



Dear Farm Service Agency,

With this signed letter I give you permission to share my FSA paperwork which would include maps and 578's to my Insurance Agent Tom Sorenson of Americana Insurance Group of Albert Lea, MN.

If you would need to contact him his Phone # is 507-377-2000, Fax 507-377-8409 and email is [toms@americanainsurance.com](mailto:toms@americanainsurance.com)

I \_\_\_\_\_ give you permission to share my completed Maps & 578's FSA Paperwork with Americana Insurance Group agency.

Thank you,

X \_\_\_\_\_  
Farmers Signature

\_\_\_\_\_  
Date



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