Verbal Information Given <input type="checkbox"/> Other (Describe Below)
<b>Contact Resolution Additional Description:</b>	Optional

10. Click Other (Describe Below) check box  Other (Describe Below)



Select all of the Service Requested options that apply. It is required to have at least one. If 'Other' is selected, the user is required to enter information into the Service Request Additional Description field.

## Receipt Entry - Receipt For Service

<b>Customer Zip Code:</b>	74467
<b>Customer Email:</b>	For Sending Receipt
<b>Contact Method: *</b>	<input checked="" type="radio"/> Office Visit <input type="radio"/> Email <input type="radio"/> Fax <input type="radio"/> U.S. Mail
<b>Service Requested (Multi-Select): *</b>	<input type="checkbox"/> FLP Direct Loan Application Requested <input type="checkbox"/> FLP Direct Loan Application Received <input type="checkbox"/> FLP Subordination Application Requested <input type="checkbox"/> FLP Subordination Application Received <input type="checkbox"/> FLP Primary Loan Servicing Application Requested <input type="checkbox"/> FLP Primary Loan Servicing Application Received <input type="checkbox"/> FSFL Application Requested <input type="checkbox"/> FSFL Application Received <input type="checkbox"/> Report NAP Loss <input type="checkbox"/> FP Benefit Requested <input type="checkbox"/> General Program Information <input type="checkbox"/> County Committee Elections <input checked="" type="checkbox"/> Other (Describe Below)
<b>Service Requested Additional Description:</b>	Optional
<b>Contact Resolution (Multi-Select): *</b>	<input type="checkbox"/> Publication/Fact Sheet/Form Provided <input type="checkbox"/> Follow Up Contact/Appointment Scheduled <input type="checkbox"/> Referral Made to: (enter name of organization below) <input type="checkbox"/> Customer Registered <input type="checkbox"/> Customer Data Updated <input type="checkbox"/> Program Application Taken (Enter Program Name Below) <input type="checkbox"/> Application Provided (Enter Program Name Below) <input type="checkbox"/> Verbal Information Given <input type="checkbox"/> Other (Describe Below)
<b>Contact Resolution Additional Description:</b>	Optional

11. As required, complete/review the following fields:

Field	R/O/C	Description
Service Requested Additional Description:	R	<b>Example:</b> Requests records to be updated.

## Receipt Entry - Receipt For Service

<b>Customer Zip Code:</b>	<input type="text" value="74467"/>
<b>Customer Email:</b>	<input type="text" value="For Sending Receipt"/>
<b>Contact Method: *</b>	<input checked="" type="radio"/> Office Visit <input type="radio"/> Email <input type="radio"/> Fax <input type="radio"/> U.S. Mail
<b>Service Requested (Multi-Select): *</b>	<input type="checkbox"/> FLP Direct Loan Application Requested <input type="checkbox"/> FLP Direct Loan Application Received <input type="checkbox"/> FLP Subordination Application Requested <input type="checkbox"/> FLP Subordination Application Received <input type="checkbox"/> FLP Primary Loan Servicing Application Requested <input type="checkbox"/> FLP Primary Loan Servicing Application Received <input type="checkbox"/> FSFL Application Requested <input type="checkbox"/> FSFL Application Received <input type="checkbox"/> Report NAP Loss <input type="checkbox"/> FP Benefit Requested <input type="checkbox"/> General Program Information <input type="checkbox"/> County Committee Elections <input checked="" type="checkbox"/> Other (Describe Below)
<b>Service Requested Additional Description:</b>	<input type="text" value="Requests records to be updated"/>
<b>Contact Resolution (Multi-Select): *</b>	<input type="checkbox"/> Publication/Fact Sheet/Form Provided <input type="checkbox"/> Follow Up Contact/Appointment Scheduled <input type="checkbox"/> Referral Made to: (enter name of organization below) <input type="checkbox"/> Customer Registered <input type="checkbox"/> Customer Data Updated <input type="checkbox"/> Program Application Taken (Enter Program Name Below) <input type="checkbox"/> Application Provided (Enter Program Name Below) <input type="checkbox"/> Verbal Information Given <input type="checkbox"/> Other (Describe Below)
<b>Contact Resolution Additional Description:</b>	<input type="text" value="Optional"/>

12.

Click Customer Data Updated check box

Customer Data Updated



Select all of the Contact Resolution options that apply. One is required.

## Receipt Entry - Receipt For Service

FLP Primary Loan Servicing Application Received
  FSFL Application Requested
  FSFL Application Received
  Report NAP Loss

FP Benefit Requested
  General Program Information
  County Committee Elections
  Other (Describe Below)

**Service Requested Additional Description:**

Requests records to be updated.

**Contact Resolution (Multi-Select): \***
 Publication/Fact Sheet/Form Provided
  Follow Up Contact/Appointment Scheduled

Referral Made to: (enter name of organization below)
  Customer Registered
  Customer Data Updated

Program Application Taken (Enter Program Name Below)
  Application Provided (Enter Program Name Below)
  Verbal Information Given

Other (Describe Below)

**Contact Resolution Additional Description:**

Optional

**Date Of Service:** 10/21/2014

**Receipt (Multi-Select): \***
 Hand Delivered
  Email
  U.S. Mail
  Customer Declined

**Office Location:** State: Oklahoma  Servicing Office: WAGONER COUNTY FARM SERVICE AGENCY (64960)

13. Click Date Of Service: text box .



Date of Service is a required field and will default to the date the receipt is being created. The user can edit this field.

## Receipt Entry - Receipt For Service

FLP Primary Loan Servicing Application Received
  FSFL Application Requested
  FSFL Application Received
  Report NAP Loss

FP Benefit Requested
  General Program Information
  County Committee Elections
  Other (Describe Below)

**Service Requested Additional Description:**

Requests records to be updated.

**Contact Resolution (Multi-Select): \***
 Publication/Fact Sheet/Form Provided
  Follow Up Contact/Appointment Scheduled

Referral Made to (enter name of association below)
  Customer Registered
  Customer Data Updated

Program Application Provided (Enter Program Name Below)
  Verbal Information Given

Other (Describe)

**Contact Resolution**

Optional

**Date Of Service:** 10/21/2014

**Receipt (Multi-Select): \***
 Hand Delivered
  Email
  U.S. Mail
  Customer Declined

**Office Location:** State: Oklahoma  Servicing Office: WAGONER COUNTY FARM SERVICE AGENCY (64960)

**Submit**

14. Click 21 link label **21**.

## Receipt Entry - Receipt For Service

<input type="checkbox"/>	FLP Primary Loan Servicing Application Received	<input type="checkbox"/>	FSFL Application Requested	<input type="checkbox"/>	FSFL Application Received	<input type="checkbox"/>	Report NAP Loss
<input type="checkbox"/>	FP Benefit Requested	<input type="checkbox"/>	General Program Information	<input type="checkbox"/>	County Committee Elections	<input checked="" type="checkbox"/>	Other (Describe Below)
<b>Service Requested Additional Description:</b>							
<input type="text" value="Requests records to be updated."/>							
<b>Contact Resolution (Multi-Select): *</b>							
<input type="checkbox"/>	Publication/Fact Sheet/Form Provided	<input type="checkbox"/>	Follow Up Contact/Appointment Scheduled				
<input type="checkbox"/>	Referral Made to: (enter name of organization below)	<input type="checkbox"/>	Customer Registered	<input checked="" type="checkbox"/>	Customer Data Updated		
<input type="checkbox"/>	Program Application Taken (Enter Program Name Below)	<input type="checkbox"/>	Application Provided (Enter Program Name Below)	<input type="checkbox"/>	Verbal Information Given		
<input type="checkbox"/>	Other (Describe Below)						
<b>Contact Resolution Additional Description:</b>							
<input type="text" value="Optional"/>							
<b>Date Of Service:</b>	<input type="text" value="10/21/2014"/>						
<b>Receipt (Multi-Select): *</b>							
<input type="checkbox"/>	Hand Delivered	<input type="checkbox"/>	Email	<input type="checkbox"/>	U.S. Mail	<input type="checkbox"/>	Customer Declined
<b>Office Location:</b>	State:	<input type="text" value="Oklahoma"/>	Servicing Office:	<input type="text" value="WAGONER COUNTY FARM SERVICE AGENCY (64960)"/>			
<input type="button" value="Submit"/>							

15. Click Hand Delivered check box  Hand Delivered

## Receipt Entry - Receipt For Service

FLP Primary Loan Servicing Application Received  FSFL Application Requested  FSFL Application Received  Report NAP Loss

FP Benefit Requested  General Program Information  County Committee Elections  Other (Describe Below)

**Service Requested Additional Description:**

Requests records to be updated.

**Contact Resolution (Multi-Select): \***  Publication/Fact Sheet/Form Provided  Follow Up Contact/Appointment Scheduled

Referral Made to: (enter name of organization below)  Customer Registered  Customer Data Updated

Program Application Taken (Enter Program Name Below)  Application Provided (Enter Program Name Below)  Verbal Information Given

Other (Describe Below)

**Contact Resolution Additional Description:**

Optional

**Date Of Service:** 10/21/2014

**Receipt (Multi-Select): \***  Hand Delivered  Email  U.S. Mail  Customer Declined

**Office Location:** State: Oklahoma  Servicing Office: WAGONER COUNTY FARM SERVICE AGENCY (64960)

16. Click Submit button .

## Receipt for Service

FLP Primary Loan  
 FP Benefit Request  
**Service Requested**  
  
**Contact Resolution**  
 Referral Made to:  
 Program Application  
 Other (Describe Below)  
**Contact Resolution**  
  
**Date Of Service:**  
**Receipt (Multi-Select)**  
**Office Location:**

Receipt #: 357


United States Department of Agriculture

### RECEIPT FOR SERVICE

On October 21, 2014, JULIE of the WAGONER COUNTY FARM SERVICE AGENCY discussed the following services and benefits provided by the USDA Farm Service Agency (FSA) with Joe Farmer. The discussion took place via Office Visit.

**Servicing Office Address:** 26114 STATE HWY 51, WAGONER, OK 74467

**Requested:**  
Other (Describe Below)  
Requests records to be updated.

**Resolution Provided:**  
Customer Data Updated

**Receipt #: 357**

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political

17.



Click control



The receipt will pop-up with the option to print. This will not be the only opportunity to print the receipt. The user can always search and re-print if necessary. See the 'Search RFS' simulation and work instruction for more information.

## Result

You have created a Receipt for Service.