THE PART OF THE PA		E-CERTII	ENNIAL FA	PPLICA		M
		•	esting (check one or b	• •		
Name(s) of owner(s) whe	en farm was original	ly certified:				
Last Name Representing	the Family Farm:_					
Name(s) of Present Own	ier:					
Address / Location of Se	squicentennial Farn	וייייייייייייייייייייייייייייייייייייי				
City:			State:		Zip:	
Township Name:			County:			
Original Purchase Date:_			_ Original acreage:	Pre	sent acreage	:
Name(s) to appear on ce	ertificate:					
Legal Description of Land						
present owner Date		Name			Relationship	o to Present Owner
I do hereby certify that I a and as such, said farm is			ndants. I further attest			
To whom should the Dep	partment address its	correspondence,	sign and/or certificate?			
Name:						
Address:		Ci	ty:	_State:	Zip:	
Phone:			E-mail address:			
Please enclose your che return to: Centennial Fa Fairgrounds, Springfiel	arms Program, Illir	ois Department o	of Agriculture, Marketi	ng and Promotio	n, P.O. Box	19281 - State
		FOR OF	FICE USE ONLY			
Date Recertified:	1	Recertified by:		Check	Number:	