

FSA-669A
(03-24-10)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

TO BE COMPLETED BY COUNTY FSA OFFICE

1. NAME OF NOMINEE (Type or Print Nominee's Full Name)		4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED	
2. ADDRESS OF NOMINEE		5. COUNTY WILLMETH	6. LAA #3 LAA #3
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.		7. STATE WA	
3A. SIGNATURE OF NOMINEE		3B. DATE	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 above-named person to be a candidate in the next County FSA Committee election for the county.</i>
<input type="checkbox"/> Check here if nominee is a write-in candidate.		8A. SIGNATURE OF NOMINATOR	8B. DATE
9. TO BE COMPLETED BY NOMINEE <i>If the individual is self nominating, no signature is required.</i>			
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 <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		RACE (Choose as many boxes as applicable) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
		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.			
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 (Public Law 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 independent 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 Personal 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.			



United States Department of Agriculture
Farm and Foreign Agricultural Services
Whitman County FSA Office
805 Vista Pl. Dr. Ste. 1
Colfax, WA 99111-9585

May 2010

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.
- Participating in county meetings and hearing producer appeals at the local county level.
- Notifying the State FSA Committee of LAA conditions.
- 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) #3. LAA #3 is located in the eastern third of Whitman County. 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 3A) to indicate a willingness to have their name placed on the ballot and agree to serve if elected. Item 8A reflects the nominator's signature and date. 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/wa>.

The deadline for nominations is **August 2, 2010**. 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 2, 2010.

Sincerely,
/s/ Ann Holbrook
Acting 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 2010

WHITMAN COUNTY FSA NEWS

Whitman County FSA

805 Vista Point Dr. Ste. 1
Colfax WA 99111-9585
Phone: (509) 397-4301
Fax: (509) 397-6763

Office Hours

Monday – Friday
8:00 AM – 4:30 PM

County Committee

Larry Schroetlin, Chair
Greg D Hall, Vice Chair
David Swannack, Member
Gracie Miller, Advisor

Office Staff

Ann Holbrook, Acting CED
Nancy Doege, PT
Kara Lanthorn, PT
Fred Hendrickson, PT
Jonelle Olson, PT
Bonnie Riebold, PT
Doreen Riedner, PT
Kelley Betts, Temp. PT
Megan Brown, Temp PT
Michelle Peterschick, Intern

Farm Loan Staff

Houston Bruck, FLM
Spokane County FSA Office
Phone: (509) 924-7350 ext. 108

Important Dates to Remember

May 31

Memorial Day office closure

June 1

DCP/ACRE signup ends

June 30

Crop reporting deadline

July 15

ACRE production report
deadline



DCP/ACRE Update

Producers operating farms with crop acreage bases established under the Direct and Counter-cyclical Payment Program (DCP) may sign up for the 2010 program at this time.

The Average Crop Revenue Election (ACRE) program is an alternative to DCP participation. ACRE participants earn direct payments, but with a 20% reduction. Grain loan rates on ACRE-enrolled farms are also 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. The opportunity to elect ACRE will be offered each year 2010-12, but once elected the decision is irrevocable through 2012. All producers on a farm must agree to the election.

The signup period ends on **June 1, 2010**, for enrolling farms in the 2010 DCP and ACRE programs. Late-filed applications cannot be accepted. Please contact the FSA office to make an appointment.

ACRE participants for 2009 must turn in yields for 2009 and previous years by **July 15, 2010**.

Acres Reporting Deadline

The acres reporting deadline for most programs is **June 30, 2010**. Filing an accurate acres report for all crops and land uses, including failed acres and prevented planting acres, can prevent the loss of benefits for a variety of programs.

Failed acres must be reported within 15 days of the disaster event and before disposition of the crop. Prevented planting must be reported no later than 15 days after the final planting date.

Acres reports are required for many FSA programs. For crops other than NAP (Noninsured Crop Disaster Assistance Program) crops, acres reports are to be certified by the **June 30, 2010**.

Acres reports on crops for which NAP assistance may be paid are due in the county office by the earliest of these two options: 1) June 30, 2010, or 2) 15 calendar days before the onset of harvest or grazing of the specific crop acres being reported.

SURE Signup Continues

FSA continues to accept applications for the Supplemental Revenue Assistance Payments Program (SURE). SURE provides benefits for farm revenue losses due to natural disasters that occurred in the crop years 2008 through September 30, 2011. To be eligible for SURE payments, producers are required to obtain crop insurance on all crops in all counties or, for crops for which insurance is not available, producers must participate in the Non-Insured Crop Disaster Assistance Program (NAP) except for grazed acres. Coverage is not required for economically insignificant crops.

Socially Disadvantaged, Limited Resource, and beginning farmers or ranchers are exempt from the risk management purchase requirement.

Vacancy Announcement

FSA has 2 vacancies for paid interns in a two-year training program. Upon successful completion, the interns will be eligible for farm loan officer positions in Yakima and Ephrata. The position closes May 17, 2010. For more information, see the FSA website <http://www.fsa.usda.gov/wa> or contact Administrative Officer Jonna Provinsal 509-323-3007.