



United States  
Department of  
Agriculture



Federal Crop  
Insurance  
Corporation

FCIC-20805L (12-2024)

# **WEANED CALF RISK PROTECTION LOSS ADJUSTMENT STANDARDS HANDBOOK**

## **2025 and Succeeding Crop Years**

**UNITED STATES DEPARTMENT OF AGRICULTURE  
FARM PRODUCTION AND CONSERVATION  
RISK MANAGEMENT AGENCY**

<b>TITLE:</b> Weaned Calf Risk Protection Loss Adjustment Standards Handbook	<b>NUMBER:</b> FCIC-20805L <b>OPI:</b> Product Administration and Standards Division
<b>EFFECTIVE DATE:</b> 2025 and Succeeding Crop Years	<b>ISSUE DATE:</b> December 10, 2024
<b>SUBJECT:</b>  Provides <b>loss</b> procedures for administering the Weaned Calf Risk Protection Insurance Program.	<b>APPROVED:</b>  <i>/s/ John W. Underwood for</i>  Deputy Administrator for Product Management

## REASON FOR ISSUANCE

This handbook provides loss procedures for administering the Weaned Calf Risk Protection Insurance Program for the 2025 and succeeding crop years. This handbook replaces FCIC-20805L Weaned Calf Risk Protection Loss Adjustment Standards Handbook, dated September 29, 2023. This handbook is effective upon approval and until obsoleted.

## SUMMARY OF CHANGES

Listed below are the significant content changes to the FCIC-20805L Weaned Calf Risk Protection Loss Adjustment Standards Handbook. All changes and additions are highlighted. Minor changes and corrections are not included in this listing. \*\*\* used throughout the handbook indicate where major deletions occurred.

Reference	Description of Change
Cover page	Deleted the blank page after the cover page.
<a href="#">Para. 1A</a>	Deleted "If amendments are issued for a handbook, the original handbook as amended shall constitute the handbook. A bulletin or FAD can supersede either the original handbook or subsequent amendments."
<a href="#">Para. 1B</a>	Added Source of Authority language.
<a href="#">Para. 11A</a>	Clarified that only one county can be on each application. Specified that a separate application is required for each insured weaned calf county.
<a href="#">Para. 12</a>	Updated standard language for unit division.
<a href="#">Para. 13B(1)</a>	Revisions to the end of the insurance period.
<a href="#">Para. 13B(1)(e) and (f)</a>	Reordered for alignment with CP.
<a href="#">Para. 13B(1)(g)</a>	Added references to Canada and Mexico as examples of other countries.
<a href="#">Para. 16B(3)</a> and <a href="#">(4)</a>	Clarified that the insured must give notice within 72 hours of when calves will be backgrounded.
<a href="#">Para. 16B(10)</a>	Simplified and clarified the language regarding notice and consent requirements when calves are moved.
<a href="#">Para. 21B(2)</a>	Clarified a minimum appraisal equal to 10 percent of the approved yield will be applied on a per calf basis if the amount of weight loss cannot be determined.
<a href="#">Exhibit 1</a>	Removed general acronyms that are not crop/program specific and added a statement that those which are not defined can be found in the GSH.

## SUMMARY OF CHANGES (Continued)

Reference	Description of Change
<a href="#">Exhibit 2</a>	Revised the definition of the calf reporting date to state it is equal to 90 days after the date calving begins. Revised definitions for alignment with CP.
<a href="#">Exhibit 3</a>	Clarified form entries and revised worksheets for when calves are sold early.
<a href="#">Exhibit 4</a>	Added reference in item 20 to note contained in Subpara. 2D(1).
<a href="#">Exhibit 5</a>	Clarified that the WWR is used to complete the production report. Clarified the minimum representative sample will be determined by the third-party verifier. The third-party verifier may approve a larger sample if warranted by significant variation in the weight of the calves. Revised the WWR Completion Instructions to reflect these changes.
<a href="#">Exhibit 6</a>	Clarified how and when the BAR is used.

# WEANED CALF RISK PROTECTION LOSS ADJUSTMENT STANDARDS HANDBOOK

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## PART 1: GENERAL INFORMATION AND RESPONSIBILITIES

### 1 General Information

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#### A. Purpose and Objective

The RMA issued loss adjustment standards for the WCRP Insurance Program are the official standard requirements for adjusting losses in a uniform and timely manner. The RMA issued standards for this program and crop year are in effect as of the signature date for this handbook located at [www.rma.usda.gov/Policy-and-Procedure/Private-Developed-Products--20000](http://www.rma.usda.gov/Policy-and-Procedure/Private-Developed-Products--20000).

This handbook remains in effect until superseded by reissuance of the entire handbook subject to any directives contained in any bulletin or FAD released by RMA. A bulletin or FAD can supersede applicable portions of the original handbook. \*\*\*

#### B. Source of Authority

Refer to the LAM for Source of Authority. \*\*\*

#### C. Title VI of the Civil Rights Act of 1964

The USDA prohibits discrimination against its customers. Title VI of the Civil Rights Act of 1964 provides that “No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.” Therefore, programs and activities that receive Federal financial assistance must operate in a non-discriminatory manner. Also, a recipient of RMA funding may not retaliate against any person because they opposed an unlawful practice or policy, or made charges, testified, or participated in a complaint under Title VI.

It is the AIPs’ responsibility to ensure that standards, procedures, methods, and instructions, as authorized by FCIC in the sale and service of crop insurance policies, are implemented in a manner compliant with Title VI. Information regarding Title VI of the Civil Rights Act of 1964 and the program discrimination complaint process is available on the USDA public website at [www.usda.gov/oascr](http://www.usda.gov/oascr). For more information on the RMA Non-Discrimination Statement see the DSSH.

## 1 General Information (Continued)

### D. Related Handbooks

The following table identifies handbooks that shall be used in conjunction with this handbook.

Handbook	Relation/Purpose
CIH	This handbook provides the official FCIC-approved underwriting standards for policies administered by AIPs for the General Administrative Regulations, Common Crop Insurance Policy BP, and Area Risk Protection Regulations.
DSSH	This handbook provides the official FCIC-approved form standards for use in the sale and service of any eligible Federal crop insurance policy; required statements and disclosures; and the standards for submission and review of non-reinsured supplemental policies in accordance with the SRA.
GSH	This handbook provides the official FCIC-approved standards for policies administered by AIPs under the General Administrative Regulations, Common Crop Insurance Policy Regulations BP, including the CAT Endorsement; the Area Risk Protection Insurance Regulations BP; the Stacked Income Protection Plan of Insurance; the Rainfall Index Plan; and the Whole-Farm Revenue Protection Pilot Policy.
LAM	This handbook provides the official FCIC-approved general loss adjustment standards for all levels of insurance provided under FCIC unless a publication specifies that none or only specified parts of this handbook apply.
WCRP ISH	Provides specific underwriting guidelines for WCRP.

- (1) Terms, abbreviations, and definitions general (not weaned calf-specific) to loss adjustment are identified in the GSH and LAM.
- (2) Terms, abbreviations, and definitions specific to weaned calf loss adjustment and this handbook are in [Exhibits 1](#) and [2](#), herein.

### E. CAT Coverage

Refer to the CIH, GSH, and LAM for provisions and procedures not applicable to CAT coverage.

## 2 AIP Responsibilities

### A. Utilization of Standards

All AIPs shall utilize these standards for both loss adjustment and loss training for the applicable crop year. These standards, which include appraisal methods, claims completion instructions, and form standards, supplement the general (not weaned calf-specific) loss adjustment standards identified in the LAM.

**B. Form Distribution**

The following is the minimum distribution of forms completed by the adjuster and signed by the insured (or the insured's authorized representative) for the loss adjustment inspection.

- (1) One legible copy to the insured; and
- (2) The original and all remaining copies as instructed by the AIP.

**C. Record Retention**

It is the AIPs responsibility to maintain records (documents) as stated in the LPRA and described in the LAM.

**D. Form Standards**

- (1) The entry items in [Exhibits 3](#) and [4](#) are the minimum requirements for the Appraisal Worksheets and PWs. All entry items are "Substantive" (i.e., they are required).
- (2) The Privacy Act and Non-Discrimination statements are required statements that must be printed on the form or provided to the insured as a separate document. These statements are not shown on the example form(s) in [Exhibits 3](#) and [4](#). The current Non-Discrimination Statement and Privacy Act Statement can be found on the RMA website at [www.rma.usda.gov](http://www.rma.usda.gov) or in the DSSH.
- (3) The certification statement required by the current DSSH must be included on the PW directly above the insured's signature block immediately followed by the statement below:  
  
"I certify that to the best of my knowledge and belief all of the information on this form is correct. I also understand that failure to report completely and accurately may result in sanctions under my policy, including but not limited to voidance of the policy, and in criminal or civil penalties (18 U.S.C. 1006 and 1014; 7 U.S.C. 1506; 31 U.S.C. 3729, 3730 and any other applicable federal statutes)."
- (4) Refer to the DSSH for other insurance form requirements (such as font size and so forth). The current DSSH can be found on the RMA website at [www.rma.usda.gov](http://www.rma.usda.gov).

## PART 2: POLICY INFORMATION

The AIP determines the insured has complied with all policy provisions of the insurance policy. The WCRP CP is to be considered in this determination.

### 11 Insurability

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The following may not be a complete list of insurability requirements. Refer to the BP, CP, and the SP for a complete list.

#### A. Insured Commodity

- (1) The commodity insured will be all weaned calves located in the county listed on the insured's application in which the insured has a share and for which premium rates are provided by the AD: \*\*\*
  - (a) that is a type designated in the SP and grown for the production of beef;
  - (b) produced using generally recognized and acceptable production practices;
  - (c) that are insurable calves reported on the insured's calf report; and
  - (d) if inspected by the AIP, the insured's livestock operation to produce weaned calves is considered acceptable.
- (2) Each county for which the insured elects insurance coverage must be listed on a separate application.

### 12 Unit Division

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Refer to the BP, CP, and SP for unit division. \*\*\*

### 13 Insurance Period

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#### A. Coverage Begins

- (1) Insurance attaches to calves reported on the calf report for each type and unit on the earlier of the:
  - (a) date the insured submits the insured's calf report including any revised calf reports as provided in Section 6(c) of the CP;
  - (b) calf reporting date; or
  - (c) final calf reporting date.
- (2) Insurance begins as specified in Para. 13A(1) subject to an acceptable inspection if conducted by the AIP (see Section 8(a)(4) of the CP).
- (3) Insurance attaches only to calves reported on the calf report. The insured may report additional calves as often as applicable, in person or by phone and confirmed in writing within 15 days.



**B. End of Insurance Period**

- (1) Coverage ends on each unit or part of a unit at the earliest of:
  - (a) total destruction of the insured commodity;
  - (b) final adjustment of a loss on the unit;
  - (c) abandoning of the insured commodity;
  - (d) putting the commodity to an alternative use; \*\*\*
  - (e) the calendar date calves are weaned;
  - (f) sale of the insured commodity;
  - (g) moving the insured commodity to another country (e.g., Canada or Mexico); or
  - (h) the January 31 calendar date for the end of the insurance period for the spring type immediately following the January 31 SCD for the crop year. For example, January 31, 2025, would be the calendar year date immediately following the January 31, 2024, sales closing date for the 2024 crop year.
- (2) Coverage ends on any of the commodity within a unit once any event specified in Para. 13B(1)(a) - (h) occurs for the commodity. Coverage only remains in effect on the commodity that has not been affected by a specified event.
- (3) For purposes of moving calves under [Para. 16B\(10\)](#) of this handbook, coverage will continue. Insurance coverage will be based on the originating county from which the calves are moved.

**14 Causes of Loss and Exclusions**

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Refer to the BP, CP, and SP for causes of loss and exclusions and the LAM for additional instructions. Insured causes must be established by the insured and verified by the AIP.

## 15 Quality Adjustment

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Quality adjustment of weaned calf production is not authorized under the WCRP Insurance Program.

## 16 Insured Duties

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### A. Duties Under Section 14 of the BP

- (1) In case of damage or loss of production or revenue to any insured commodity, the insured must protect the commodity from further damage by providing sufficient care.
- (2) In the event of damage or loss, all notices required in this Section of the BP must be received by us within 72 hours of the insured's initial discovery of damage or loss (but not later than 15 days after the end of the insurance period) except as otherwise provided in Section 14 of the BP.
- (3) If revenue protection is elected and if there is no damage or loss of production, the insured must give the AIP notice not later than 45 days after the latest date the harvest price is released for the commodity in the unit for which there is a revenue loss.
- (4) The insured must submit a claim in accordance with the applicable provisions of Section 14(e) of the BP.
- (5) All notices required in this Paragraph may be made by telephone or in person to the insured's insurance agent but must be confirmed in writing within 15 days.
- (6) If the insured fails to comply with the notice and consent requirements in Section 14 of the BP, any loss will be determined in accordance with Section 14(b)(5)(ii) and (d)(3) of the BP.

### B. Duties in Addition to Section 14 of the BP

- (1) The insured must:
  - (a) establish that any calf death occurred during the insurance period;
  - (b) **establish** that such death was due to an insured cause of loss under Section 10(a)(1 - 6) and (8) of the CP; and
  - (c) provide to the AIP acceptable documentation of such calf death (e.g., the carcass, photographs of the dead calves, etc.).

**Note:** The AIP may elect to make on-site inspections, i.e., document weather conditions and assess what mitigation efforts the operation has in place to avoid calf deaths.

- (2) The insured must give the AIP notice within 72 hours of the date calving begins.

**B. Duties in Addition to Section 14 of the BP (Continued)**

- (3) The insured must give the AIP notice at least 72 hours prior to the date the insured: \*\*\*
- (a) weans any calves including any calves that will be backgrounded; or
  - (b) moves calves to a different country.
- (4) For purposes Section 11(a)(3) and (7) of the CP, the insured is required to have the calves weighed by a disinterested third party unless the calves will be transported directly to an auction, sale barn, or other established sale facility or buyer or if the calves will be backgrounded as specified in FCIC-approved procedures and the weight can be established based on acceptable sales documents.
- (5) The insured must report a record of the number of calves weaned and the total weight of the weaned calves on the WWR (see [Exhibit 5](#)). The total weight of such weaned calves will be determined in accordance with FCIC approved procedures and verifiable documentation supporting the information contained on the report for each unit for each separate weaning date must be provided with the form.
- (6) The insured must obtain consent from the AIP before:
- (a) destroying any of the insured commodity;
  - (b) putting the insured commodity to an alternative use; \*\*\*
  - (c) abandoning any portion of the insured commodity;
  - (d) selling any of the insured commodity prior to the date the calves would normally be weaned (e.g., early sale); or
  - (e) selling any of the commodity other than to an auction, sale barn, or other established sale facility or buyer.
- (7) The AIP will not give consent for any of the actions in [Para. 16B\(6\)\(a\) - \(e\)](#) until the AIP has determined calf weight for the commodity in accordance with [Para. 16B\(4\)](#). \*\*\*
- (8) The insured must provide notice to the AIP by the calendar date for the end of the insurance period if the insured does not intend to sell or put to other use any of the insured commodity within the insurance period so that the AIP may determine the weight at the end of the insurance period.
- (9) Any time during the coverage period the insured is notified that any of the insured's commodity will be seized, quarantined, or destroyed by order of any governmental authority, the insured must provide the AIP written notice of such circumstance within 72 hours of the subject notice.

**B. Duties in Addition to Section 14 of the BP (Continued)**

(10) The insured must give the AIP immediate notice and obtain AIP consent if the insured intends to move any of the insured commodity to a different county. The notice will include the: \*\*\*

- (a) reason the calves are being moved;
- (b) county from which the calves are moved;
- (c) county and state to which the calves are moved;
- (d) number of calves being moved;
- (e) number of calves remaining at the current location; and
- (f) expected date of the arrival of the calves at the new county location.

**17-20 Reserved**

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## PART 3: APPRAISALS

Potential production for all types of inspections will be appraised in accordance with procedures specified in this handbook and the LAM.

### 21 Determining Appraisals

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#### A. Required Appraisals

- (1) An appraisal is required for:
  - (a) any circumstance listed in Section 12(c)(1)(i) of the CP;
  - (b) an uninsured caused of loss under Section 12(c)(1)(ii) of the CP; or
  - (c) potential production under Section 12(c)(1)(iii) of the CP.
- (2) Appraisals under Para. 21A(1)(a) are equal to the applicable production guarantee as specified in Para. 21B(1).
- (3) Appraisal under Para. 21A(1)(b) are determined as specified in Para. 21B(2).
- (4) Appraisal under Para. 21 A(1)(c) and EOI appraisals are determined based on third-party weight determinations as specified in Para. 21C.

#### B. Uninsured Appraisals

- (1) Assess an appraisal of not less than the applicable production guarantee (e.g., damaged solely by uninsured causes):
  - (a) for yield protection, an appraisal (in pounds) of not less than the insured's production guarantee per weaned calf.
  - (b) for revenue protection, an appraisal (in pounds) of not less than the revenue production guarantee per calf as provided in Section 12(c) of the CP. See Paragraph 1221B of the LAM for example calculations.
  - (c) enter the appraisal in column 37 of the PW. Explain the calculations in the Narrative or on a Special Report.  
  
**Example:** Calves that die due to an uninsured cause, destroyed due to an official quarantine order, are abandoned, put to another use without consent, or are seized or quarantined and not released during the insurance period.
- (2) Uninsured Causes: An appraisal (in pounds) will be made for calves damaged due to uninsured causes resulting in reduction in final weaning weight.

## 21 Determining Appraisals (Continued)

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### B. Uninsured Appraisals (Continued)

**Example:** Five calves are injured due to consumption of moldy feed due to poor feed storage conditions, an uninsured cause of loss, but do not die. Delay any appraisals until the condition of the calves can be accurately determined and any appraised weight loss determined.

A minimum appraisal equal to 10 percent of the **approved yield** will be applied on a per calf basis if the amount of weight loss cannot be determined. \*\*\*

- (3) Assistance from third-party experts may be used to confirm the cause of loss and if it is an insurable or uninsurable cause.

### C. Potential Appraisals

Applicable appraisals (e.g., early sale) are based on production conditions (adverse or favorable). Under adverse conditions for calves released (e.g., for sale with AIP consent), no potential is assessed. Under favorable conditions, the difference between the third-party determined weight and approved yield for the type and unit would be the assessed potential. (See the WWR ([Exhibit 5](#)) for third-party documentation and instructions.)

### D. Appraisal Worksheets

Complete Appraisal Worksheets in accordance with the instructions in [Exhibit 3](#). Such appraisals are reported in Section I of the PW as uninsured or unharvested appraisals, as applicable.

## 22 Deviations and Modifications

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- (1) Deviations in appraisal methods require RMA written authorization (as described in the LAM) prior to implementation.
- (2) There are no pre-established appraisal modifications contained in this handbook, refer to the LAM for additional information.

## 23 General Information for Appraisal Worksheet Entries and Completion Procedures

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- (1) Include the AIP's name in the Appraisal Worksheet title if not preprinted on the worksheet or when a worksheet entry is not provided.
- (2) Include the claim number on the Appraisal Worksheet (when required by the AIP) when a worksheet entry is not provided.
- (3) Separate Appraisal Worksheets must be completed for each unit appraised (applicable to preliminary and final claims).
- (4) Standard Appraisal Worksheet items are numbered consecutively in [Exhibit 3](#). Example Appraisal Worksheets are also provided to illustrate how to complete item entries.

## 24-30 Reserved

## PART 4: PRODUCTION WORKSHEET

### 31 General Information

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- (1) The PW is a progressive form containing all notices of damage occurring during the insurance period (including “No Indemnity Due” claims) on a unit.
- (2) The PW is used to record any appraisals for uninsured causes and all weaned calf production for the unit. The recorded production is a total of all third-party documented production that results from the sale, backgrounding, and any other instance where the calves are weaned during the weaning period as well as any calves that have not been weaned by the EOI. See the WWR, [Exhibit 5](#) for completion instructions and example of a completed report of production.
- (3) Refer to the LAM for instructions regarding the following:
  - (a) calf report errors;
  - (b) delayed notices and delayed claims;
  - (c) corrected claims or fire losses (double coverage) and cases involving uninsured causes of loss, unusual situations, controversial claims, concealment, or misrepresentation; and
  - (d) “No Indemnity Due” claims (which must be verified by an appraisal or notification from the insured that the production, including any applicable appraisal (e.g., solely uninsured causes), exceeded the guarantee).
- (4) The adjuster is responsible for determining if any of the insured’s requirements under the notice and claim provisions of the policy have not been met. If any have not, the adjuster should contact the AIP.
- (5) Instructions labeled “Preliminary” apply to preliminary inspections only related to certain cause of loss determinations (e.g., to document insurable or uninsurable calf death). Instructions labeled “Final” apply to final inspections only performed at the EOI to document any calves that have not been weaned and remain in the unit in the insured weaned calf operation.
- (6) If the AIP determines the claim is to be denied, refer to the LAM for PW completion instructions.
- (7) Standard PW items are numbered consecutively in [Exhibit 4](#). An example PW is also provided to illustrate how to complete item entries.

### 32-40 Reserved

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## EXHIBITS

### Exhibit 1      Acronyms and Abbreviations

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The following table provides the acronyms and abbreviations used in this handbook. Other acronyms that are not defined can be found in the GSH.

Approved Acronym	Term
BAR	Background Adjustment Report
CP	Commodity Provisions
LPRA	Livestock Price Reinsurance Agreement
PW	Production Worksheet
WCRP	Weaned Calf Risk Protection
WWR	Weaning Weight Report

\*\*\*



**Backgrounding:** The practice of growing calves from weaning until they enter the feedlot for finishing or until they are delivered for sale.

**Basic unit:** In lieu of the definition in Section 1 of the BP, a basic unit will be all the insurable commodity in the county on the date coverage begins for the crop year:

- (a) in which the insured has 100 percent share; or
- (b) which is owned by one person and operated by another person on a share basis. (Example: If, in addition to the commodity the insured owns, the insured shares in the commodity with three persons on a separate share basis, you would be entitled to four units; one for each commodity share and one for the commodity the insured owns.)

**Calf report:** The calf report, including any revised reports, submitted by the insured by the earlier of the calf reporting date or the final calf reporting date. The calf report is a summary record of all live calves born at different times from the beginning of calving to the calf reporting date or the final calf reporting dates. The calf report functions as an acreage report.

**Calf reporting date:** The date determined for the type and unit and equal to 90 days after the date calving begins and contained in a notice required in Section 6(a)(1)(iv) of the CP for the applicable type and unit. However, if the calf reporting date as established above is after the final calf reporting date, the calf reporting date is the final calf reporting date and is the date the insured's calf report must be submitted. \*\*\*

**Commodity:** See agricultural commodity as defined in the BP. The term commodity will have the same meaning as crop when referenced in applicable Sections of the BP, the CP, and applicable approved FCIC procedures.

**Crop year:** The period beginning with the sales closing date for the type of the insured commodity and extending through the calendar date for the end of the insurance period for the type. It is designated by the calendar year the crop year begins. For example, the 2024 crop year begins January 31, 2024, for the spring type and ends January 31, 2025.

**Final calf reporting date:** The commodity reporting date contained in the AD for the type by which the insured's calf report must be submitted. Such report may not be revised after this date except in accordance with applicable provisions of Section 6 of the BP (e.g., editorial revisions, etc.) and Section 6 of the CP. \*\*\*

**Harvest price:** In lieu of the definition contained in the BP, the prices determined for the insured commodity type in accordance with the CEPP and used to:

- (a) establish the applicable value for determining the applicable protection guarantee based on the applicable approved yield; and
- (b) value production to count for revenue protection based on the applicable average weaning weight per calf determined on a unit basis.

**Pound:** Sixteen ounces avoirdupois.

**Production guarantee (per weaned calf):** In lieu of the definition of production guarantee (per acre) contained in the BP, the number of pounds determined by multiplying the approved yield per weaned calf by the coverage level percentage the insured elects.

**Projected price:** In lieu of the definition contained in the BP, the prices for the insured commodity type determined in accordance with the CEPP and used to:

- (a) establish the applicable value for determining the applicable protection guarantee based on the applicable approved yield; and
- (b) value production to count for yield protection based on the applicable average weaning weight per calf determined on a unit basis.

**Revenue protection guarantee (per weaned calf):** In lieu of the definition of revenue protection guarantee (per acre) contained in the BP, for revenue protection only, the amount determined by multiplying the production guarantee (per weaned calf) by the greater of the insured's applicable projected price or harvest price. If the harvest price exclusion is elected, the production guarantee (per weaned calf) is only multiplied by the insured's applicable projected price.

**Share:** In lieu of the definition in Section 1 of the BP, share will include all the insured's insurable interest in the insured commodity. However, only for the purpose of determining the amount of indemnity, share will not exceed the insured's share at the earlier of the time of loss or **the** beginning of weaning of any of the insured commodity.

**Spring type:** Calves born **from** February 1 **to** July 31 of the crop year.

**Type:** A category of weaned calves identified as a type in the SP.

**Weaned (weaning):** Removing the calf from the brood cow.

**Weaned calf (calves):** Calves included in the beef class, as specified in the SP and reported on the insured's calf report.

**Weaning date:** The date calves are removed from the brood **cows** (see Section 11(a)(5) of the CP).

**Yield protection:** In lieu of the definition contained in the BP, a plan of insurance that only provides protection against a production loss and is available only for the commodity for which revenue protection is available.

**Yield protection guarantee (per weaned calf):** In lieu of the definition of yield protection guarantee (per acre) contained in the BP, when yield protection is selected for the commodity, the amount determined by multiplying the production guarantee (per weaned calf) by the insured's applicable projected price.

**Exhibit 3 Form Standards – Appraisal Worksheet**

Verify and/or make the following entries for each Appraisal Worksheet element/item number. A completed Appraisal Worksheet example is at the end of this exhibit. For general form standards and other general information, see [Subpara. 2D](#) and [Para. 23](#).

Complete separate appraisal worksheets for each unit and type.

Element/Item Number	Description
Company	Name of AIP if not preprinted on the worksheet (Company Name).
1. Insured's Name	Name of the insured that identifies exactly the person (legal entity) to whom the policy is issued.
2. Policy Number	Insured's assigned policy number.
3. Unit Number	Unit number from the Summary of Coverage after it is verified to be correct.
4. Crop Year	Four-digit crop year, as defined in the policy, for which the claim is filed.
5. Claim Number	Claim number as assigned by the AIP.
6. Type/Code	Enter the type and type code (e.g., spring/XXX) as specified in the AD.
7. Calves Appraised	Number of calves being appraised.

**UNINSURED DAMAGE APPRAISALS****Solely Uninsured Causes – (e.g., Dead Calves Due to Uninsured Causes)**

(See [Para. 21A](#) and [B](#))

Element/Item Number	Description
8. Sample Number	Make no entry. Sample identification numbers are printed on the Appraisal Worksheet.
9. Field ID	Field or sub field identification symbol.
10. Appraisal Date	Enter the date of the appraisal (e.g., 8/15).
11. Weight/Calf	<p>Make no entry for the sample number if partially damaged or solely uninsured damaged appraisals apply for the sample <b>unless early sales apply</b>.</p> <p>If no partially damaged or solely uninsured damaged appraisal entries for the sample number <b>and early sales apply</b>, enter the weight/calf in whole pounds from the WWR for Sold/Backgrounded/etc. (otherwise weaned) calves. Strike through the column heading that does not apply.</p>
12. No. of Calves Sold/Backgrounded/etc.	<p>Make no entry for the sample number if partially damaged or solely uninsured damaged appraisals apply for the sample <b>unless early sales apply</b>.</p> <p>If no partially damaged or solely uninsured damaged appraisal entries for the sample number <b>unless early sales apply</b>, enter the number of calves Sold/Backgrounded/etc. (otherwise weaned). Strike through the column heading that does not apply.</p>
13. No. of Calves Partially Damaged	Make no entry.

**Solely Uninsured Causes – (e.g., Dead Calves Due to Uninsured Causes) (Continued)**

Element/Item Number	Description
14. No. of Calves Solely Uninsured Damaged	Enter the number of calves damaged by solely uninsured causes on the appraisal date.
15. <del>Approved APH Yield/Calf</del> Production Guarantee/Calf	Strike through Approved APH Yield/Calf. Enter the applicable Production Guarantee/Calf in whole pounds for the unit/type. See <a href="#">Para. 21A</a> for additional information and the Remarks for calculations.
16. <del>Potential Pounds/Calf, Pound Loss/Calf Due To Partial Damage/Solely Uninsured Damage</del>	Strike through Potential Pounds/Calf and Partial Damage. Transfer the entry from Column 15.
17. Uninsured Pound Appraisal/Calf <del>Potential Pound Appraisal/Calf</del>	Strike through Potential Pound Appraisal/Calf. Transfer the entry from Column 16.

**UNINSURED DAMAGE APPRAISALS**

**Partially Uninsured Causes**

(See [Para. 21A](#) and [B](#))

Element/Item Number	Description
8. Sample Number	Make no entry. Sample identification numbers are printed on the Appraisal Worksheet.
9. Field ID	Field or sub field identification symbol.
10. Appraisal Date	Enter the date of the appraisal (e.g., 8/15).
11. Weight/Calf	<p>Make no entry for the sample number if partially damaged or solely uninsured damaged appraisals apply for the sample <a href="#">unless early sales apply</a>.</p> <p>If no partially damaged or solely uninsured damaged appraisal entries for the sample number <a href="#">unless early sales apply</a>, enter the weight/calf in whole pounds from the WWR for Sold/Backgrounded/etc. (otherwise weaned) calves. Strike through the column heading that does not apply.</p>
12. No. of Calves Sold/ Backgrounded/etc.	<p>Make no entry for the sample number if partially damaged or solely uninsured damaged appraisals apply for the sample <a href="#">unless early sales apply</a>.</p> <p>If no partially damaged or solely uninsured damaged appraisal entries for the sample number <a href="#">unless early sales apply</a>, enter the number of calves Sold/Backgrounded/etc. (otherwise weaned). Strike through the column heading that does not apply.</p>
13. No. of Calves Partially Damaged	Enter the number of partially damaged calves on the appraisal date.

**Partially Uninsured Causes (Continued)**

Element/Item Number	Description
14. No. of Calves Solely Uninsured Damaged	Make no entry.
15. Approved APH Yield/Calf <del>Production Guarantee/Calf</del>	Strike through Production Guarantee/Calf. Enter the applicable Approved APH Yield/Calf in whole pounds for the unit/type. See <a href="#">Para. 21B</a> for additional information and the Remarks for calculations.
16. <del>Potential Pounds/Calf</del> Pound Loss/Calf Due Partial Damage/ <del>Solely Uninsured Damage</del>	Strike through Potential Pounds/Calf and Solely Uninsured Damage. Enter the appraised weight loss/calf if the weight loss can be determined, otherwise enter the result of multiplying the applicable approved APH yield/calf from Column 15 times 10 percent, the minimum appraisal percent, rounded to whole pounds for the unit/type (applicable only for partially uninsured appraisal entries, e.g., uninsured weight loss due to uninsured causes).
17. Uninsured Pound Appraisal/Calf <del>Potential Pound Appraisal/Calf</del>	Strike through Potential Pound Appraisal/Calf. Transfer the entry from Column 16. See <a href="#">Para. 21B</a> for additional information and the Remarks for calculations.

**POTENTIAL APPRAISALS – EARLY SALE UNDER ADVERSE PRODUCTION CONDITIONS**

(See [Para. 21C](#))

Element/Item Number	Description
8. Sample Number	Make no entry. Sample identification numbers are printed on the Appraisal Worksheet.
9. Field ID	Field or sub field identification symbol.
10. Appraisal Date	Enter the date of the appraisal (e.g., 8/15).
11. Weight/Calf	Enter the third-party determined weight in whole pounds/calf from the WWR.
12. No. of Calves Sold/ Backgrounded/etc.	Enter the number of calves Sold/Backgrounded/etc. (otherwise weaned). Strike through the column heading that does not apply.
13. - 17.	Make no entry (AIP consented to sale, backgrounding, etc.; no potential appraisal applies due to adverse conditions).

**POTENTIAL APPRAISALS – EARLY SALE UNDER FAVORABLE PRODUCTION CONDITIONS**

(See [Para. 21C](#))

Element/Item Number	Description
8. Sample Number	Make no entry. Sample identification numbers are printed on the Appraisal Worksheet.
9. Field ID	Field or sub field identification symbol.
10. Appraisal Date	Enter the date of the appraisal (e.g., 8/15).

**POTENTIAL APPRAISALS – EARLY SALE UNDER FAVORABLE PRODUCTION CONDITIONS (Continued)**

Element/Item Number	Description
11. Weight/Calf	Enter the third-party determined weight in whole pounds/calf from WWR.
12. No. of Calves Sold/Backgrounded/etc.	Enter the number of calves Sold/Backgrounded/etc. (otherwise weaned). Strike through the column heading that does not apply.
13. No. of Calves Partially Damaged	Make no entry.
14. No. of Calves Solely Uninsured Damaged	Make no entry.
15. Approved APH Yield/Calf <del>Production Guarantee/Calf</del>	Strike though Production Guarantee/Calf. Enter the Approved APH Yield/Calf in whole pounds for the unit/type. See <a href="#">Para. 21C</a> for additional information.
16. Potential Pounds/Calf <del>Pound Loss/Calf Due To Partial Damage/Solely Uninsured Damage</del>	Strike through Pound Loss Due To Partial Damage/Solely Uninsured Damage. Subtract Column 11 from Column 15 and enter the result in Column 16.
17. Potential Pound Appraisal/Calf <del>Uninsured Pound Appraisal/Calf</del>	Strike through Uninsured Pound Appraisal/Calf. Transfer the entry from Column 16. See <a href="#">Para. 21C</a> for additional information and the Remarks for calculations.

The following required entries are not illustrated on the Appraisal Worksheet examples below.

Element/Item Number	Description
18. Adjuster's Signature, Code No., and Date	Signature of adjuster, code number, and date signed after the insured (or insured's authorized representative) has signed. If the appraisal is performed prior to signature date, document the date of appraisal in the Narrative Section of the appraisal worksheet (if available); otherwise, document the appraisal date in the Narrative of the PW.
19. Insured's Signature and Date	Insured's (or insured's authorized representative's) signature and date. Before obtaining the insured's signature, review all entries on the appraisal worksheet with the insured or insured's authorized representative, particularly explaining codes, etc., that may not be readily understood.
20. Page Numbers	Page numbers - (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, etc.).

The Weaned Calf Appraisal Worksheet is a continuation worksheet recording the different appraisals that may apply during insurance period for the unit. The worksheet contains multiple adjuster/insured signature entries to record each separate appraisal that may apply.

**Exhibit 3 Form Standards – Appraisal Worksheet (Continued)**

<b>WEANED CALF RISK PROTECTION APPRAISAL WORKSHEET</b> (FOR ILLUSTRATION PURPOSES ONLY)	COMPANY: Any Company			
	1 INSURED'S NAME	2 POLICY NUMBER	3 UNIT NUMBER	4 CROP YEAR
	Joe Rancher	XXXXXX	0001-0000 BU	YYYY
	5 CLAIM NUMBER	6 TYPE/CODE	7 CALVES APPRAISED	
	XXXXX	Spring XXX	5	

**NOTICE OF DAMAGE (DROUGHT) - UNINSURED APPRAISALS – SOLELY UNINSURED CAUSES (e.g., Dead Calves Due to Uninsured Causes) - EARLY SALE (ADVERSE PRODUCTION CONDITIONS)**

SAMPLE NUMBER 8	FIELD ID 9	APPRAISAL DATE 10	WEIGHT/CALF (in Pounds) 11	NO OF CALVES			APPROVED APH YIELD/CALF PRODUCTION GUARANTEE/CALF (in pounds) 15	POTENTIAL POUNDS/CALF POUND LOSS/CALF DUE TO PARTIAL DAMAGE/SOLELY UNINSURED DAMAGE (in pounds) 16	UNINSURED POUND APPRAISAL/CALF POTENTIAL POUND APPRAISAL/CALF (in pounds) 17
				SOLD/ BACKGROUNDED/ETC. 12	PARTIALLY DAMAGED 13	SOLELY UNINSURED DAMAGED 14			
1	A	8/15				5	450	450	450
2	A	8/15	311	9					
3	A/B	10/1	300	73					
4									
5									
6									
7									
8									

REMARKS: Moldy feed caused death of 5 calves for sample 1 as determined on the 8/15 appraisal date; solely uninsured cause appraisal applies (Production guarantee = 450 pounds (600-pound APH Yield × 75% Coverage Level). Enter the Column 17 entry in Column 37 of the PW. Pasture conditions poor. Insured elects to sell 9 calves from field A on 8/15 with AIP consent. Weight of calves based on third-party sales records shown on the Weaning Weight Report used to establish production to count on the PW. On 10/1, due to continued pasture deterioration, insured elects to sell remaining calves in fields A and B with AIP consent. Weight of calves based on third-party sales records shown on the Weaning Weight Report used to establish production to count on the PW. No potential remaining for sold calves.

**Refer to the Above Appraisal Worksheet instructions for required statements and signature entries.**

**Exhibit 3 Form Standards – Appraisal Worksheet (Continued)**

WEANED CALF RISK PROTECTION APPRAISAL WORKSHEET (FOR ILLUSTRATION PURPOSES ONLY)	COMPANY: Any Company			
	1 INSURED'S NAME  Joe Rancher	2 POLICY NUMBER  XXXXXX	3 UNIT NUMBER  0002-0000 BU	4 CROP YEAR  YYYY
	5 CLAIM NUMBER  XXXXX	6 TYPE/CODE  Spring XXX		7 CALVES APPRAISED  4

NOTICE OF DAMAGE (DROUGHT) - UNINSURED APPRAISALS – UNINSURED CAUSES) - EARLY SALE (ADVERSE PRODUCTION CONDITIONS)									
SAMPLE NUMBER  8	FIELD ID  9	APPRAISAL DATE  10	WEIGHT/CALF (in Pounds)  11	NO OF CALVES			APPROVED APH YIELD/CALF PRODUCTION GUARANTEE/CALF (in pounds)  15	POTENTIAL POUND/CALF POUND LOSS/CALF DUE TO PARTIAL DAMAGE/SOLELY UNINSURED DAMAGE  16	UNINSURED POUND APPRAISAL/CALF POTENTIAL POUND APPRAISAL/CALF  17
				SOLD/ BACKGROUNDED/ETC.  12	PARTIALLY DAMAGED  13	SOLELY UNINSURED DAMAGED  14			
1	A	8/15			4		600	60	60
2	A	8/15	260	12					
3	B	8/15	284	8					
4									
5									
6									
7									
8									

REMARKS: Moldy feed injury caused a weight loss for 4 calves for sample 1, field A, as determined on the 8/15 appraisal date; uninsured cause appraisal applies. Partial damage appraised weight loss could not be established and the minimum 10 percent uninsured appraisal was applied. Partial damage appraisal = 60 pounds (600-pound APH Yield × 10% (minimum appraisal percent for partial damage). Enter the Column 17 entry in Column 37 of the PW. Pasture conditions poor. Insured elects partial sales of calves from fields A and B with AIP consent. Weight of calves based on third-party sales records shown on the Weaning Weight Report used to establish production to count on the PW. No potential remaining for sold calves. The remaining field A and B calves were held (not sold, backgrounded, or weaned) on the unit at the End of Insurance Period date (1/31). The third-party determined weight was 350 pounds/calf as shown on the Weaning Weight Report used to establish production to count on the PW.

**Refer to the Above Appraisal Worksheet instructions for required statements and signature entries.**



**Exhibit 3 Form Standards – Appraisal Worksheet (Continued)**

WEANED CALF RISK PROTECTION APPRAISAL WORKSHEET (FOR ILLUSTRATION PURPOSES ONLY)	COMPANY: Any Company			
	1 INSURED'S NAME Joe Rancher	2 POLICY NUMBER XXXXXX	3 UNIT NUMBER 0003-0000 BU	4 CROP YEAR YYYY
	5 CLAIM NUMBER XXXXX	6 TYPE/CODE Spring XXX		7 CALVES APPRAISED 4

NOTICE OF DAMAGE (APRIL - COLD WET WEATHER) - POTENTIAL APPRAISALS – EARLY SALE <b>(FAVORABLE PRODUCTION CONDITIONS)</b>									
SAMPLE NUMBER 8	FIELD ID 9	APPRAISAL DATE 10	WEIGHT/CALF (in Pounds) 11	NO OF CALVES			APPROVED APH YIELD/CALF PRODUCTION GUARANTEE/CALF (in pounds) 15	POTENTIAL POUNDS/CALF ROUND LOSS/CALF DUE TO PARTIAL DAMAGE/SOLELY UNINSURED DAMAGE 16	UNINSURED POUND APPRAISAL/CALF POTENTIAL POUND APPRAISAL/CALF 17
				SOLD/ BACKGROUNDED/ETC. 12	PARTIALLY DAMAGED 13	SOLELY UNINSURED DAMAGED 14			
1	A	8/15	400	15			600	200	200
2									
3									
4									
5									
6									
7									
8									

REMARKS: Damage due to cold wet weather reported. The insured elected to sell 15 calves early on 8/15. Pasture conditions were good at the time of the inspection. The early sale requires a weight determination and a potential appraisal due to favorable pasture conditions. Consent given for the early sale but a potential appraisal per calf for the early sale was assessed. Third-party determined weight on the inspection date was 400 pounds/calf based on sale documents from local sale barn and recorded on the Weaning Weight Report used to establish production to count on the PW. The potential pounds are 200 pounds/calf (Column 12, 600-pound APH Yield - Column 10, 400-pound determined weaning weight). The remainder of the calves in the unit sold at the EOI date.

**Refer to the Above Appraisal Worksheet instructions for required statements and signature entries.**

**Exhibit 4 Form Standards – Production Worksheet**

Verify and/or make the following entries for each PW element/item number. Completed PW examples are at the end of this exhibit. For general form standards and other general information, see [Subpara. 2D](#) and [Para. 31](#).

All weaned calf production must be third-party verified for all program purposes. The WWR ([Exhibit 5](#)) is the official document for providing third-party verification of production, appraised and harvested, and is used to complete the appraisal worksheet, PW, and production reports used for APH purposes.

Element/Item Number	Description
1. Crop/Code #	"Weaned Calf" (0805).
2. Unit #	Unit number from the Summary of Coverage after it is verified to be correct.
3. Location Description	Location identifications, as applicable for the commodity.
4. Date(s) of Damage	First three letters of the month(s) during which the determined insured damage occurred for the inspection and cause(s) of damage listed in item 5 below. If no entry in item 5 below, make no entry. For progressive damage, enter the month that identifies when the majority of the insured damage occurred. Include the specific date where applicable as in the case of hail damage (e.g., Aug 11). Enter additional dates of damage in the extra spaces, as needed. If more space is needed, document the additional dates of damage in the Narrative (or on a Special Report). Refer to the illustration in item 6 below. If there is no insurable cause of loss, and a no indemnity due claim will be completed, make no entry.
5. Cause(s) of Damage	<p>Name of the determined insured cause(s) of damage for the commodity as listed in the LAM for the date of damage listed in item 4 above. If an insured cause(s) of damage is coded as "Other," explain in the Narrative. Enter additional causes of damage in the extra spaces, as needed. If more space is needed, document the additional determined insured causes of damage in the Narrative (or on a Special Report). Refer to the illustration in item 6 below.</p> <p>If it is evident that no indemnity is due, enter "no indemnity due" across the columns in Item 5 (refer to the LAM for more information on no indemnity due claims).</p>
6. Insured Cause %	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> Whole percent of damage for the insured cause of damage listed in item 5 above. Enter additional "Insured Cause %" in the extra spaces, as needed. If additional space is needed, enter the additional determined "Insured Cause %" in the Narrative (or on a Special Report). The total of all "Insured Cause %" including those entered in the Narrative must equal 100%.</p>

**Exhibit 4 Form Standards – Production Worksheet (Continued)**

Element/Item Number	Description
6. Insured Cause % (Continued)	<p>If there is no insurable cause of loss, and a no indemnity due claim will be completed, make no entry.</p> <p>Example entries for items 4 - 6 and the Narrative reflect entries for multiple dates of damage, the corresponding insured causes of damage, and insured cause percentages:</p> <p style="text-align: center;">4. Date(s) of Damage                      <b><i>JUL</i></b></p> <p style="text-align: center;">5. Causes of Damage                        <b><i>Drought</i></b></p> <p style="text-align: center;">6. Insured Cause %                        <b><i>100</i></b></p> <p style="text-align: center;">Narrative</p>
7. Company/Agency	Name of company and agency servicing the policy.
8. Name of Insured	Name of the insured that identifies exactly the person (legal entity) to whom the policy is issued.
9. Claim #	Claim number as assigned by the AIP.
10. Policy #	Insured's assigned policy number.
11. Crop Year	Four-digit crop year, as defined in the policy, for which the claim is filed.
12. Additional Units	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> Unit number(s) for all non-loss units for the commodity at the time of final inspection. A non-loss unit is any unit for which a PW has not been completed. Additional non-loss units may be entered on a single PW.</p> <p>If more spaces are needed for non-loss units, enter the unit numbers, identified as "Non-Loss Units," in the Narrative or on an attached Special Report.</p>
13. Est. Prod. Per Calf <del>Acre</del>	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> Strike through "Acre" and insert "Calf." Enter the approved yield of ALL non-loss units for the commodity at the time of final inspection.</p>
14. Date(s) Notice of Loss	<p><b>Preliminary:</b></p> <p>(1) Date the first or second notice of damage or loss was given for the unit in item 2, in the 1st or 2nd space, as applicable. Enter the complete date (MM/DD/YYYY) for each notice.</p> <p>(2) A notice of damage or loss for a third preliminary inspection (if needed) requires an additional set of PWs. Enter the date of notice for a third preliminary inspection in the 1st space of item 14 on the second set of PWs.</p>

**Exhibit 4      Form Standards – Production Worksheet (Continued)**

Element/Item Number	Description
14.      Date(s) Notice of Loss (Continued)	<p>(3)      Reserve the “Final” space on the first page of the first set of PWs for the date of notice for the final inspection.</p> <p>(4)      If the inspection is initiated by the AIP, enter “Company Insp.” instead of the date.</p> <p>(5)      If the notice does not require an inspection, document as directed in the Narrative instructions.</p> <p><b>Final:</b> Transfer the last date (in the 1st or 2nd space from the first or second set of PWs) to the final space on the first page of the first set of PWs if a final inspection should be made as a result of the notice. Always enter the complete date of notice (MM/DD/YYYY) for the “final” inspection in the final space on the first set of PWs. For a delayed notice of loss or delayed claim, refer to the LAM.</p>
15.      Companion Policy(s)	<p>(1)      If no other person has a share in the unit (insured has 100 percent share), make no entry.</p> <p>(2)      In all cases where the insured has less than a 100 percent share of a loss-affected unit, ask the insured if the other person sharing in the unit has a weaned calf insurance policy (not crop-hail, fire, and so forth). If the other person does not, enter “none.”</p> <p>          (a)      If the other person has a weaned calf insurance policy and it can be determined that the same AIP services it, enter the policy number. Handle these companion policies according to AIP instructions.</p> <p>          (b)      If the other person has a weaned calf insurance policy and a different AIP or agent services it, enter the name of the AIP and/or agent (and contract policy) if known.</p> <p>          (c)      If unable to verify the existence of a companion policy, enter “Unknown” and contact the AIP for further instructions.</p> <p>(3)      Refer to the LAM for further information regarding companion policies.</p>

**Section I – Determined Calves Appraised, Production and Adjustments**

Make separate line entries for varying:

- (1) rate classes, types, classes, sub-classes, intended uses, irrigated practices, cropping practices, or organic practices, as applicable;
- (2) APH yields;
- (3) appraisals;
- (4) stages or intended use(s);
- (5) shares (e.g., 50 percent and 75 percent shares on the same unit); or
- (6) appraisals for damage due to hail or fire if Hail and Fire Exclusion is in effect.

Element/Item Number	Description
16. Field ID	The field identification symbol from a sketch map or an aerial photo. Refer to the Narrative.
17. Multi-Crop Code	<b>Preliminary and Final:</b> Make no entry.
18. Reported Calves <del>Acres</del>	Strike through “acres.” In the event of over-reported “calves,” handle in accordance with the individual AIP’s instructions. In the event of under-reported calves, enter the reported calves for the field or sub field. If there are no under-reported calves, make no entry.
19. Determined Calves <del>Acres</del>	<p>Refer to the LAM for definition of acceptable determined acreage for purposes of administering “determined calves.” Strike through “acres” and enter the determined number of calves. Enter the determined calves for the field or subfield for which consent is given for other use and/or:</p> <ol style="list-style-type: none"> <li>(1) put to other use without consent;</li> <li>(2) abandoned;</li> <li>(3) damaged by uninsured causes; or</li> <li>(4) for which the insured failed to provide acceptable records of production.</li> </ol> <p>Estimating the number of calves does not apply.</p> <p>Account for all calves in the unit.</p>
20. Interest or Share	<p>Insured’s interest in the commodity to three decimal places as determined at the time of inspection. If shares vary on the same unit, use separate line entries.</p> <p>Refer to <a href="#">Subpara. 2D(1)</a>.</p>

**Exhibit 4 Form Standards – Production Worksheet (Continued)**

<b>Element/Item Number</b>	<b>Description</b>
21. Risk	Three-digit code for the correct “Rate” as specified on the actuarial document maps. If a “Rate” or “High-Risk Area” is not specified on the actuarial document maps, make no entry. Verify with the Summary of Coverage and if the “Rate” is found to be incorrect, revise according to the AIP’s instructions. Refer to the LAM.  (Written agreements are not authorized for the WCRP Insurance Program.)
22. Type	Three-digit code, entered exactly as specified on the AD for the type grown by the insured. If “No Type Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If a type is not specified on the AD, make no entry.
23. Class	Three-digit code, entered exactly as specified on the AD for the class grown by the insured. If “No Class Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If a class is not specified on the AD, make no entry.
24. Sub-Class	Three-digit code, entered exactly as specified on the AD for the sub-class grown by the insured. If “No Sub-Class Specified,” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If a sub-class is not specified on the AD, make no entry.
25. Intended Use	Three-digit code, entered exactly as specified on the AD for the intended use of the commodity grown by the insured. If “No Intended Use Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If an intended use is not specified on the AD, make no entry.
26. Irr. Practice	Three-digit code, entered exactly as specified on the AD for the irrigated practice carried out by the insured. If “No Irrigated Practice Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If an irrigated practice is not specified on the AD, make no entry.
27. Cropping Practice	Three-digit code, entered exactly as specified on the AD for the cropping practice (or practice) carried out by the insured. If “No Cropping Practice Specified” or “No Practice Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If a cropping practice is not specified on the AD, make no entry.
28. Organic Practice	Three-digit code, entered exactly as specified on the AD for the organic practice carried out by the insured. If “No Organic Practice Specified” is shown in the AD, enter the appropriate three-digit code from the AD (e.g., 997). If an organic practice is not specified on the AD, make no entry.

Element/Item Number	Description														
29. Stage	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> Stage abbreviation as shown below.</p> <table> <tr> <th><u>STAGE</u></th><th><u>EXPLANATION</u></th></tr> <tr> <td>"P" .....</td><td>Calves abandoned without consent, destroyed or put to other use without consent, damaged solely by uninsured causes, seized, quarantined, or for which the insured failed to provide acceptable records of production to the AIP</td></tr> <tr> <td>"H" .....</td><td>Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold</td></tr> <tr> <td>"UH" .....</td><td>Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI – Column 31 entry based on third-party weights)</td></tr> <tr> <td>"TZ" .....</td><td>UUF/Third Party Damage – Zero production on same unit</td></tr> <tr> <td>"TA" .....</td><td>UUF/Third Party Damage – Appraised production on same unit</td></tr> <tr> <td>"TH" .....</td><td>UUF/Third Party Damage – Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold</td></tr> </table>	<u>STAGE</u>	<u>EXPLANATION</u>	"P" .....	Calves abandoned without consent, destroyed or put to other use without consent, damaged solely by uninsured causes, seized, quarantined, or for which the insured failed to provide acceptable records of production to the AIP	"H" .....	Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold	"UH" .....	Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI – Column 31 entry based on third-party weights)	"TZ" .....	UUF/Third Party Damage – Zero production on same unit	"TA" .....	UUF/Third Party Damage – Appraised production on same unit	"TH" .....	UUF/Third Party Damage – Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold
<u>STAGE</u>	<u>EXPLANATION</u>														
"P" .....	Calves abandoned without consent, destroyed or put to other use without consent, damaged solely by uninsured causes, seized, quarantined, or for which the insured failed to provide acceptable records of production to the AIP														
"H" .....	Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold														
"UH" .....	Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI – Column 31 entry based on third-party weights)														
"TZ" .....	UUF/Third Party Damage – Zero production on same unit														
"TA" .....	UUF/Third Party Damage – Appraised production on same unit														
"TH" .....	UUF/Third Party Damage – Put to other use with consent (e.g., backgrounding, etc. with third-party weighing) or sold														
30. Use of Calves Acreage	<p>Use of the calves (strike through "Acreage"). Use the following "Intended Use" abbreviations.</p> <table> <tr> <th><u>USE</u></th><th><u>EXPLANATION</u></th></tr> <tr> <td>"WOC" .....</td><td>Other use without consent</td></tr> <tr> <td>"SU" .....</td><td>Solely uninsured</td></tr> <tr> <td>"ABA" .....</td><td>Abandoned without consent</td></tr> <tr> <td>"H" .....</td><td>Put to other use with consent (e.g., backgrounding, etc. with third-party weights) or sold</td></tr> <tr> <td>"UH" .....</td><td>Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI)</td></tr> </table> <p>Verify any "Intended Use" entry. If final use of the commodity was not as indicated, strike out the original line and initial it. Enter all data on a new line showing the correct "Final Use."</p>	<u>USE</u>	<u>EXPLANATION</u>	"WOC" .....	Other use without consent	"SU" .....	Solely uninsured	"ABA" .....	Abandoned without consent	"H" .....	Put to other use with consent (e.g., backgrounding, etc. with third-party weights) or sold	"UH" .....	Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI)		
<u>USE</u>	<u>EXPLANATION</u>														
"WOC" .....	Other use without consent														
"SU" .....	Solely uninsured														
"ABA" .....	Abandoned without consent														
"H" .....	Put to other use with consent (e.g., backgrounding, etc. with third-party weights) or sold														
"UH" .....	Unharvested (e.g., calves not sold, backgrounded, or weaned by the EOI)														

**Exhibit 4 Form Standards – Production Worksheet (Continued)**

Element/Item Number	Description
31. Appraised Potential	Transfer the potential pound appraisal per calf from item 17 of the appraisal worksheet.
32a. Moisture %	Make no entry.
32b. Factor	Make no entry.
33. Shell %, Factor, or Value	Make no entry.
34. Production Pre QA	Column 19 multiplied by column 31. If no entry in column 31, make no entry.
35. Quality Factor	Make no entry.
36. Production Post QA	Transfer the entry in item 34. If no entry in column 34, make no entry.
37. Uninsured Causes	<p>Result of the uninsured pound appraisal per calf for uninsured causes (taken from Column 17 of Appraisal Worksheet or other documentation) multiplied by column 19. Refer to the LAM for information on how to determine uninsured cause appraisals. If no uninsured causes, make no entry.</p> <p>(1) Hail and Fire exclusion not in effect.</p> <p>(a) On preliminary inspections, advise the insured to keep the calves damaged solely by uninsured causes separate from other undamaged calves. Refer to the LAM for information on how to determine uninsured cause appraisals.</p> <p>(b) If partly damaged by uninsured causes, enter the result of multiplying the appraised uninsured loss of production per calf, by column 19 entry.</p> <p>(2) Refer to the LAM when a Hail and Fire Exclusion is in effect and damage is from hail or fire.</p> <p>(3) Enter the result of adding uninsured cause appraisals to hail and fire exclusion appraisals.</p> <p>(4) For fire losses, if the insured also has other fire insurance (double coverage), refer to the LAM.</p>
38. Total to Count	Result of adding item 36 and item 37.
39. Total	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> Total determined calves (column 19).</p>



**Exhibit 4 Form Standards – Production Worksheet (Continued)**

Element/Item Number	Description
40. - 41.	Make no entry.
42. Totals	Total of entries in columns 34, 36, 37, and 38. If a column has no entries, make no entry.

**Narrative Instructions**

If more space is needed, document on a Special Report, and enter “Refer to the Special Report.” Attach the Special Report and WWR to the PW.

a.	If no calves are released (not sold, backgrounded, otherwise weaned in the unit), enter “No calves released,” adjuster’s initials, and date.
b.	Explain any uninsured causes, unusual, or controversial cases.
c.	If there is an appraisal in Section I, column 37 for uninsured causes due to a hail/fire exclusion, show the original hail/fire liability per calf and the hail/fire indemnity per calf.
d.	Document the actual appraisal date if an appraisal was performed prior to the adjuster’s signature date on the Appraisal Worksheet, and the date of the appraisal is not recorded on the Appraisal Worksheet.
e.	State that there is “No other fire insurance” when fire damages or destroys the insured commodity and it is determined that the insured has no other fire insurance. Also refer to the LAM.
f.	Explain any errors found on the Summary of Coverage.
g.	Explain any commingled calves. Refer to the LAM.
h.	Explain a “NO” checked in item 44, “Damage Similar to Other Farms in the Area?”
i.	Explain any difference between date of inspection and signature dates. For an absentee insured, enter the date of the inspection AND the date of mailing the PW for signature.
j.	When any other adjuster or supervisor accompanied the adjuster on the inspection, enter the code number of the other adjuster or supervisor and the date of inspection.
k.	Explain the reason for a “No Indemnity Due” claim. “No Indemnity Due” claims are to be distributed in accordance with the AIP’s instructions.
l.	Explain any delayed notices or delayed claims as instructed in the LAM.
m.	Document the method and calculation used to determine calves for the unit. Refer to the LAM.
n.	When the insured cause of damage or loss is disease, specify the disease or evident symptoms, list the control/treatment measures utilized, and explain why the control/treatment measures administered were not effective.
o.	When the insured cause is calf death, document insured cause and evidence of the calf death (e.g., calf carcass, photographs of dead calves, etc.).

## Section II – Determined Harvested Production

- (1) Account for all harvested production (weight of sold, backgrounded, otherwise weaned calves for all entities sharing in the commodity).
- (2) For calves sold, backgrounded and third-party weighed, etc., make entries in columns 49 through 52 as follows: Name and address of sale facility, feedlot, or insured (if calves are backgrounded), etc. Document information on the Narrative and WWR ([Exhibit 5](#)).
- (3) If acceptable sale or weight tickets for commercial sale are not available to complete the WWR, other third-party documentation on the WWR is required to establish the number of calves, weights, and other necessary information. Refer to the LAM if applicable.
- (4) If additional lines are necessary, the data may be entered on a continuation sheet. Use separate lines for:
  - (a) varying names and addresses of sale facilities, feedlots, backgrounding locations for the insured, etc. for sold or backgrounded production.
  - (b) varying shares (e.g., 50 percent and 75 percent shares on same unit).
  - (c) varying types in the same unit, if applicable. If there are multiple types contained within the same unit, the AIP may complete a separate PW for each type in the unit.
- (5) If there is harvested production from more than one insured practice (or type) and a separate approved APH yield has been established for each, the harvested production also must be entered on separate lines in columns 47 through 66 by type or practice. If production has been commingled, refer to the LAM.

Element/Item Number	Description
43. Date Harvest Completed. (Used to determine if there is a delayed notice or a delayed claim. Refer to the LAM.)	<p><b>Preliminary:</b> Make no entry.</p> <p><b>Final:</b> The earlier of the date all calves in the unit were (1) sold, (2) totally destroyed, (3) put to other use (e.g., backgrounding), (4) a combination of sold, destroyed, or put to other use, or (5) the calendar date for the end of the insurance period.</p>
44. Damage similar to other farms in the area?	Check “Yes” or “No.” Check “Yes” if the amount and cause of damage due to insurable causes is similar to the experience of other farms in the area. If “No” is checked, explain in the “Narrative.”

**Exhibit 4 Form Standards – Production Worksheet (Continued)**

Element/Item Number	Description
45. Assignment of Indemnity	Check “Yes” only if an assignment of indemnity is in effect for the crop year; otherwise, check “No.” Refer to the LAM.
46. Transfer of Right to Indemnity	Check “Yes” only if a transfer of right to indemnity is in effect for the unit for the crop year; otherwise, check “No.” Refer to the LAM.
47a. Share	Record only varying shares on same unit to three decimal places.
47b. Field ID	<p>(1) If only one practice and/or type of harvested production is listed in Section I, make no entry.</p> <p>(2) If more than one practice and/or type of harvested production is listed in Section I, and a separate approved APH yield exists, indicate for each practice/type the corresponding Field ID (from Section I, column 16).</p>
48. Multi-Crop Code	Make no entry.
49. - 55. Length or Diameter	Enter name and address of sale facility, feedlot, and insured if the calves are backgrounded, etc. See WWR, <a href="#">Exhibit 5</a> , for complete documentation of production information (number of weaned calves, weights, disposition (sale, backgrounding, etc.)).
56. Bu., Ton, Lbs., Cwt.	Circle “Lbs.” in column heading. Enter the production in whole pounds of production.
57. Shell/Sugar Factor	Make no entry.
58a. FM %	Make no entry.
58b. Factor	Make no entry.
59a. Moisture %	Make no entry.
59b. Factor	Make no entry.
60a. Test Wt.	Make no entry.
60b. Factor	Make no entry.
61. Adjusted Production	Transfer entry from Column 56.
62. Prod. Not to Count	<p>Net production not to count, in whole pounds, when acceptable records identifying such production are available, which has been assessed an appraisal of not less than the guarantee per calf, or from other sources.</p> <p>This entry must never exceed production shown on the same line. Explain any “production not to count” in the Narrative.</p>
63. Production Pre-QA	Result of subtracting column 62 from column 61. If no entry in column 62, transfer entry from Column 61.
64a. Value	Make no entry.
64b. MKT Price	Make no entry.
65. Quality Factor	Make no entry.
66. Production to Count	Transfer entry from Column 63.

**Exhibit 4 Form Standards – Production Worksheet (Continued)**

<b>Element/Item Number</b>	<b>Description</b>
67. Total of Column 63.	Total entries in column. If no entry in Column 63, make no entry.

For items 68. - 72. When separate line entries are made for varying shares, stages, APH yields, price elections, types, etc., within the unit, and totals need to be kept separate for calculating indemnities, make no entry and follow the AIP's instructions. Otherwise, make the following entries.

<b>Element/Item Number</b>	<b>Description</b>
68. Section II Total:	<b>Preliminary:</b> Make no entry.  <b>Final:</b> Total of Column 66.
69. Section I Total	<b>Preliminary:</b> Make no entry.  <b>Final:</b> Enter figure from Section I, Column 38 total.
70. Unit Total	<b>Preliminary:</b> Make no entry.  <b>Final:</b> Total of item 68 and item 69.
71. Allocated Prod.	Refer to the LAM for instructions for determining allocated production. Enter the total production, rounded to whole pounds, allocated to this unit that is included in Sections I or II of the PW. Document how allocated production was determined and record supporting calculations in the Narrative or on a Special Report.
72. Total APH Prod.	Result of subtracting the total of Column 37 (item 42 "Totals") and item 71 (Allocated Prod.) from item 70 (Unit Total). If no entries in Column 37 and item 71, transfer the entry in item 70. Make no entry when separate APH yields are maintained by type, practice, and so forth, within the unit.

**The following required entries are not illustrated on the PW example below.**

<b>Element/Item Number</b>	<b>Description</b>
73. Insured's Signature and Date	Insured's (or insured's authorized representative's) signature and date. Before obtaining the signature, review all entries on the PW with the insured (or insured's authorized representative), particularly explaining codes, and so forth, that may not be readily understood.  Final indemnity inspections and final replanting payment inspections should be signed on bottom line.
74. Adjuster's Signature, Code #, and Date	Signature of adjuster, code number, and date signed after the insured (or insured's authorized representative) has signed. For an absentee insured, enter adjuster's code number only. The signature and date will be entered after the absentee has signed and returned the PW.  Final indemnity inspections should be signed on bottom line.
Page	<b>Preliminary:</b> Page numbers - "1," "2," and so forth, at the time of inspection.  <b>Final:</b> Page numbers - (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, and so forth).

# Exhibit 4 Form Standards – Production Worksheet (Continued)

PRODUCTION WORKSHEET (FOR ILLUSTRATION PURPOSES ONLY)																									
1. Crop/Code # WEANED CALF 0805		2. Unit # 0001-0000 BU		3. Location Description 1XXXX		7. Company Agency		ANY COMPANY ANY AGENCY		8. Name of Insured JOE RANCHER															
4. Date(s) of Damage JUL		5. Cause(s) of Damage DROUGHT.		6. Insured Cause % 100		12. Additional Units		13. Est. Prod. Per Calf/Acre		9. Claim # XXXXXXXXXX					11. Crop Year YYYY										
10. Policy # XXXXXXXXXX										14. Date(s) Notice of Loss										1st MM/DD/YYYY		2nd MM/DD/YYYY		Final MM/DD/YYYY	
15. Companion Policy(s)																									
SECTION I – DETERMINED CALVES, APPRAISED, PRODUCTION AND ADJUSTMENTS																									
A. ACTUARIAL										B. POTENTIAL YIELD															
16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	29.	30.	31.	32a. 32b.	33.	34.	35.	36.	37.	38.			
Field ID	Multi-Crop Code	Reported Calves Acres	Determined Calves Acres	Interest or Share	Risk	Type	Class	Sub-Class	Intended Use	Irr Practice	Cropping Practice	Organic Practice	Stage	Use of Calves Acreage	Appraised Potential	Moisture % Factor	Shell %, Factor, or Value	Production Pre QA	Quality Factor	Production Post QA	Uninsured Causes	Total to Count			
A			9	1.000		OXX							H	H		-----									
A			5	1.000		OXX							P	SU		-----					2,250	2,250			
A-B			73	1.000		OXX							H	H		-----									
																-----									
39. TOTAL			87	40-41. NO ENTRIES REQUIRED										42. TOTALS							2,250	2,250			
NARRATIVE (If more space is needed, attach a Special Report) 9 calves in Field A were sold (harvested). Five calves in Field A died due moldy feed resulting in a solely uninsured appraisal. Nine calves in Fields A sold (harvested) early due to poor pasture conditions; no potential applicable. Remainder of unit calves for Field A and B sold on 10/1 due to continued pasture deterioration; no potential applicable. Production based on third-party sale weight. Sold production: Field A, 2,799 lbs. (9 calves); Fields A and B, 33,547 lbs. (73 calves). See Weaning Weight Report for production documentation.																									
SECTION II – DETERMINED HARVESTED PRODUCTION																									
43. Date Harvest Completed MM/DD/YYYY				44. Damage similar to other farms in the area? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								45. Assignment of Indemnity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				46. Transfer of Right to Indemnity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>									
A. MEASUREMENTS						B. GROSS PRODUCTION						C. ADJUSTMENTS TO HARVESTED PRODUCTION													
47a. 47b.	48.	49.	50.	51.	52.	53.	54.	55.	56.	57.	58a. 58b.	59a. 59b.	60a. 60b.	61.	62.	63.	64a. 64b.	65.	66.						
Share Field ID	Multi-Crop Code	Length or Diameter	Width	Depth	Deduction	Net Cubic Feet	Conversion Factor	Gross Prod.	Bu., Ton (Lbs. CWT)	Shell/Sugar Factor	FM% Factor	Moisture % Factor	Test WT Factor	Adjusted Production	Prod. Not to Count	Production Pre-QA	Value Mkt. Price	Quality Factor	Production to Count						
-----		ACME SALES ANYTOWN, ANY STATE							2,799		-----	-----	-----	2,799		2,799	-----		2,799						
-----		THIRD-PARTY WEIGHED							33,547		-----	-----	-----	33,547		33,547	-----		33,547						
-----											-----	-----	-----				-----								
67.Total																36,346	68. Section II Total		36,346						
																69. Section I Total		2,250							
																70. Unit Total		38,596							
																71. Allocated Prod.									
																72. Total APH Prod.		36,346							

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).

# Exhibit 4 Form Standards – Production Worksheet (Continued)

## PRODUCTION WORKSHEET (FOR ILLUSTRATION PURPOSES ONLY)

1. Crop/Code # WEANED CALF 0805		2. Unit # 0002-0000 BU		3. Location Description 2XXXX		7. Company Agency ANY COMPANY ANY AGENCY		8. Name of Insured JOE RANCHER																
4. Date(s) of Damage JUL		5. Cause(s) of Damage DROUGHT.		6. Insured Cause % 100		12. Additional Units		13. Est. Prod. Per Calf/Acre		9. Claim # XXXXXXXX					11. Crop Year YYYY									
10. Policy # XXXXXXXX										14. Date(s) Notice of Loss 1st MM/DD/YYYY										2nd Final MM/DD/YYYY				
15. Companion Policy(s)																								
SECTION I – DETERMINED CALVES, APPRAISED, PRODUCTION AND ADJUSTMENTS																								
A. ACTUARIAL										B. POTENTIAL YIELD														
16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	29.	30.	31.	32a.	32b.	33.	34.	35.	36.	37.	38.	
Field ID	Multi-Crop Code	Reported Calves Acres	Determined Calves Acres	Interest or Share	Risk	Type	Class	Sub-Class	Intended Use	Irr Practice	Cropping Practice	Organic Practice	Stage	Use of Calves Acreage	Appraised Potential	Moisture % Factor	Shell %, Factor, or Value	Production Pre QA	Quality Factor	Production Post QA	Uninsured Causes	Total to Count		
A			4	.500		OXX							H	H		-----						240	240	
A			8	.500		OXX							H	H		-----								
B			8	.500		OXX							H	H		-----								
A-B			80	.500		OXX							UH	UH	350	-----		28,000		28,000			28,000	
39. TOTAL			100	28,240-41. NO ENTRIES REQUIRED												42. TOTALS			28,000		28,000	240	28,240	
NARRATIVE (If more space is needed, attach a Special Report) Four calves in Field A damaged from moldy feed and uninsured damage appraisal applied. Twenty calves in Fields A and B were sold (harvested) early due to poor pasture conditions, no potential applicable. Sold production: 5,392 lbs. (Total of Field A, 3,120 lbs. (12 calves including 4 uninsured damaged calves) and Field B, 2,272 lbs. (8 calves). Remainder of unit's calves for Field A and B were unharvested (calves not sold, backgrounded, or weaned), third-party weighed on EOI date, 1/31, 28,000 lbs. Column 31, 350 lbs./calf appraised potential (28,000 lbs. ÷ 80 calves). See Weighing Weight Report for production documentation.																								
SECTION II – DETERMINED HARVESTED PRODUCTION																								
43. Date Harvest Completed MM/DD/YYYY				44. Damage similar to other farms in the area? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								45. Assignment of Indemnity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				46. Transfer of Right to Indemnity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>								
A. MEASUREMENTS						B. GROSS PRODUCTION						C. ADJUSTMENTS TO HARVESTED PRODUCTION												
47a.	48.	49.	50.	51.	52.	53.	54.	55.	56.	57.	58a.	58b.	59a.	59b.	60a.	60b.	61.	62.	63.	64a.	64b.	65.	66.	
Share	Multi-Crop Code	Length or Diameter	Width	Depth	Deduction	Net Cubic Feet	Conversion Factor	Gross Prod.	Bu. Ton Lbs. CWT	Shell/Sugar Factor	FM%	Moisture %	Test WT	Adjusted Production	Prod. Not to Count	Production Pre-QA	Value Mkt. Price	Quality Factor	Production to Count					
-----		ACME SALES ANYTOWN, ANY STATE							5,392		-----	-----	-----	-----	5,392		5,392	-----		5,392				
-----											-----	-----	-----	-----			-----							
-----											-----	-----	-----	-----			-----							
67. Total																5,392	68. Section II Total		5,392					
																69. Section I Total		28,240						
																70. Unit Total		33,632						
																71. Allocated Prod.								
																72. Total APH Prod.		33,392						

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).

# Exhibit 4 Form Standards – Production Worksheet (Continued)

PRODUCTION WORKSHEET (FOR ILLUSTRATION PURPOSES ONLY)																									
1. Crop/Code # WEANED CALF 0805		2. Unit # 0003-0000 BU		3. Location Description 1XXXX		7. Company Agency ANY COMPANY ANY AGENCY		8. Name of Insured JOE RANCHER																	
4. Date(s) of Damage JUL		5. Cause(s) of Damage DROUGHT.		6. Insured Cause % 100		12. Additional Units		13. Est. Prod. Per Calf/Acre		9. Claim # XXXXXXXXXX										11. Crop Year YYYY					
10. Policy # XXXXXXXXXX										14. Date(s) Notice of Loss MM/DD/YYYY										1st MM/DD/YYYY		2nd MM/DD/YYYY		Final MM/DD/YYYY	
15. Companion Policy(s)																									
SECTION I – DETERMINED CALVES, APPRAISED, PRODUCTION AND ADJUSTMENTS																									
A. ACTUARIAL										B. POTENTIAL YIELD															
16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	29.	30.	31.	32a.	32b.	33.	34.	35.	36.	37.	38.		
Field ID	Multi-Crop Code	Reported Calves Acres	Determined Calves Acres	Interest or Share	Risk	Type	Class	Sub-Class	Intended Use	Irr Practice	Cropping Practice	Organic Practice	Stage	Use of Calves Acreage	Appraised Potential	Moisture % Factor	Shell %, Factor, or Value	Production Pre QA	Quality Factor	Production Post QA	Uninsured Causes	Total to Count			
A			15	.750		0XX							H	H	200	-----			3,000		3,000		3,000		
B			85	.750		0XX							H	H		-----									
																-----									
																-----									
39. TOTAL		100		40-41. NO ENTRIES REQUIRED										42. TOTALS		3,000				3,000				3,000	
NARRATIVE (If more space is needed, attach a Special Report) Fifteen calves in Field A were sold early (harvested) with a sold weight of 6,000 lbs. and a potential appraisal per calf of 200 lbs.. Remainder of unit calves for Field B were sold at the EOI date with a sold weight of 36,550. See Weighing Weight Report for production documentation.																									
SECTION II – DETERMINED HARVESTED PRODUCTION																									
43. Date Harvest Completed MM/DD/YYYY				44. Damage similar to other farms in the area? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								45. Assignment of indemnity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				46. Transfer of Right to Indemnity? Yes <input type="checkbox"/> No <input type="checkbox"/> X <input checked="" type="checkbox"/>									
A. MEASUREMENTS						B. GROSS PRODUCTION						C. ADJUSTMENTS TO HARVESTED PRODUCTION													
47a.	48.	49.	50.	51.	52.	53.	54.	55.	56.	57.	58a.	58b.	59a.	59b.	60a.	60b.	61.	62.	63.	64a.	64b.	65.	66.		
Share Field ID	Multi-Crop Code	Length or Diameter	Width	Depth	Deduction	Net Cubic Feet	Conversion Factor	Gross Prod.	Bu., Ton (Lbs.) CWT	Shell/Sugar Factor	FM% Factor	Moisture % Factor	Test WT Factor	Adjusted Production	Prod. Not to Count	Production Pre-QA	Value Mkt. Price	Quality Factor	Production to Count						
-----		ACME SALES ANYTOWN, ANY STATE							6,000		-----	-----	-----	-----	6,000		6,000	-----			6,000				
-----		AUCTION SALES, INC ANYTOWN, ANY STATE							36,550		-----	-----	-----	-----	36,550		36,550	-----			36,550				
-----											-----	-----	-----				-----								
67. Total																		42,550				68. Section II Total		42,550	
																						69. Section I Total		3,000	
																						70. Unit Total		45,550	
																						71. Allocated Prod.			
																						72. Total APH Prod.		45,550	

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).



## General Instructions

### A.      Weaning Weight Report

The WWR is completed by the insured and is used to record and document accurate weaning weights of the weaned calves for each weaning date through the end of the insurance period **and is used to complete the production report**. Information on the WWR will be utilized to determine production to count for claims and APH purposes. The insured is responsible for providing the WWR(s) to their AIP.

\*\*\*

- (1)      A separate WWR must be completed for each unit and type, if applicable.
- (2)      When the insured calves are weaned, the number of calves weaned and total weaned weight must be determined within five business days (see exception below) by the insured and verified by an acceptable, disinterested third-party. The third-party verifier must be present at the time the calves are weighed.
- (3)      If the calves are weighed on the insured's scale or other private-party scale, the scale must meet the applicable requirements contained in the LAM, Paragraph 1002B, C, and E. The applicable requirements include changes in terminology to conform to the insured commodity, weaned calves.
- (4)      A representative sample of the calves being weaned on **each** weaning date will be used to determine the total weaning weight of calves being weaned **during the insurance period (Para. 16B(3) and (4) provides notice of weaning and weaning weight requirements)**. The minimum sample will be 20 percent of the total number of calves being weaned not to exceed 30 calves. **The minimum representative sample will be determined by the third-party verifier [listed in B(2) - (9)]. The third-party verifier may approve a larger sample if warranted by significant variation in the weight of the calves.** \*\*\*

**Exception:**      If calves are backgrounded after being weaned and before being delivered to a commercial sale facility **(or buyer)**, the weight of the calves recorded on official sale documents will be adjusted to the date the calves were weaned **(see weaning notice requirement above)**. The total weight contained in the sale documents will be decreased 1.5 pounds/day/calf for each day between the date of weighing on the sale documents and the date of weaning. For example, the sale documents showed the calves were weighed 10 days after weaning and the total weight for 10 calves was 7,500 pounds or 750 pounds/calf. The weight per calf would be decreased to 735 pounds per calf [750 pounds – (10 days × 1.5 pounds/day)] and the total weight would be adjusted to 7,350 pounds (735 pounds/calf × 10 calves). All calculations will be documented on the BAR (see [Exhibit 6](#)). The adjusted weight per calf and total adjusted weight transferred to the WWR and referenced in the Remarks of the report.

- (5)      Persons or entities that can provide third-party verification are listed in Para. B below.



**B.      WWR Acceptable Third Parties**

The following individuals are acceptable disinterested third parties provided they have no interest in the insured calves or other entities for the insured:

- (1)      Auction, Sale Barn, Livestock Exchange, etc.;
- (2)      AIP Loss Adjuster;
- (3)      Livestock Commission Representative;
- (4)      County Agricultural and Natural Resources Extension Agent;
- (5)      Licensed Veterinarian;
- (6)      State Extension Beef Cattle Specialist;
- (7)      State Department of Agriculture Animal Health, Livestock, or Measurement Standards Division Personnel;
- (8)      State Cattlemen's Association Official; or
- (9)      Authorized FSA personnel.

**C.      WWR Completion Instructions**

The insured will complete the WWR. If calves are weighed at an auction, sale barn, exchange, or on a commercial scale, the insured will attach the sale documentation or weight tickets to the WWR, if required by the AIP for APH purposes (such documentation is required for loss adjustment purposes). It is the responsibility of the insured to maintain all calf counts and weight records and make them available to the AIP upon request.

C. WWR Completion Instructions (Continued)

Element/Item Number	Description
1. Insured Name	Enter the name of the insured as it appears on the policy.
2. County	Enter the name of the county in which the cattle are located and insured in.
3. Policy Number	Enter the WCRP policy number for the insured calves being weighed.
4. Unit Number	Enter the unit number.
5. Type & Crop Year	Enter Type and three-digit code number, entered exactly as specified on the AD, along with applicable crop year.
6. Insured Address	Enter the mailing address of the insured as it appears on the policy.
7. Insured's Telephone	Enter the area code and telephone number at which the insured can be reached during normal business hours.
8. Notice of Damage/Loss	Enter "YES" or "NO" as applicable. Explain in Remarks.
9. Date Weaned	Enter each date (MM/DD/YYYY) when the calves were weaned. Enter "F" by the date if all calves in the unit have been weaned and their numbers and weights recorded prior to the calendar date for the end of the insurance period. If any calves in the unit have not been weaned by the calendar date for the end of the insurance period (the final date of weaning), the number of remaining calves and weight for such calves must be determined by the final date (the Date Weaned will be shown as the final date, i.e., 1/31/XXXX end of insurance period for the spring type).
10. Date of Weighing	Enter the date (MM/DD/YYYY) when the calves were weighed either by a commercial sales facility or buyer or with an acceptable disinterested third-party present. The date of weighing, whether by a commercial sales facility or buyer or with an acceptable disinterested third-party present must occur within five business days of the weaning date or the final date of weaning (i.e., 1/31/XXXX end of insurance period for the spring type). (See General Instructions, <a href="#">item A(2)</a> and <a href="#">Exception</a> , and item 9 if the final date of weaning applies.) ***
11. Number of Calves	Enter the total number of calves that were weighed on each weaning date. ***
12. Weight Sum	Enter the total weight of all calves that were weighed on each weaning date. ***
13. Average Calf Weight	Calculate the average calf weight (pounds per calf) as follows:  Weight Sum ÷ Number of Calves. (Round to the nearest pound.)
14. Weight Records	If weight records are being attached (if required by the AIP for APH purposes), enter "YES." Otherwise, enter "NO." If applicable, include all weight record documents (e.g., auction or buyer receipts, weight tickets, etc.). (Such documentation is required for loss adjustment purposes.)
15. Third Party Name	Enter the name of the acceptable disinterested third party.
16. Third Party Telephone	Enter the area code and telephone number at which the acceptable disinterested third party can be reached during normal business hours.
17. Third Party Title	Enter the title or job description of the acceptable disinterested third party (see <a href="#">Para. B</a> ).

C. WWR Completion Instructions (Continued)

Element/Item Number	Description
18. Third Party Affiliation	Enter the entity type (e.g., AIP loss adjuster, sale barn, etc.) of the acceptable disinterested third party (see <a href="#">Para. B</a> ).
19. Scale Owner(s) Name	Enter the name of the business, individual, or organization that owns and maintains the scales. If the scales are owned by the insured, enter "INSURED."
20. Scale Owner(s) Telephone	Enter the area code and telephone number at which the business, individual, or organization that owns and maintains the scales can be reached during normal business hours.

Complete Elements 21 - 24 at the End of Insurance Period for the Unit.

Element/Item Number	Description
21. Total Number of Calves	<p>Enter the total number of calves weaned for the unit for each date of weaning. The total number will include insured calves reported on the calf report, calves listed on the calf report as uninsurable, and any underreported calves determined on the date for the end of the insurance period.</p> <p>Any calves in excess of the total number of insured calves and uninsurable calves reported on the calf report will be treated as unreported calves.</p> <p>Enter the number of uninsurable and underreported calves reported on the calf report in the Remarks.</p>
22. Total Weight	<p>Enter the total combined weight (calculated if representative sample weight method was utilized) of all calves for the unit from item 21 (includes the weight of calves reported as uninsurable on the calf report and underreported calves).</p> <p>The weight of underreported calves will be included in the Total Weight for the unit.</p>
23. Total Adjusted Number of Calves	Enter the result of subtracting the number of reported uninsurable calves from the Total Number of Calves. (No adjustment is made for underreported calves.)
24. Total Adjusted Weight	<p>Enter the result of subtracting the weight of reported uninsurable calves from the Total Weight. The weight of reported uninsurable calves is determined by dividing the Total Weight for the applicable date weaned by the Total Number of Calves for that date and multiplying the result by the number uninsurable calves rounded to a whole number.</p> <p>The weight of reported uninsurable calves will not be used for APH or loss determinations.</p>

**C.      WWR Completion Instructions (Continued)**

<b>Element/Item Number</b>	<b>Description</b>
25.      Remarks	Note any information pertinent to the calves, such as description of the calves, any reported calves not accounted for on this report, any unusual conditions occurring during the weighing of the calves, and any calves reported on the calf report that were lost due to uninsurable causes. If more space is needed, enter applicable information on another sheet and attach to this form.
26.      Signature of Insured and Date	Signature of the insured and date. Add additional signature lines necessary to reflect the weaning and production entries entered in the columns on the form.
27.      Signature of Third Party and Date	<p>Signature of third party and date.</p> <p>If sold through an auction, sale barn, or other established sale facility or buyer identified in items 15 - 18, no signature is required. Sale documents will be sufficient to demonstrate third-party verification. In such instances, enter "No signature required."</p> <p>Add additional signature lines necessary to reflect the weaning and production entries entered in the columns on the form.</p>

**Exhibit 5 Weaning Weight Report (Continued)**

WEANING WEIGHT REPORT (FOR ILLUSTRATION PURPOSES ONLY)				
1. Insured Name I.M. Insured		2. County Cherry		3. Policy Number XX-XXX-XXXXX
		4. Unit Number 00010000BU		5. Type & Crop Year Spring XXX - YYYY
6. Insured Address RR ONE XXXXXX, NEBRASKA XXXXX		7. Insured's Telephone (XXX) XXX-XXXX		
8. Notice of Damage/Loss	No	Yes		
9. Date Weaned	08/15/YYYY	F - 10/01/YYYY		
10. Date of Weighing	08/15/YYYY	10/01/YYYY		
11. Number of Calves	13	73		
12. Weight Sum	4,043	30,748		
13. Average Calf Weight	311	421		
14. Weight Records	Yes	No		
15. Third Party Name	ABC Livestock Auction	ABC Livestock Auction		
16. Third Party Telephone	(XXX) XXX-XXXX	(XXX) XXX-XXXX		
17. Third Party Title	Sale Barn	Sale Barn		
18. Third Party Affiliation	Sale Barn	Sale Barn		
19. Scale Owner(s) Name	ABC Livestock Auction	ABC Livestock Auction		
20. Scale Owner(s) Telephone	(XXX) XXX-XXXX	(XXX) XXX-XXXX		
Total for All Dates of Weaning Including the Final Date of Weaning (Complete on the end of insurance or the End of the Insurance Period Date for the unit, as applicable.)				
21. Total Number of Calves		22. Total Weight		23. Total Adjusted Number of Calves
86		34,791		82
				24. Total Adjusted Weight
				33,547
25. REMARKS				
8/15/YYYY Date Weaned, Early Sale, Sale Barn, Weigh Records Attached, Insurable Damage (Poor Pasture Conditions)				
4 calves reported as uninsurable on the calf report (5 calves died due to totally uninsured causes and are not included in this report)				
9 insured calves and 2,799 pounds PTC entered on PW: $9 = (13 - 4)$ ; $2,799 \text{ lbs.} = [4,043 \text{ lbs.} - (4,043 \div 13) \times 4]$				
I, certify that the information provided above and in any attachments is true, correct, and verified to the best of my knowledge.				
26. SIGNATURE OF INSURED I. M. Insured		DATE 08/15/YYYY		27. SIGNATURE OF THIRD PARTY I. M. Verified
				DATE 08/15/YYYY
26. SIGNATURE OF INSURED I. M. Insured		DATE 10/01/YYYY		27. SIGNATURE OF THIRD PARTY I. M. Verified
				DATE 10/01/YYYY
26. SIGNATURE OF INSURED		DATE MM/DD/YYYY		27. SIGNATURE OF THIRD PARTY
				DATE MM/DD/YYYY

The applicable Privacy Act statement must appear on the form (or back of the form). See the DSSH (FCIC 24040) for the current statement.

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**General Instructions**

**A.      Background Adjustment Report**

The BAR is completed by the insured and is used to determine the weaning weight of insured calves that are backgrounded during the insurance period before delivery to a commercial sales facility or buyer. The BAR records and documents the calculations in adjusting the third-party verified sales weights to the date the calves are weaned. Information on the BAR will be utilized on the WWR (see [Exhibit 5](#)). \*\*\*

**B.      BAR Completion Instructions**

The insured will complete the BAR for calves that have been backgrounded and do not have a verified weaning weight on the date the calves are weaned. Sale documentation or weight tickets from a commercial sales facility or buyer [see [Exhibit 5\(B\)](#)] must be attached to the BAR. Upon completion, attach the BAR and the corresponding documents to the WWR (see [Exhibit 5](#)). It is the responsibility of the insured to maintain all calf counts and weight records and make them available to the AIP upon request. \*\*\*

**B. BAR Completion Instructions (Continued)**

Element/Item Number	Description
1. Insured Name	Enter the name of the insured as it appears on the policy.
2. Crop Year	Enter the crop year in which the report is being completed.
3. County	Enter the name of the county in which the cattle are located and insured in.
4. Policy Number	Enter the WCRP policy number for the insured calves being weighed.
5. Unit Number	Enter the unit number.
6. Type	Enter Type and three-digit code number, entered exactly as specified on the AD, for the type from the AD.
7. Insured Address	Enter the mailing address of the insured as it appears on the policy.
8. Insured Telephone	Enter the area code and telephone number at which the insured can be reached during normal business hours.
9. Date Weaned	Enter each date (MM/DD/YYYY) when the calves were weaned. Transfer this date to element 9 (Date Weaned) on the WWR.
10. Date Weighed	Enter the date (MM/DD/YYYY) when the calves were weighed by a commercial sales facility or buyer and acceptable sales documentation is available or with an acceptable disinterested third-party present if the calves will not be delivered to a commercial sales facility or buyer or commercial sales weights and documentation will not be available. The date of weighing whether by a commercial sales facility or buyer or with an acceptable disinterested third-party present must occur within five business days of the final date (i.e., 1/31/XXXX end of insurance period for the spring type). Transfer this date to element 10 (Date of Weighing) on the WWR. ***
11. Background Days	Calculate the number of days between the date weaned and the date weighed as follows:  Date Weighed – Date Weaned
12. Background Adjustment/Day	Enter “1.5” to represent the background adjustment per calf per day.
13. Background Adjustment	Calculate the background adjustment for each calf as follows:  Background Days × Background Adjustment/Day
14. Total Weight	Enter the total combined weight of all calves for the unit from item 15 (includes the weight of calves reported as uninsurable on the calf report and underreported calves). The weight of underreported calves will be included in the Total Weight for the unit.

**B.      BAR Completion Instructions (Continued)**

<b>Element/Item Number</b>	<b>Description</b>
15.      Number of Head	Enter the total number of calves weighed for the unit for each date weighed. The total number will include insured calves reported on the calf report, calves listed on the calf report as uninsurable, and any underreported calves determined on the date for the end of the insurance period. Any calves in excess of the total number of insured calves and uninsurable calves reported on the calf report will be treated as unreported calves. Enter the number of uninsurable and underreported calves reported on the calf report in the Remarks.
16.      Average Calf Weight	Calculate the average calf weight (pounds per calf) as follows:  Total Weight ÷ Number of Head
17.      Adj. Calf Weaning Weight	Calculate the adjusted calf weaning weight as follows:  Average Calf Weight – Background Adjustment  This number will be transferred to element 13 (Average Calf Weight) on the WWR.
18.      Adj. Total Weaning Weight	Calculate the total weaning weight of all calves as follows:  Adj. Calf Weaning Weight × Number of Head  This number will be transferred to element 12 (Weight Sum) on the WWR.
19.      Weight Records	All sale or weight records (e.g., auction or buyer receipts, weight tickets, etc.) verified by an acceptable disinterested third party with the weight and number of head must be attached to the BAR for all calves that are backgrounded and do not have a verified weaning weight. (Such documentation is required for loss adjustment purposes.)
20.      Remarks	Note any information pertinent to the calves, such as description of the calves and any unusual conditions occurring during the weighing of the calves. If more space is needed, enter applicable information on another sheet and attach to this form.
21.      Signature of Insured	Signature of the insured.
22.      Date	Date the insured signs the report.



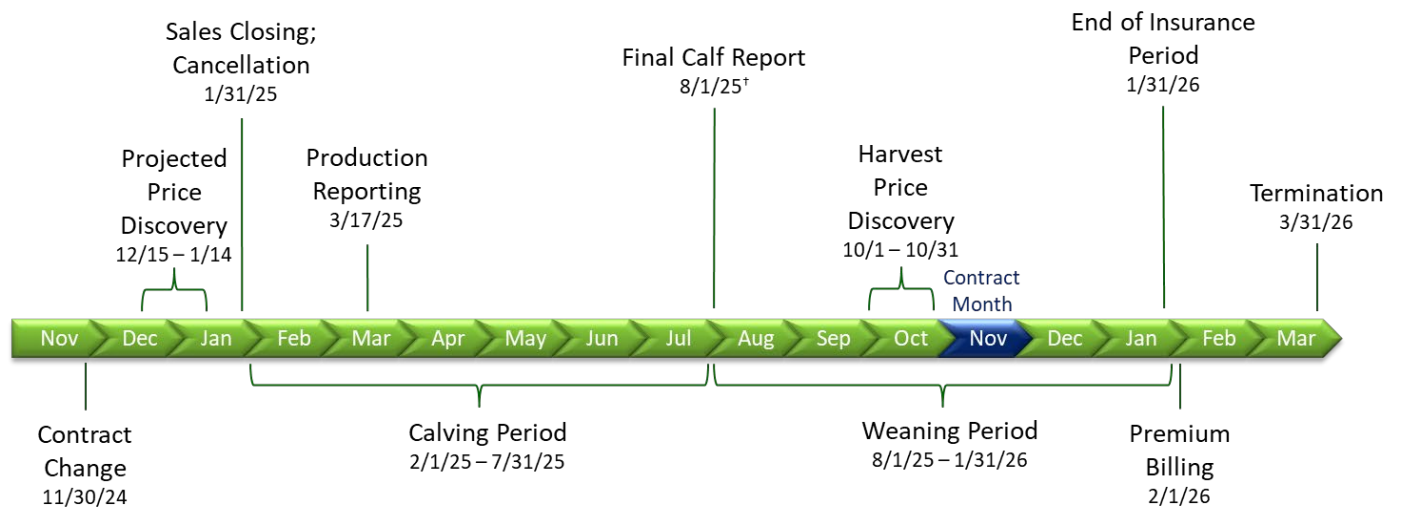
**Exhibit 6      Background Adjustment Report (Continued)**

BACKGROUND ADJUSTMENT REPORT (FOR ILLUSTRATION PURPOSES ONLY)					
1. Insured Name I.M. Insured	2. Crop Year 2024	3. County Cherry	4. Policy Number XX-XXX-XXXXX	5. Unit Number 00010000BU	6. Type Spring XXX
7. Insured Address RR ONE XXXXXX, NEBRASKA		8. Insured Telephone (XXX) XXX-XXXX			
9. Date Weaned <i>(Date the calves were weaned)</i>	10/01/YYYY				
10. Date Weighed <i>(Date the calves were third-party weighed, i.e., sales facility)</i>	10/31/YYYY				
11. Background Days <i>(Item 10 – Item 9)</i>	30				
12. Background Adjustment/Day <i>(Pounds/Day)</i>	1.5				
13. Background Adjustment <i>(Item 11 x 1.5 pounds/day)</i>	45				
14. Total Weight <i>(Total weight of the calves)</i>	11,840				
15. Number of Head	20				
16. Average Calf Weight <i>(Item 14 ÷ Item 15)</i>	592				
17. Adj. Calf Weaning Weight <i>(Item 16 – Item 13)</i>	547				
18. Adj. Total Weaning Weight <i>(Item 17 x Item 15)</i>	10,940				
19. Weight Records – <i>Sale records with the weight and number of head must be attached to this form for all calves that are backgrounded and do not have a verified weaning weight.</i>					
20. REMARKS					
I certify that the information provided above and in any attachments is true and correct to the best of my knowledge.					
21. SIGNATURE OF INSURED I.M. Insured		22. DATE 10/31/XX		PAGE <u>1</u> OF <u>1</u>	

The applicable Privacy Act statement must appear on the form (or back of the form). See the DSSH (FCIC 24040) for the current statement.

## Exhibit 7      Weaned Calf Insurance Cycle

### Spring Calves



*\*Coverage begins with submission of the Calf Report submitted by the insured. The Calf Report may be revised as often as required to report the birth of additional calves during the 90-day period after the date calving begins except that the Calf Report may not be revised after the earlier of the insured's Calf Reporting Date for the type and unit or the Final Calf Reporting Date for the type specified in the actuarial documents.*