

FSA - 578 (09-13-16)

Farm Number: 10966

# REPORT OF COMMODITIES FARM AND TRACT DETAIL LISTING

DATE: 7-18-2019  
PAGE: 1

Operator Name and Address

GERALD A OSMERA  
1280 COUNTY ROAD 29  
WESTON, NE 68070-4046

Original: JM  
Revision:  
Cropland: 32.08  
Farmland: 39.75

Tract Number	CLU/Field	Crop/Commodity	Variety/Type	Irr Prc	Int Use	Actual Use	Land Use	Organic Status	Native Sod	C/C Status	Reporting Unit	Reported Quantity	Determined Quantity	Crop Land	Field ID	Official/Measured	Planting Date	Planting Period	End Date	
14734	2	SOYBN	COM	N	GR			C	N	I	A	3.52		Yes			5-20-2019	01		
		Producer	GERALD A OSMERA			Share	100.00	C	N	I	A	28.56		Yes	NAP Unit	1836	5-20-2019	01	7-18-2019	
		Producer	GERALD A OSMERA			Share	100.00													
		FSA Physical Location:	Saunders, Nebraska																	
PP	Cr/Co	Var/Type	Irr Prc	Int Use	Non-Irr	Irr	PP	Cr/Co	Var/Type	Irr Prc	Int Use	Non-Irr	Irr	PP	Cr/Co	Var/Type	Irr Prc	Int Use	Non-Irr	Irr
01	SOYBN	COM	N	GR	32.08															
Photo Number/Legal Description: SESW/20-14-5																				
Cropland: 32.08										Reported on Cropland: 32.08										
Difference: 0.00										Reported on Non-Cropland: 0.00										

Saunders, Nebraska

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PROGRAM YEAR: 2019

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# REPORT OF COMMODITIES FARM SUMMARY

**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 7 CFR Part 718, the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to collect producer certification of the report of acreage of crops/commodities and land use data which is needed in order to determine producer eligibility to participate in and receive benefits under FSA programs. The information collected on the 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 USDA/FSA-2, Farm Records File (Automated) and USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information may result in a denial of the producers request to participate in and receive benefits under FSA programs. 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 0560-0175. The time required to complete this information collection is estimated to average 30 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 criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

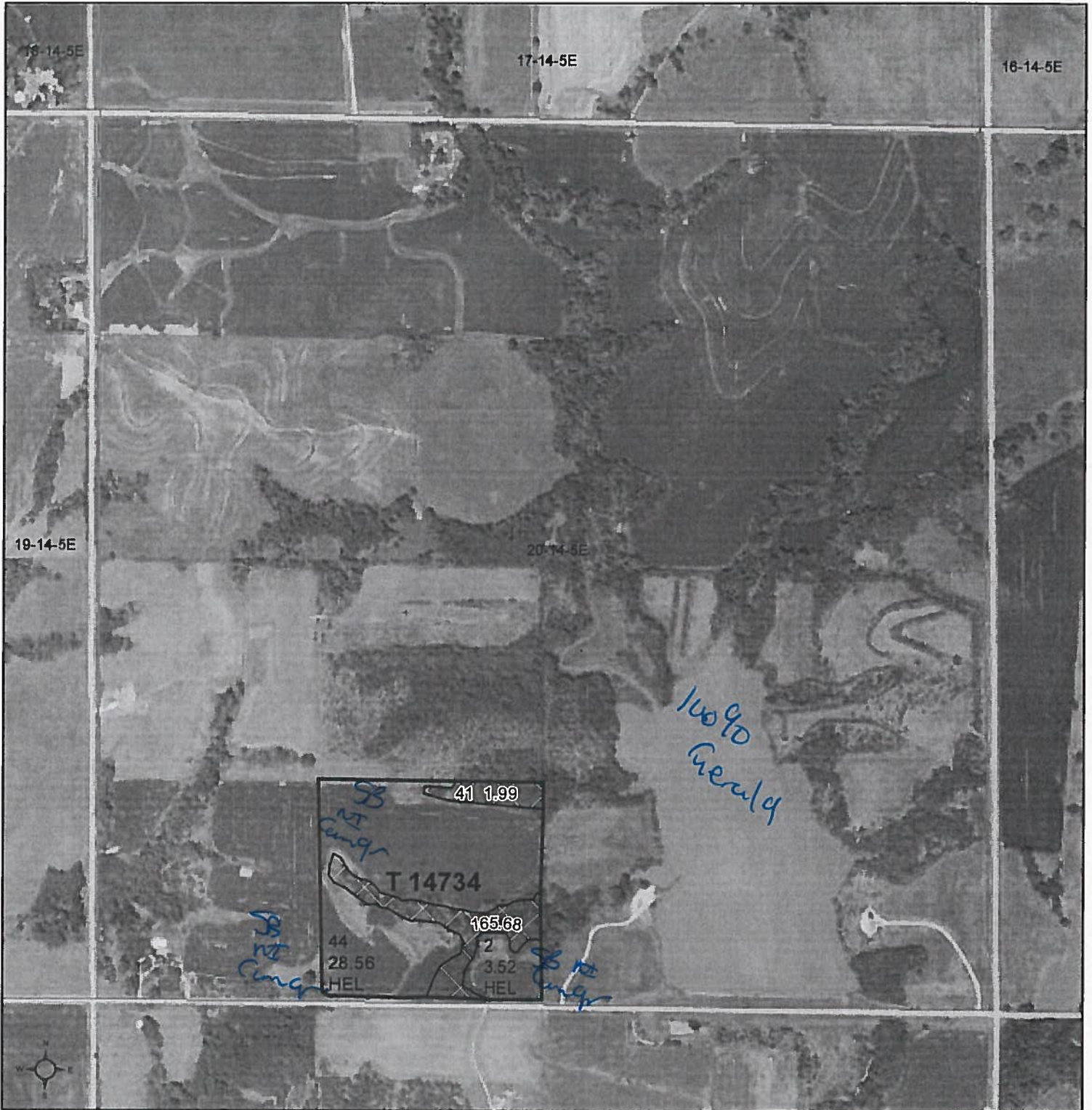
Planting Period	Crop/Commodity	Variety/Type	Irrigation Practice	Intended Use	Reported Quantity	Determined Quantity	Planting Period	Crop/Commodity	Variety/Type	Share	GERALD A OSMERA	
											Crop/Commodity	Variety/Type
01	SOYBN	COM	N	GR	32.08	100.00		SOYBN	COM			

CERTIFICATION: I certify to the best of my knowledge and belief that the acreage of crops/commodities and land uses listed herein are true and correct and that all required crops/commodities and land uses have been reported for the farm as applicable. Absent any different or contrary prior subsequent certification filed by any producer for any crop for which NAP coverage has been purchased, I certify that the applicable crop, type, practice, and intended use is not planted if it is not included on the Report of Commodities for this crop year. The signing of this form gives FSA representatives authorization to enter and inspect crops/commodities and land uses on the above identified land. A signature date (the date the producer signs the FSA-578) will also be captured.

Operator Signature (By) AUNT Date 7-18-19

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RECEIVED  
JUL 18 2019  
Saunders County



**Common Land Unit**  
 [Symbol] Non-Cropland  
 [Symbol] Cropland

[Symbol] Tract Boundary  
 [Symbol] PLSS

2018 NAIP Ortho Imagery

2019 Program Year  
 Map Created April 09, 2019

**Wetland Determination Identifiers**  
 ● Restricted Use  
 ▽ Limited Restrictions  
 □ Exempt from Wetland Provisions

*Sb-5-20-19*

**20-14-5E**

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