

UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency
Washington, DC 20250

**Common Management and
Operating Provisions
1-CM (Revision 3)**

Amendment 58

Approved by: Acting Deputy Administrator, Farm Programs



Amendment Transmittal

A Reasons for Amendment

Subparagraph 141 C has been amended to update the FSA Security Operations FAX number.

Subparagraph 198 C has been amended to provide the revised AD-2047.

Paragraph 1002 has been amended to inform offices that if the State or county name is not available in the drop-down list, no payments to deceased producers have been identified for the applicable quarter.

Paragraph 1010 has been amended to update screens.

Exhibit 11.4 has been amended to update the FSA Security Operation's FAX number and provide the revised AD-2017.

Exhibit 11.5 has been amended to update State SCIMS Security Officers.

Page Control Chart		
TC	Text	Exhibit
	6-41, 6-42	1, page 3
	7-115 through 7-118	11.4, pages 1, 2
	34-63, 34-64	11.5, pages 1-4
	34-79, 34-80	page 5

Section 2 Customer and Employee Name and Address File**141 Accessing Name and Address From SCIMS****A Purpose**

Customer and core data is stored in a central database maintained by ITSD-ADC known as SCIMS. Accessing the name and address for adding, inactivating, reactivating, or viewing customer core data requires accessing SCIMS through the Intranet.

Only authorized **USDA** Service Center personnel may access SCIMS to add, delete, update, or view customer core data.

***--Note:** Only **permanent USDA Service Center employees** are authorized to access SCIMS. Requests for exceptions for temporary employees or non-USDA personnel must be submitted in writing to the National SCIMS Security Officer.--*

After a customer's core data has been entered in SCIMS and a legacy link has been established, the core data will download to the AS/400 name and address files in the county where the legacy link has been established.

Note: If a legacy link is not established, the core data will reside only in SCIMS.

B Definitions

Customer core data means name and address data that has been determined to be used by at least 2 of the agencies in the Service Center.

Authorized user means USDA Service Center employees who have been certified to have received sufficient training commensurate with their requested role in the use of SCIMS on AD-2017 by their respective agency's State or County SCIMS Security Officer and have been processed through FSA security operations by their respective agency's State SCIMS Security Officer.

141 Accessing Name and Address From SCIMS (Continued)

C Requesting Access to SCIMS Through FSA Security Operations

Service Center employees shall request access to SCIMS through their respective agency State SCIMS Security Officer (Exhibit 11.5).

Note: CED's and NRCS AC's shall request SCIMS access for their respective employees by sending completed AD-2017's to their agency State SCIMS Security Officer. CED or AC, as applicable, shall sign and date AD-2017, items 12A and 12B to certify that employee has been adequately trained.

State SCIMS Security Officers shall be responsible for requesting access to SCIMS for their respective employees. Requests shall be submitted to FSA Security Operations through the State Security Liaison Representative on AD-2017 by completing the required entries according to Exhibit 11.4.

***--Notes:** AD-2017 will also be used for requesting PYBC and SMR change authority--* (Exhibit 11.4).

See Exhibit 11.5 for a list of State SCIMS Security Officers for FSA, NRCS, and Rural Development.

AD-2017:

- is required and is the only official form for requesting access to SCIMS and requests for *--PYBC and SMR update authority

Note: National Office approval is required for PYBC and SMR authorizations. PYBC and SMR requests shall be FAXed to the Common Provisions Branch Chief at--* 202-720-0051. These requests shall **not** be FAXed to FSA Security Operations.

- is required to certify that users have received adequate training commensurate with their requested access role
- shall be FAXed to FSA Security Operations when both requesting access and revoking access to SCIMS

***--Notes:** The FSA Security Operations FAX number is 877-828-2051.--*

AD-2017's for temporary employees shall also include a copy of written authorization from the National SCIMS Security Officer.

- shall be maintained by the respective State SCIMS Security Officer
- shall be used to document "Revocation of Authority" by completing Part C.

198 Documenting Customer Data Changes in SCIMS (Continued)

C Example of AD-2047

The following is an example of a completed AD-2047.

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This form is available electronically.		Form Approved – OMB No. 0560-0265	
AD-2047 (02-04-13)		U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency Rural Development Natural Resources Conservation Service	
CUSTOMER DATA WORKSHEET REQUEST FOR SCIMS RECORD CHANGE (FOR INTERNAL USE ONLY) (See Page 2 for Privacy Act and Paperwork Reduction Act Statements)			
PART A – CUSTOMER INFORMATION			
1A. Customer's Full Legal Name or Business Name		1B. Customer or Business Address (Including Zip Code)	
1C. Home Telephone Number (Area Code)	1D. Business Telephone Number (Area Code)	1E. Other Telephone Number (Area Code)	
2. SSN or Tax ID Number (9 Digits)	3. E-Mail Address	4A. Do you want to receive mail by USPS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
		4B. Do you want to receive e-mails? <input type="checkbox"/> YES <input type="checkbox"/> NO	
5. Producer is Customer of One or More of the Following Agencies. (Check Appropriate Agency(ies) below)			
<input type="checkbox"/> FSA <input type="checkbox"/> RD <input type="checkbox"/> NRCS <input type="checkbox"/> Not Participating			
6. Is the Customer a Multi-County Producer? <input type="checkbox"/> YES (If "YES," list States and/or Counties below) <input type="checkbox"/> NO			
7. Reason for Request (Check appropriate box(es) below):			
<input type="checkbox"/> New Producer <input type="checkbox"/> Address Change <input type="checkbox"/> Telephone Change <input type="checkbox"/> Sale/Purchase <input type="checkbox"/> Life Event <input type="checkbox"/> Other (Specify):			
8. Enter the name of the customer requesting the record change(s). If documentation is received by Fax or from a trusted source (i.e., USPS), attach documentation to this form. Only Part A, Item 1A and Part B shall be completed. If the request was received by telephone, complete applicable blocks necessary to document the change(s) and enter the requestor's name in Item 8A. Requestor's signature is not required. (The only time the customer is required to sign Item 8B is when they are physically at a Service Center and providing FSA with applicable information.)			
8A. Name of Customer Requesting Change		8B. Signature	8C. Date of Record Change (MM-DD-YYYY)
PART B – SERVICE CENTER ACTION			
9A. Agency Who Received Request: (Check one below)		9B. Initials of Employee Receiving Request (If Different than Item 12A)	9C. Date Service Center Employee Received the Request (MM-DD-YYYY)
<input type="checkbox"/> FSA <input type="checkbox"/> NRCS <input type="checkbox"/> RD			
10. How the Request for Change was Received: <input type="checkbox"/> Office Visit <input type="checkbox"/> Telephone <input type="checkbox"/> FAX <input type="checkbox"/> USPS <input type="checkbox"/> Other (Specify):			
11. Remarks if Applicable:			
12A. Signature of Employee Updating SCIMS if not initialed in Item 9B.		12B. Date Service Center Employee Updating SCIMS (MM-DD-YYYY)	
FOR DISTRICT DIRECTOR/AREA CONSERVATIONIST USE ONLY.			
13A. I concur/do not concur the above items have been properly updated.		<input type="checkbox"/> Concur <input type="checkbox"/> Do Not Concur	
13B. Name of District Director/Area Conservationist for Spot Check		13C. Signature of District Director/Area Conservationist for Spot Check	
13D. Title		13E. Date (MM-DD-YYYY)	

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198 Documenting Customer Data Changes in SCIMS (Continued)

C Example of AD-2047 (Continued)

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AD-2047 (02-04-13)	Page 2 of 3
<p>NOTE: <i>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 OMB Circular A-123, the Federal Managers' Financial Integrity Act of 1982, and the Privacy Act of 1974 (5 USC 552a - as amended). The information will be used to document a request for critical producer data changes within the Service Center Information Management System (SCIMS). The information collected on this 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). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to request changes within SCIMS.</i></p> <p><i>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 0560-0265. 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.</i></p> <p><i>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.</i></p>	
<p><i>The U.S. Department of Agriculture (USDA) prohibits discrimination in all of 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, political beliefs, genetic information, 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, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).</i></p>	
<p><i>To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410, or call toll-free at (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.</i></p>	

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198 Documenting Customer Data Changes in SCIMS (Continued)

C Example of AD-2047 (Continued)

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AD-2047 (02-04-13)		Page 3 of 3
INSTRUCTIONS FOR AD-2047 (FOR INTERNAL USE ONLY)		
PART A	Note: Items 1-6 are required only as applicable to requested change. Items not applicable to requested record change may be left blank.	
1A	Enter customer's full legal name or Business Name.	
1B	Enter customer or business mailing address including Zip Code.	
1C	Enter customer's home telephone number including area code.	
1D	Enter customer's business telephone number including area code.	
1E	Enter customer's other telephone number including area code.	
2	Enter customer's 9-Digit SSN or TIN as applicable.	
3	Enter customer's e-mail address.	
4A or 4B	Enter "YES or NO" to indicate whether or not the customer wishes to receive mail and/or e-mail.	
5	Check the appropriate boxes indicating the agency(ies) where the producer is customer.	
6	Check "YES OR NO" to indicate whether or not the customer is a multi-county producer. If "YES," specify states and county offices.	
7	Check appropriate box(es) to indicate the reason for the requested record change(s). If "OTHER," specify.	
8A	Enter the name of the Customer requesting the record change(s). Customer requesting change shall sign. Note: - If documentation is received by Fax or from a trusted source (i.e., USPS), attach documentation to this form. Only Part A, Item 1A and Part B shall be completed. (Requestor's signature is not required.) - If the request was received by telephone, complete applicable blocks necessary to document the change(s) and enter the requestor's name in Item 8A. (Requestor's signature is not required.)	
8B	The customer is only required to sign Item 8B when they are physically at a Service Center Site providing FSA with applicable information.	
8C	Enter date (MM-DD-YYYY) the record change is requested.	
PART B	Note: - Items 9A - 12B must be completed. - Items 13A - 13C must be completed only if selected for spot-check.	
9A	Check the appropriate box indicating agency who received the request.	
9B	Enter initials of Service Center employee receiving the request.	
9C	Enter date (MM-DD-YYYY) Service Center employee received the request.	
10	Check the box to indicate method by which the Service Center received the request. If other, specify.	
11	Enter remarks regarding the records change.	
12A	Enter the signature of Service Center employee updating SCIMS.	
12B	Enter the date (MM-DD-YYYY) the Service Center employee updated SCIMS.	
OPTIONAL FOR DISTRICT DIRECTOR/AREA CONSERVATIONIST USE DURING SPOTCHECKS.		
13A	Check the box to indicate that the Agency Official did Concur or did not Concur.	
13B	Enter the name of the District Director/Area Conservationist for Spot Check.	
13C	Enter the signature of the District Director/Area Conservationist for Spot Check.	
13D	Enter the Agency Official's Title.	
13E	Enter the Date (MM-DD-YYYY).	

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***--199 Documenting Customer Declared Race, Ethnicity, and Gender Data**

A OMB-Approved Forms

OMB has approved the following forms to collect race, ethnicity and gender data:

- AD-2035
- AD-2106
- FSA-2001
- FSA-2211
- FSA-2212
- FSA-2301
- FSA-2683.

No other forms may be used to collect race, ethnicity, or gender data.

B Collecting Race, Ethnicity, or Gender Data

This table provides procedure for handling race, ethnicity, or gender data.

IF the race, ethnicity, or gender data is provided...	THEN Service Center employee will...
verbally	complete AD-2047 by recording the name, address, and race, ethnicity, or gender data in block 11. Update the race, ethnicity, or gender data in SCIMS as “Customer Declared” and file according to subparagraph 198 B.
on AD-2035	update the race, ethnicity, or gender data in SCIMS as “Customer Declared”, file a copy of AD-2035 in the participants “PE-2, Producer Eligibility” folder, and submit the original AD-2035 according to Minority Farm Register procedure.
on AD-2106	update the race, ethnicity, or gender data in SCIMS as “Customer Declared” and file the completed AD-2106 in the participants “PE-2, Producer Eligibility” folder.
on FSA-2001, FSA-2211, FSA-2212, FSA-2301, or FSA-2683	update the race, ethnicity, or gender data in SCIMS as “Customer Declared” and file according to FLP procedure.

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1002 County Reviews

A Database Navigation

A left navigation menu is available for users to move around the database. The options may change depending on which screen is being displayed in the database. Users may click the following under “Application” in the left navigation:

- *--“Main Menu” to return to the Payments to Producers Identified as Deceased - Portal Screen--*
- “County Review”, to navigate to the Select a State or County to Review Screen
- “Return to Review Criteria”, to navigate to the Select A State or County To Review Screen
- “Return to Review Results”, to navigate to the Search Results Screen
- *--“County Report”, to navigate to the Select Report Criteria Screen to generate an excel version of the report.

The following is an example of the left navigation options.

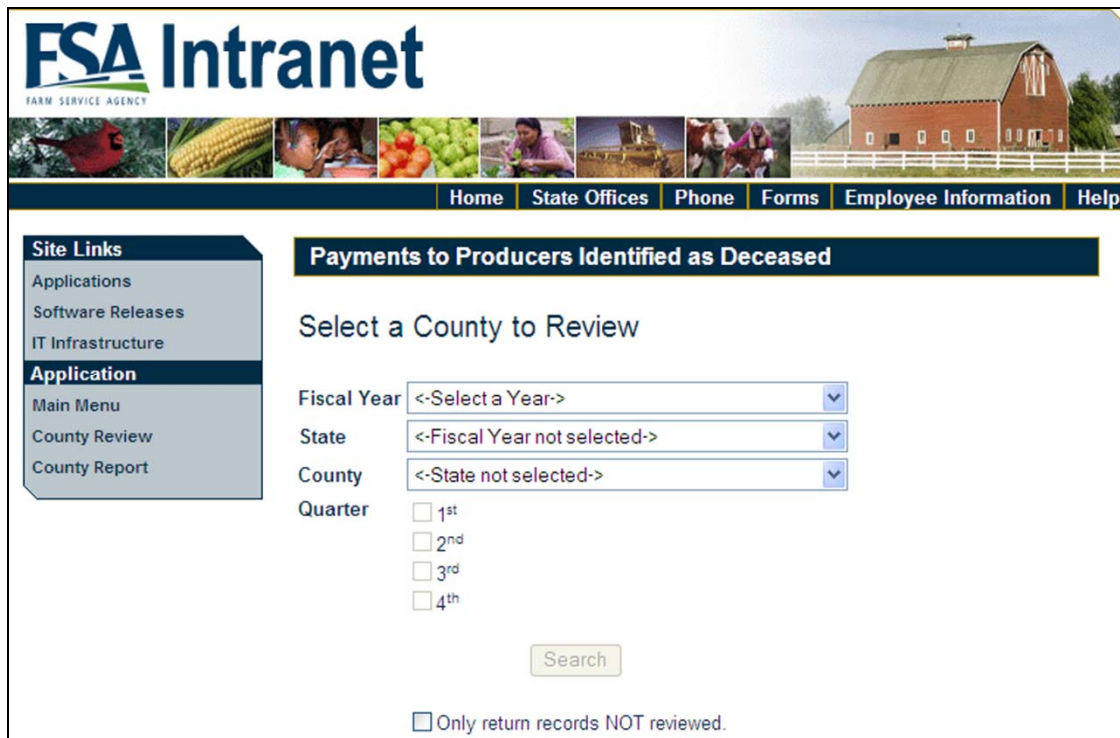


1002 County Reviews (Continued)

B Select a County to Review Screen

After users select “County Office Review” on the Payments to Producers Identified as Deceased - Portal Screen, the Select a County to Review Screen will be displayed.

The following is an example of the Select a County to Review Screen.



C Action

To perform a County Office review of Payments to Producers Identified as Deceased, select:

- FY
- State
- county
- quarter; multiple quarters may be selected.

CLICK “Search”.

Notes: If users CHECK (✓) “Only return records NOT reviewed.”, a list of payments to producers identified as deceased that have **not** yet been reviewed by the County Office will be displayed.

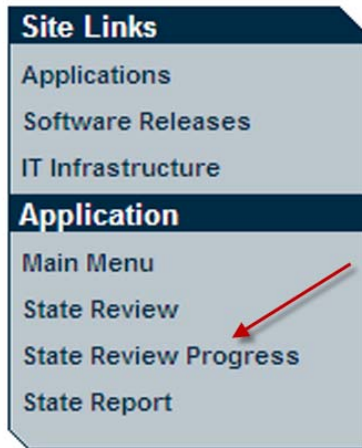
--If the State or county name is not available in the drop-down list, no payments to deceased producers have been identified for the applicable quarter.--

1010 State Review Progress

A Overview

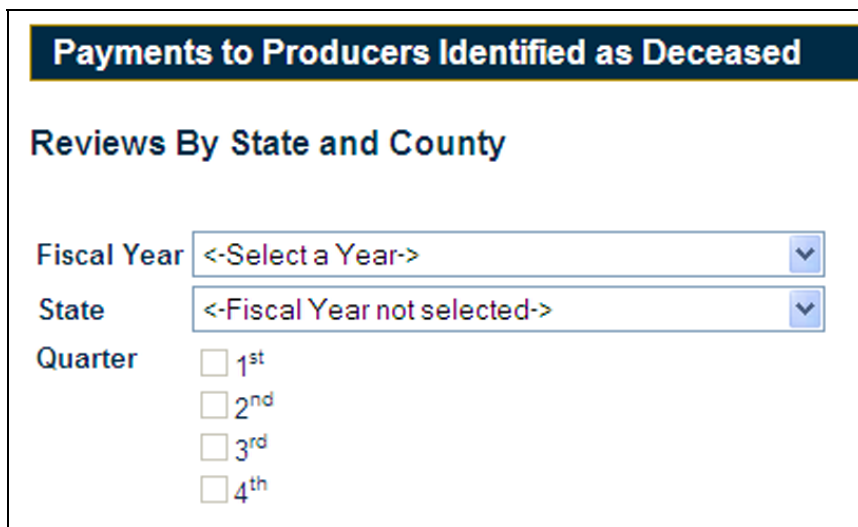
After users have selected “State Review Progress”, under “Application” in the left navigation, the Reviews By State and County Screen will be displayed.

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B Example of the Reviews By State and County Screen

The following is an example of the Reviews By State and County Screen.

A screenshot of a web application interface. At the top, there is a dark blue header with the text 'Payments to Producers Identified as Deceased'. Below the header, the main content area is titled 'Reviews By State and County'. There are three filter sections: 'Fiscal Year' with a dropdown menu showing '<-Select a Year->', 'State' with a dropdown menu showing '<-Fiscal Year not selected->', and 'Quarter' with four radio button options: '1st', '2nd', '3rd', and '4th'.

--*

C Action

To generate the State Review Progress Report, select the following:

- FY
- State.

1010 State Review Progress (Continued)

D Example of the Reviews By State and County Screen

The following is an example of the Reviews By State and County Screen.

*--

Payments to Producers Identified as Deceased

Reviews By State and County

Fiscal Year

State

Quarter

1st
 2nd
 3rd
 4th

		Completed Reviews		Pending Reviews	
County	Total Required	County	State	County	State
County 1	1	<u>1</u>	<u>1</u>	0	0
Totals	1	1	1	0	0

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E Information Provided on the Reviews By State and County Screen

The following is the information provided on the Reviews By State and County Screen.

Label	Description
County	County name.
Total Required	Number of reviews required in the county.
Completed Reviews – County	Number of reviews completed by the county.
Completed Reviews – State	Number of reviews completed by the State.
Pending Reviews – County	Number of reviews to be completed by the county.
Pending Reviews – State	Number of reviews to be completed by the State.

Reports, Forms, Abbreviations, and Redelegations of Authority (Continued)

Abbreviations Not Listed in Exhibit 102

The following abbreviations are not listed in Exhibit 102.

Approved Abbreviation	Term	Reference
AC	area conservationists	141, 177
APO	Army Post Office	179, 932
CY	current year	208, 212
DBA	doing business as	177
DMF	Death Master File	1004, 1006, 1009, 1011, Ex. 125
e-FC	electronic funds control	20
EIN	employer ID number	121, 122, 178.5, 178.6, 178.7, 178.8, Ex. 10, 11
FRS	Farm Records Management System	752
HC	highway content	179
IE	Internet Explorer	141
LLC	Limited Liability Company	121, 122, 177, 178, 178.6
MQ	Marketing Quota	208, 209
NSCP	Naval Stores Conservation Program	779, 918
OT	other producer	197
PYBC	Prior Year Business Code	141, Ex. 11.4
RR	rural route	179, 208
SMR	SCIMS merge role	141, Ex. 11.4

Redelegations of Authority

This table lists redelegations of authority in this handbook.

Redelegation	Reference
Authority to act for entities may be redelegated by the representative by filing FSA-211 for an agent to perform for the trust or estate.	730

Completing AD-2017

A Instructions for Completing AD-2017

Complete AD-2017 according to the following.

Item	Instructions
1	Enter the date that access is requested.
2	Enter the employee's name.
3	Enter the employee's eAuthentication user ID.
4	Enter the State name.
5	Enter the county name.
6	Enter the OIP code. Note: OIP codes are available at http://intranet.fsa.usda.gov/fsa/ . Under "Forms, Publications, and Supplies", CLICK "State/County Name & Address List".
7	Enter a checkmark for the type of employee, as applicable. Note: SCIMS access for temporary or non-USDA employees must be approved by the National SCIMS Security Office according to subparagraph 141 A.
8	Enter a checkmark for the applicable agency.
9	Enter a checkmark for the type of access requested. Notes: Requests for access to SCIMS shall be FAXed to FSA Security Operations at *--877-828-2051 . AD-2017 shall also be used to submit requests for PYBC and SMR changes. PYBC and SMR change requests shall be FAXed to the Common Provisions Branch Chief--* at 202-720-0051. These requests shall not be FAXed to FSA Security Operations.
10	Enter a checkmark for the requested action, as applicable.
11	Read "Certification by Employee" before completing items 12A and 12B.
11A	The requesting employee shall sign.
11B	Enter date of signature.
12	Read "Certification by SCIMS Security Officer" before completing items 13A through 13D.
12A	SCIMS Security Officer shall sign.
12B	Enter date of signature.
12C	Concurring State Security Liaison Representative shall sign.
12D	Enter date of signature.
13	Enter any pertinent remarks.
14A	Common Provisions Branch Chief shall sign. Note: PYBC requests will be approved or disapproved by the Common Provisions Branch Chief in item 14B. The requestor will be notified by e-mail of action taken.
14B	Common Provisions Branch Chief shall approve or disapprove.
14C	Enter date of signature.
15	Read "Renovation by SCIMS Security Officer" before completing items 15A and 15B.
15A	SCIMS Security Officer shall sign.
15B	Enter date access to SCIMS is revoked. Note: Requests for revocation of access to SCIMS shall be FAXed to FSA Security Operations at *--877-828-2051.--*

Completing AD-2017 (Continued)

B Example of AD-2017

The following is a completed example of AD-2017.

*--

<p>This form is available electronically.</p>		
<p>AD-2017 (02-04-13)</p> <p align="center">U.S. DEPARTMENT OF AGRICULTURE</p> <p align="center">SERVICE CENTER INFORMATION MANAGEMENT SYSTEM (SCIMS) ACCESS FORM</p>		<p>1. Request Date (MM-DD-YYYY)</p>
<p>PART A - INSTRUCTIONS: State SCIMS Security Officers shall be responsible for requesting from FSA Security Operation access to SCIMS for their responsible employees. Please complete a separate form for each employee.</p>		
<p>2. Employee Name (Last, First, MI)</p>		<p>3. Employee's eAuthentication User ID</p>
<p>4. State Name</p>		<p>5. County Name</p>
<p>6. Office Information Profile (OIP) Code</p>	<p>7. Type of Employee (Check one below.)</p> <p><input type="checkbox"/> Permanent Federal</p> <p><input type="checkbox"/> Permanent County Office</p> <p><input type="checkbox"/> Temporary Federal</p> <p><input type="checkbox"/> Temporary County Office</p> <p><input type="checkbox"/> Other (Specify): _____</p>	<p>8. Agency (Check one below.)</p> <p><input type="checkbox"/> FSA</p> <p><input type="checkbox"/> NRCS</p> <p><input type="checkbox"/> RD</p> <p><input type="checkbox"/> Other (Specify below): _____</p>
<p>9. Type of Access Requested (Check one below.)</p> <p><input type="checkbox"/> Full Access (Employee complete Items 11A and 11B)</p> <p><input type="checkbox"/> View Only Access</p> <p><input type="checkbox"/> Prior Year Business Code (PYBC) Changes (WDC Approval Required).</p> <p><input type="checkbox"/> SCIMS Merge Role (SMR) (WDC Approval Required)</p> <p><i>PYBC and SMR requests shall be FAXed to the Common Provisions Branch Chief at 202-690-2130. These requests shall not be FAXed to FSA Security Operations.</i></p>		<p>10. Requested Action</p> <p><input type="checkbox"/> Add</p> <p><input type="checkbox"/> Delete</p> <p><input type="checkbox"/> Modify</p>
<p>PART B - CERTIFICATIONS</p>		
<p>11. Certification by Employee</p> <p><i>By signing this form, I certify that I have received training by a USDA Employee who has authority to grant me use of the SCIMS database. I understand that proper use of the database and the consequences of accessing and making changes to customer's core data. I certify that I will use the database only for conducting USDA Government business as a necessary part of my position with the United States Department of Agriculture.</i></p>		
<p>11A. Employee's Signature</p>		<p>11B. Date (MM-DD-YYYY)</p>
<p>12. Certification by SCIMS Security Officer</p> <p><i>As State or County SCIMS Security Officer, I certify that the above employee has received sufficient training on the use of the SCIMS database. By signing this form, I have granted this USDA employee permission to access the SCIMS database to conduct official USDA business.</i></p>		
<p>12A. SCIMS Security Officer's Signature</p>		<p>12B. Date (MM-DD-YYYY)</p>
<p>12C. State Security Liaison Representative's Concurrence</p>		<p>12D. Date (MM-DD-YYYY)</p>
<p>13. Remarks:</p>		
<p>14A. Signature of Common Provisions Branch Chief (Complete only if Item 9, PYBC or SMR is checked)</p>	<p>14B. Common Provisions Branch Chief's Concurrence</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Disapproved</p>	<p>14C. Date (MM-DD-YYYY)</p>
<p>PART C - REVOCATION OF AUTHORITY</p>		
<p>15. Revocation by SCIMS Security Officer</p> <p><i>The authority for the above-named person was revoked on the day shown below:</i></p>		
<p>15A. SCIMS Security Officer's Signature</p>		<p>15B. Date (MM-DD-YYYY)</p>
<p><small>The U.S. Department of Agriculture (USDA) prohibits discrimination in all of 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, political beliefs, genetic information, 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, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410, or call toll-free at (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.</small></p>		

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SCIMS Security Officers

A National SCIMS Security Officers

Agency	Name
FSA	*--Lisa Berry--*
NRCS	Leroy Hall
RD	Vacant

B State SCIMS Security Officers

*--

State	Agency	Security Officer	Backup
Alabama	FSA	Rita Brown	Martha Taylor
Alabama	NRCS	Zona Beaty	
Alabama	RD	Cynthia Smith	
Alaska	FSA	Jeff Curry	
Alaska	NRCS	Pam Taber	Philip B. Naegele
Alaska	RD	Robyn Martin	
Arizona	FSA	Carla Hill	Dianna Kazee
Arizona	NRCS	Kristin Graham Chavez	Terry Hall
Arizona	RD	Ron Walch	
Arkansas	FSA	Sharon Baker	Lamar Rolland
Arkansas	NRCS	Jena Moore	
Arkansas	RD	Terrie Rose	
California	FSA	Navdeep Dhillon	Carol John
California	NRCS	Carmen De Jesus Ortiz	
California	RD	Vacant	
Colorado	FSA	Tammy Cook	Luis Alonso
Colorado	NRCS	Michael Wall	
Colorado	RD	Vacant	
Connecticut	FSA	Doris Ostrowski	
Connecticut	NRCS	Michelle Hendricks	
Connecticut	RD	Richard A. Lavoie	
Delaware	FSA	Robin Talley	
Delaware	NRCS	Timothy Garrahan	
Delaware	RD	Vacant	
Florida	FSA	April Chastain	Debbie Hendricks
Florida	NRCS	Jeff Werner	
Florida	RD	Hilary Cook	
Georgia	FSA	Jennifer Carter	Millie Gardner
Georgia	NRCS	Tansel Hudson	Dale Bogardus
Georgia	RD	Craig Scroggs	

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SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

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State	Agency	Security Officer	Backup
Hawaii	FSA	Steve D. Peterson	Connie Laumann
Hawaii	RD	Clarice H. Osako	
Idaho	FSA	Jeremy Nalder	Susan Kime
Idaho	NRCS	Jerry Korol	
Idaho	RD	Vacant	
Illinois	FSA	Debra Kirkland	Stan Wilson
Illinois	NRCS	Dave Dornbusch	
Illinois	RD	Denise A. Pubill	
Indiana	FSA	Carl Schweikhardt	Marietta Kendall
Indiana	NRCS	Roger A. Kult	
Indiana	RD	Maetta Kellermeyer	
Iowa	FSA	Brad Murray	Heidi Blair
Iowa	NRCS	Kristy York	
Iowa	RD	Kathy Deppe	
Kansas	FSA	Kim Schmidt	Terry Hawk
Kansas	NRCS	Chad Volkman	
Kansas	RD	Brenda E. Aeillo	
Kentucky	FSA	Javier Garza	Debbie Beehn
Kentucky	NRCS	Christy Morgan	
Kentucky	RD	Shirley Halcomb	
Louisiana	FSA	DeWanna Pitman	
Louisiana	NRCS	Tim Landreneau	
Louisiana	RD	Sheila Ford	
Maine	FSA	Frank Menkin	Scott Speck
Maine	NRCS	Susan Arrants	
Maine	RD	Tammy Carter	
Maryland	FSA	Robert Wevodau	Ashley Bawroski
Maryland	NRCS	Thomas Morgart	
Maryland	RD	Vacant	
Massachusetts	FSA	Lori Carver	John Devine
Massachusetts	NRCS	Barbara Miller	
Massachusetts	RD	Richard A. Lavoie	
Michigan	FSA	Kelly Losey	Melissa Cripe
Michigan	NRCS	Monica Wymer	
Michigan	RD	Lynette McCarty	
Minnesota	FSA	Lisa MacDonald	Laurie Moss
Minnesota	NRCS	Mike G. Pageler	
Minnesota	RD	Lori Moore	
Mississippi	FSA	Gary Morrison	Kristi Gill
Mississippi	NRCS	Gregory W. Brinson	
Mississippi	RD	Cynthia White	

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SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

State	Agency	Security Officer	Backup
Missouri	FSA	Mike Lafolette	Joy McBee
Missouri	NRCS	David Gruber	
Missouri	RD	Dean Olson	
Montana	FSA	Regan Anderson	Stacey Johnson
Montana	NRCS	Carrie Mosley	Tim Oullette
Montana	RD	Vacant	
Nebraska	FSA	Doug Klein	Sarah Heidzig-Kraeger
Nebraska	NRCS	Ryan M. Kroemer	
Nebraska	RD	Krista Stevens	
Nevada	FSA	Debbie Goin	Katie Nuffer
Nevada	NRCS	Paulette Balliette	
Nevada	RD	Vacant	
New Hampshire	FSA	Linda Grames	
New Hampshire	NRCS	Rachael Phillips	
New Hampshire	RD	Raymond B. Fredericks	
New Jersey	FSA	Chris Scheirer	
New Jersey	NRCS	Nancy Paolini	
New Jersey	RD	Vacant	
New Mexico	FSA	Brandon Terrazas	
New Mexico	NRCS	Maureen Murphy	
New Mexico	RD	Vacant	
New York	FSA	Heather Grady	Nancy Malagisi
New York	NRCS	Rebecca Donegan	
New York	RD	Vacant	
North Carolina	FSA	Cathy Moore	Victor Youngblood
North Carolina	NRCS	Reginald Hall	
North Carolina	RD	Neal Sherrod	
North Dakota	FSA	Bryan Olschlager	Kimberly Kylo
North Dakota	NRCS	Tanya Koch	Julie Swalling
North Dakota	RD	Vacant	
Ohio	FSA	Christina Piper	Matthew Kleski
Ohio	NRCS	Felicity Weatherspoon	
Ohio	RD	Vacant	
Oklahoma	FSA	Tona Huggins	Theresa Henley
Oklahoma	NRCS	Joe Buford	
Oklahoma	RD	Jody Harris	
Oregon	FSA	Tony Meeuwsen	
Oregon	NRCS	Danny Burgett	
Oregon	RD	Faith Harris	

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SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

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State	Agency	Security Officer	Backup
Pacific Islands, East	NRCS	Jeffrey Harlow	
Pacific Islands, West	NRCS	Kurencio Ngowakl	
Pennsylvania	FSA	Jackie Stonfer	Brian Ranck
Pennsylvania	NRCS	Lisa Walker	
Pennsylvania	RD	Dane Bowerman	
Puerto Rico	FSA	Edgar Maldonado	
Puerto Rico	NRCS	Ileana M. Curbelo	
Puerto Rico	RD	Jorge Lopez	
Rhode Island	FSA	Marilu Soileau	
Rhode Island	NRCS	Jackie Pashnik	
Rhode Island	RD	Richard A. Lavoie	
South Carolina	FSA	Riley Odum	Amy Turner
South Carolina	NRCS	Jill Epley	Reginald Hall
South Carolina	RD	Vacant	
South Dakota	FSA	Allen Barton	Shelly Binger
South Dakota	NRCS	Ryan Kruse	
South Dakota	RD	Kay Daugherty	
Tennessee	FSA	Sally Martin	Danielle Graham
Tennessee	NRCS	Grace Lutz	
Tennessee	RD	Vacant	
Texas	FSA	Chris Morris	
Texas	NRCS	Lori Ziehr	Pat Harris
Texas	RD	Larry McDonald	
Utah	FSA	Cary Son	Kent Jorgensen
Utah	NRCS	Dave Varner	
Utah	RD	Vacant	
Vermont	FSA	Julie Jacque	Tracy Derry
Vermont	NRCS	Kathryn Hakey	
Vermont	RD	Raymond B. Fredericks	
Virginia	FSA	Emily Horsley	Laura Craft
Virginia	NRCS	Rod Wood	
Virginia	RD	Nancy A. Lewis	
Washington	FSA	Dwaine Schettler	Gerri Richter
Washington	NRCS	June Johnson	
Washington	RD	James A. Wehrer	
West Virginia	FSA	Leanne Taylor	Jacki Defazio
West Virginia	NRCS	Heather Hinson	
West Virginia	RD	Vacant	

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SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

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State	Agency	Security Officer	Backup
Wisconsin	FSA	Barb Quam	
Wisconsin	NRCS	Paula French	
Wisconsin	RD	Jolane Rankin	
Wyoming	FSA	Todd Even	
Wyoming	NRCS	Steven Immel	
Wyoming	RD	Mary A. Sessin	

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