CCC-575 (12-03-15) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation Non-Insured Crop Disaster Assistance Program (NAP) Record of Historical Marketing Percentage (HMP), Contract Marketing Percentage (CMP),							PART A – GE 1. County FSA			ATION Idress (Including Z	ïp Code)		
										strative State and County Code			
and Direct Marketing Percentage (DMP) (2015 and Subsequent Years)							4A. Producer's Name and Address (Including Zip Code)						
							4B. Phone Nun	nber <i>(Incl</i>	ıde Area Coo	de):			
PART B - CR 5A. Crop Nam				5B. Cr	ор Туре		6. Uni	t of Meas	sure (UoM)				
	URRENT	YEAR CO		KETIN	G PERCENTAGE (CMF)	1.0					
7. Contracted Use		8. Contracted Production			9. Expected Production		10. Total Expected Production			11. Contract Marketing Percentage (CMP)			
	Freeh	Enter contracted production in each specific contracted use column, as applicable			Eligible Acres from FSA-578 X Approved Yield		Total of Item 9			Contracted Production (item 8) ÷ Item 10 (Expected Production) x 100%			
F	Fresh Processed										%		
•	Juice										%		
PART D – HI	STORICA		TING PERCEN										
12. Crop Year					licable final use. Enter th 0% to determine Item 15. 14.				in Item 14.		or the final use in 5.		
Final Use		Production			otal Production from Item	13	-			HMP			
Fresh Processed			÷		x			100	% =	%			
Juice			÷							%			
16. Crop Year:				he appl	icable final use. Enter the % to determine Item 19.			om Item 17	in Item 18.	Divide production f			
Final Use Fresh		17. Production			18. Total Production from Item 17		100% =			19. HMP %			
Processed		÷								%			
Juice		· · ·								%			
20. Crop Year:					licable final use. Enter th 100% to determine Item 2				1 in Item 22.	Divide production	or the final use		
Final Use		21. Production			22. Total Production from Item 21		-			23. HMP			
Fresh		÷			×		100% =			<u>%</u>			
F	Processed Juice			÷ ÷		x					%		
PART E – _A		HISTORIC	AL MARKETI		RCENTAGE (HMP) and		MARK	TING PE	RCENTAGE (
			or each year in Item										
Final Use	24. Crop Y	ear:	25. Crop Year:		26. Crop Year:		27. Average HMP		28. CMP	29. Average Market Price	30. Highest Value HMP/CMP		
En als	Enter HMP fr		Enter HMP from Item		Enter HMP from Item 23		of Items 24 + 25 + • Number of Years		MP from Item 11				
Fresh		%			% %		%		%		%		
Processed Juice		%			% % % %		%	_	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
											70		
The undersigned and accurate red accurately may	l certifies tha cord of actua result in a lo.	tt the informa I production ss of program	ntion included on th and marketing his n benefits. Additio	tis form tory. Th nally, th	E'S CERTIFICATIO , whether personally entry the undersigned understance undersigned directs the orage or purchase record	ered l nds th e pur	by the undersigned tat the information chaser, warehouse	or not, or on this fo operator,	by someone rm may be s ginner, or d	pot checked and fa iny person who oth	ilure to certify erwise stores or		
31A. Producer's Signature (By)				31	31B. Title/Relationship (Individual Signing in a Representative Ca			ve Capacity)	ty) 31C. Date (MM-DD-YYYY)				
32A. FSA Rep	oresentative	's Signature)							32B. Date (MI	M-DD-YYYY)		

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PART G – DIRECT MARKETIN Market price option	NG PERCENTAGE (DMP) - I was elected on CCC-471.	Important:	Part G must be c	completed for	or each intend	ded use when the Direct					
33A. Crop Name	33В. Сгор Туре		34. Intended Us	se	35. Unit	35. Unit of Measure (UoM)					
36. Crop Year:	pp Year: Enter production in Item 38 for the applicable market. Enter the sum of all production from Item 38 in Item 39. Divide production in Item 38 by Item 39 then multiply by 100% to determine Item 40. Copy results to Item 52.										
37. Market	38. Production	39. Total Produce Item 3			40. Market History Percentage						
Direct		÷		v	100% =	%					
Indirect		÷		X		%					
41. Crop Year:	Enter production in Item 43 for the applicable market. Enter the sum of all production from Item 43 in Item 44. Divide production in Item 43 by Item 44 then multiply by 100% to determine Item 45. Copy results to Item 53.										
42. Market	43. Production		44. Total Produc Item 4			45. Market History Percentage					
Direct		÷			100% =	%					
Indirect		÷		х		%					
46. Crop Year:	Enter production in Item 48 for the Item 48 by Item 49 then multiply by					in Item 49. Divide production in					
47. Market	48. Production		49. Total Produc Item 4			50. Market History Percentage					
Direct		÷	_	x		%					
Indirect		÷			100% =	%					
PART H – AVERAGE DIRECT	MARKETING PERCENTAG	SE (DMP)									
51. Market	52. Crop Year:	53. Crop Y	53. Crop Year:		ear:	55. Average DMP					
	Enter % from Item 40	Enter %	% from Item 45		rom Item 50	Sum of Items 52 + 53 + 54 ÷ number of years					
Direct	%	%		%		%					
	%				%	%					
PART I – PRODUCER AND FSA REPRESENTATIVE'S CERTIFICATION (For DMP Only) The undersigned certifies that the information included on this form, whether personally entered by the undersigned or not, or by someone else, includes a true, complete, and accurate record of actual production and marketing history. The undersigned understands that the information on this form may be spot checked and failure to certify accurately may result in a loss of program benefits. Additionally, the undersigned directs the purchaser, warehouse operator, ginner, or any person who otherwise stores or purchases crop production identified on this form to disclose that storage or purchase records of the identified crop to USDA representatives of the purpose of verification of production.											
56A. Producer's Signature (By)	56B. Title	e/Relationshij	p (Individual Signing i	in a Representa	ative Capacity)	56C. Date (MM-DD-YYYY)					
57A. FSA Representative's Signature 57B. Date (MM-DD-YYY)											
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 1437, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Federal Agriculture Improvement and Reform Act of 1996 (7 U.S.C. 7333 – as amended), the Federal Crop Insurance Act (7 U.S.C. 1508 – as amended), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Non-Insured Crop Disaster Assistance Program. 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 participate in and receive benefits under the Non-Insured Crop Disaster Assistance Program. 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 5 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.											

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If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.