

Contract Number	Crop Year	Home RM	Ver	Page	Date	Form ID	Contact Information	Local Number	Toll-Free Number	Fax Number

Telephone Number:
Home Quarter:
Power of Attorney:

Customer Signature _____ Date _____

Yes, I would like to provide yields for uninsured forage acres

Land Code	RM	Qtr	Sec	Twp	Rge	Mer	Total Cult. Acres	2018		2019	
								SMF 900	Crop Name Code 900	SMF 900	2019 Tool/Wet
VARIETY											
SMF											
STB											
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VARIETY											
SMF											
STB											
VARIETY											
SMF											
STB											

Page Totals												
Last Seeding Date												
Grand Totals												