



FARM SCHEDULE

Location of *Insured Premises* _____

We cover only the following classes or items of property for which a specific limit of liability is shown. *Our* liability shall not exceed such limit. This coverage is subject to the *terms* of the policy applying to Coverage E and Coverage F.

Item No	Peril of Windstorm Limit of Liability	*All Perils But Windstorm Limit of Liability	<i>WE COVER YOUR PROPERTY FOR THE PERIL OF WINDSTORM ONLY IF AN AMOUNT IS LISTED FOR THE ITEM.</i> *REFER TO FORM FL-6(W) FOR THE OTHER PERILS WHICH <i>WE</i> COVER. Coverage E- Scheduled Farm Personal Property
1.	\$ _____	\$ _____	On <i>Farm Produce and Supplies</i> _____
2.	\$ _____	\$ _____	On <i>Mobile Machinery</i> _____
3.	\$ _____	\$ _____	On <i>Poultry</i> _____
4.	\$ _____	\$ _____	On <i>Livestock</i> _____
5.	\$ _____	\$ _____	On _____
6.	\$ _____	\$ _____	On _____
7.	\$ _____	\$ _____	On _____
8.	\$ _____	\$ _____	On _____
9.	\$ _____	\$ _____	On _____
10.	\$ _____	\$ _____	On _____
11.	\$ _____	\$ _____	On _____
12.	\$ _____	\$ _____	On _____
13.	\$ _____	\$ _____	On _____
14.	\$ _____	\$ _____	On _____
15.	\$ _____	\$ _____	On _____
16.	\$ _____	\$ _____	On _____
17.	\$ _____	\$ _____	On _____
18.	\$ _____	\$ _____	On _____
19.	\$ _____	\$ _____	On _____
20.	\$ _____	\$ _____	On _____
	\$ _____	\$ _____	Total Amount of Insurance
			Coverage F-Barns, Buildings and Other Structures
21.	\$ _____	\$ _____	On _____
22.	\$ _____	\$ _____	On _____
23.	\$ _____	\$ _____	On _____
24.	\$ _____	\$ _____	On _____
25.	\$ _____	\$ _____	On _____
26.	\$ _____	\$ _____	On _____
27.	\$ _____	\$ _____	On _____
28.	\$ _____	\$ _____	On _____
29.	\$ _____	\$ _____	On _____
30.	\$ _____	\$ _____	On _____
31.	\$ _____	\$ _____	On _____
32.	\$ _____	\$ _____	On _____
33.	\$ _____	\$ _____	On _____
34.	\$ _____	\$ _____	On _____
35.	\$ _____	\$ _____	On _____
36.	\$ _____	\$ _____	On _____
37.	\$ _____	\$ _____	On _____
38.	\$ _____	\$ _____	On _____
39.	\$ _____	\$ _____	On _____
40.	\$ _____	\$ _____	On _____
	\$ _____	\$ _____	Total Amount of Insurance