

Farm Bill Program
PAYMENT ASSIGNMENT

TO: _____
Assignee

ADDRESS: _____

Assignee Address

In reference to NRCS agreement number _____ in the
_____ Program (_____),

I hereby assign my payment from USDA, NRCS to the above assignee as follows:

(Check only **one** box)

ALL payments due or to become due under this agreement should be made to the assignee.

Only \$ _____ of my payment should be made to the assignee.

Program Participant's Signature **DATE**

Program Participant's Signature **DATE**

Acknowledgement

I acknowledge receipt of this notice, and agree to accept payment as indicated.

Assignee's Signature

DATE