

JUSTIFICATION OF VALUE FORM

Insured Name: _____

Agent Name: EXCALIBUR INSURANCE AGENCY

Animal's Name: _____

Expiring Policy: _____

Current Classification Score: _____

SHOW RECORDS:

(Last 5 shows during the past year)

Name & Place of Show	Date	Class	Placing	# in Class

CALVING RECORDS:

Date Last Calved	Resulting Offspring	Total # of Calves Lifetime
	Sire: _____ Sex: _____	

BREEDING RECORDS:

Date Last Bred: _____

Sire Used: _____

If pregnant - Due Date: _____

BREEDING BULLS:

What use(s) apply to your bull for the last 12 months:

How many heifers or cows were bred? _____

Did you sell any semen? _____

Any additional information (use reverse side of page if needed): _____

