



Versailles Service Center News

June 2008

Woodford

USDA Service Center

Versailles FSA Service Center

182 Beasley Road
Versailles, KY 40383
859-873-3411
1-888-229-9795
895-873-9504 (FAX)
www.fsa.usda.gov/ky

Hours

Monday - Friday
7:30 a.m. - 4:30 p.m.

County Committee
James R "Buddy"
Smith, Chairperson
W Gary Wilson, Vice
Chair
Paul G Drury, COC
Bobby Lippert, COC
Joshua C Sea, COC
Henry "Graddy"
Prewitt, COC
Marti A Congleton,

Advisor
Roy H Toney, Advisor

County Committee
meets every second
Thur

Staff
Cecelia O Adams, PT
Becky L Jordan, PT
Angela J Gordon, PT
Ronn F Pelfrey, CED

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Welcome to summer 2008 in central Kentucky.

In both Anderson and Woodford Counties we have important crop deadlines upon us on July 15th, which is on Tuesday this year.

Please stop in and certify your 2008 crops. A full cropland acreage report is required for Loan Deficiency Payments, Commodity Loans. It's also a good recordkeeping procedure if you are growing crops to maintain a history in the FSA office. If you've bought or sold land, please contact us with your new information.

County Committee Elections

We have County Committee elections upon us this fall in LAAs 2, 4 and 5. Please nominate your farmer of choice for the following LAAs.

LAA 2

From Franklin County line at Hammond Road south to intersection of Clifton Road; thence to old Hwy 127, then across Southern Railway to Hammond's Creek. From Hammond's Creek to Hwy 44; thence to Glensboro, following Hwy 44 to Pleasant Hill Church and then to Shelby County line at Wayside. Follow county line NE to Hammond Road.

WOODFORD COUNTY LAA BOUNDARIES:

LAA 4

West of line beginning at Franklin County following US 60 through the City of Versailles. From there take Hwy 33 south to Delaney Ferry Road then west to Mortonsville, KY. Proceed south on Sellers Mill Road to Fords Mill Road. Follow Fords Mill Road south to Cummins Ferry Road then follow Cummins Ferry Road then follow Cummins Ferry Road west to the river.

LAA 5

Producers east of the above described line will be in LAA 5.

Also, if you are interested in Farm Loans Youth Loans, contact our Farm Loan Specialist, Jason Issac at 502-633-3294.

Other USDA Phone Numbers to Remember:

Anderson NRCS: 502-839-5667

Woodford NRCS: 859-873-4941

Nations Dead Animal Removal Service:

1-800-633-5677

LAA Boundaries:



FSA-669A
(02-25-08)

U.S. Department of Agriculture
Farm Service Agency

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

1. NAME OF NOMINEE <i>(Type or print Nominee's Full Name)</i>		TO BE COMPLETED BY COUNTY FSA OFFICE
2. ADDRESS OF NOMINEE		
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. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE <i>(MM-DD-YYYY)</i>
<input type="checkbox"/> <i>I DO want to witness the settling of tied votes with another nominee.</i> <input type="checkbox"/> <i>I DO NOT want to witness the settling of tied votes with another nominee.</i>		6A. COUNTY
		6B. LAA NO.
		7. STATE
4A. SIGNATURE OF NOMINEE	4B. DATE <i>(MM-DD-YYYY)</i>	DATE OF ELECTION IS 1st MONDAY OF DECEMBER OF EACH CALENDAR YEAR

8. 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.

<p>ETHNICITY</p> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<p>RACE (Choose as many boxes as applicable)</p> <input type="checkbox"/> America 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	<p>GENDER</p> <input type="checkbox"/> Male <input type="checkbox"/> Female
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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.

ITEM 4 The nominee must sign and date.

ITEM 8 Completing this item is voluntary.

ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 1.

NOTE: *The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 7 CFR Part 7. The information will be used to obtain nominees for 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. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.