

This form is available electronically.

See Page 2 for Privacy Act and Public Burden Statements.

CCC-36 (proposal 1)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. Check Applicable Agency <i>(only one)</i> <input type="checkbox"/> FSA <input type="checkbox"/> NRCS
ASSIGNMENT OF PAYMENT		

PART A - GENERAL INFORMATION

2. Assignor's Name and Address <i>(Including Zip Code)</i>	3. Assignee's Name and Address <i>(Including Zip Code)</i>
4. Assignor's Tax Identification Number <i>(9 Digit Number)</i> :	5. Assignee's Tax Identification Number <i>(9 Digit Number)</i> :

PART B - APPLICABLE PROGRAM(S)

6. Program	7. Assigned Amount for Each Applicable Year					8. State, County, and Reference Number, If Applicable
	YEAR	YEAR	YEAR	YEAR	YEAR	
	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	
Agricultural Risk Coverage (ARC)						
Price Loss Coverage (PLC)						
Conservation Reserve Program Annual Rental (CRP)						
Emergency Assistance Livestock Honey Bee and Farm Raised Fish Program (ELAP)						
Livestock Forage Program (LFP)						
Livestock Indemnity Program (LIP)						
eLoan Deficiency Web Payment (eLDP)						
Noninsured Crop Disaster Assistance (NAP)						
Agricultural Conservation Easement Program (ACEP) (NRCS USE ONLY)						
Conservation Stewardship Program (CSP) (NRCS USE ONLY)						
Environmental Quality Incentives Program (EQIP) (NRCS USE ONLY)						
Grassland Reserve Program (GRP) (NRCS USE ONLY)						

9. Other Program Name	10. Contract Year, Program	11. Assigned Amount	12. State, County, and Reference Number,
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NRCS

COUNTY FSA COMMITTEE

ASSIGNEE

PARTICIPANT

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 Soil Conservation and Domestic Allotment Act (16 U.S.C. 590h(g)), the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Agricultural Act of 2014 (7 U.S.C. 9094) and 7 CFR Part 1404. The information will be used to assign payments made under applicable CCC, FSA, and/or NRCS programs to a designated assignee. 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) and for USDA/NRCS-1, Landowner, Operator, Producer, Cooperator, or Participant Files. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination that the Assignor is unable to assign applicable CCC, FSA, and/or NRCS program payments to a designated assignee.*

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 0560-0183. 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. For certain programs such as ARC, PLC, CRP, ELAP, LIP, and eLDP, this information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (See Pub. L. 113-79, Title I, Subtitle F, Administration and Title II, Subtitle G, Funding and Administration). For NRCS programs, this information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title II, Subtitle G, Funding and Administration).

RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OR NRCS OFFICE.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.