

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

Land Code	RM	Qtr	Sec	Twp	Rge	Mer	Total Cult. Acres	2017		2018		Uninsured Unproductive 997
								SMF 900	Crop Name Code 900	SMF 900	2018 Tool/Wet	
Previous years irrigated acres:												
VARIETY												
SMF												
STB												
IRR												
Previous years irrigated acres:												
VARIETY												
SMF												
STB												
IRR												
Previous years irrigated acres:												
VARIETY												
SMF												
STB												
IRR												
Previous years irrigated acres:												
VARIETY												
SMF												
STB												
IRR												
Previous years irrigated acres:												
VARIETY												
SMF												
STB												
IRR												
Page Totals												
Last Seeding Date												
Grand Totals												