

C. LGM for Cattle Marketings Report Form

LIVESTOCK GROSS MARGIN FOR CATTLE INSURANCE POLICY MARKETINGS REPORT

Policy # 1	State 2
Reinsurance Year 3	Page # 4 of
Confirmation Number 5	

Insured's Name 6	
Street or Mailing Address 7	
City and State 8	Zip Code
Insured's E-Mail Address 9	Insured's Fax #
Phone # 10	
Tax Identification # 11	12 Check One <input type="checkbox"/> SSN <input type="checkbox"/> EIN <input type="checkbox"/> Other (specify)
Spouse's Tax Identification # 13	Type of Entity 14
Is applicant at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No 15	

Insured's Initials

CONDITIONS 16

(a) All of the information on this Marketing Report is true to the best of my knowledge.
 (b) I understand that falsifying information on this marketing report is a crime punishable by jail or fine.
 (c) Copies of all marketing receipts and claim statements are attached.

CERTIFICATION 17

YES NO (a) I certify that the Actual Marketings stated in this marketing report reflect cattle that I have owned during the insurance period and have fed to finish weight using facilities that I control.

YES NO (b) I certify that I control adequate facilities to feed and finish the number of cattle reflected by the Actual Marketings stated in this marketing report.

YES NO (c) I understand that, in the event of a claim, my coverage will be reduced to the number of cattle sold and no premium will be refunded if the number of cattle sold is less than 75% of the Target Marketings stated in this application.

COPIES OF ALL MARKETING RECEIPTS AND CLAIM STATEMENTS FOR THE APPLICABLE MARKETING PERIOD MUST BE ATTACHED TO THIS MARKETING REPORT.

LIST ALL COVERED MARKETINGS

Type of Operation	County 18	Approved Marketings 19	Deductible (\$ per head) 20	21 Actual Marketings By Month (enter month)											
				Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11		
Yearling finishing															
Calf finishing															

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Insured's Signature 22	Date 23	REMARKS 26
Licensed Agent's Signature 24	Agent Code 25	