



ANDREINI & COMPANY
Insurance / Risk Management / Employee Benefits

April 30, 2008

File: Lanas
Byron Bank
ALACo.
FISH & GAME
MAY 01 2008
YOUNTVILLE

Department of Fish & Game
C/O Scott Wilson
PO Box 47
Yountville, CA 94599

Re: Insured: Joan Jess
California Insurance Group, Policy #1FLP11030767
Policy Type: Agriculture Package
Policy Period: 05/01/08 to 05/01/09

To Whom It May Concern:

Enclosed please find your copy of the policy written for our insured named above for which you are named Additional Insured.

Please keep this for your records.

Please contact our office with any questions or if we can be of further assistance.

Respectfully,

Becky Perez, CISR
Account Manager
Phone: 209-474-7932

Enclosure

FARM LIABILITY POLICY DECLARATION
California Capital Insurance Company

**ADDITIONAL INSURED -
DESIGNATED PREMISES ONLY COPY**

**Name & Address of Additional Insured -
Designated Premises Only**

Department of Fish & Game
c/o Scott Wilson
P O Box 47
Yountville, CA 94599

Name and Address of Insured

Jess, Donald & Joan
P.O. Box 340
Byron, CA 94514

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2008

Policy Period: From 05/01/2008 To 05/01/2009 12:01 a.m. standard time.

This is Declaration #: 14 and when attached to the applicable forms, it completes the policy.

Transaction Reason: Extension

Form of Business: Individual

In return for payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

Policy Renewal Summary	
Total Premium For All Locations	\$5,120.00
Terrorism Risk Insurance Act of 2002	No charge
Total	\$5,120.00

Property Flat Deductible \$250 any one occurrence.

Policy Forms:

00-015 05-05	08-132 06-03	13-464 07-07	IL0017 11-85	08-041 01-06
IL0021 11-85	IL0270 03-00	02-094 07-07	FP1060 01-98	FP0461 01-98
FP0013 01-98	FP0090 01-98	FP0456 01-98	FP0304 01-98	FP0423 01-98
FL0020 01-98	13-054 09-01	FL0488 01-87	13-075 01-03	13-073 04-02
03-416 03-07	03-424 02-04	FL1070 11-02	FL1076 11-02	13-056 09-01
FL0116 09-94	13-074 04-02	IL0952 11-02		

Servicing Agency: 10350 Andreini & Company, 220 West 20th Ave, San Mateo, CA 94403
(650) 573-1111

Authorized Signature: _____

R. Perez

March 24, 2008

TO REPORT A CLAIM, CONTACT THE CLAIM SERVICE CENTER: (800) 986-9974

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2008

Policy – Optional Coverages

Farm-Pak Coverage

Insured Locations:

No.	Acres	Location
1	5	3100 Mountain House Road, Tracy, CA 95376
2	150	5500 Burns Road, Byron, CA 94514
3	134	South Bay Aqueduct Par 4, 5 & 6 Alameda, CA 94501
4	132	Corner of Delta Road & Byron Highway Knightsen, CA 94548
5	222	Parcels 6, 8, 9, 10, 11, 12, 13 & 136 Knightsen, CA 94548
6	503	Corner of Kelso & Bruns Alameda, CA 94501
7	115	South Bay Aqueduct Par 4, 6, 9 & 14 Alameda, CA 94501
8	177	Kelso Road, Alameda, CA 94501
9	105	3250 Mountain House Road, Tracy, CA 95376
10	69	Christensen Road NW Tracy, CA 95376
11	215	Bryon Hot Springs Road, Byron, CA 94514
12	637	Dyer Road, Livermore, CA 94550

Named Insured: Jess, Donald & Joan

FARM LIABILITY POLICY DECLARATION

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2008

Location # 10: Christensen Road NW Tracy, CA 95376

Location 10 Forms:

FL0450 06-90

Location 10 - Additional Interests:

Additional Insured - FL0450
Designated Premises
Only:

Department of Fish & Game, c/o Scott Wilson, P O Box 47, Yountville, CA
94599

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

FARM LIABILITY POLICY DECLARATION
Effective Date: 05/01/2008

Coverage E – Farm Personal Property:

<u>Coverage:</u>	<u>Loss Settlement</u>	<u>Cause of Loss</u>	<u>Limit of Insurance:</u>
Misc. tools, equip & supplies, limited to \$2,000 per item	Actual Cash Value	Special	\$15,000
Hay in the Open	Actual Cash Value	Basic	\$20,000
Hay in a Structure	Actual Cash Value	Basic	\$10,000
Borrowed & Rented Equipment	Actual Cash Value	Special	\$100,000
Animal Collision 150 Head	Actual Cash Value	Collision	\$1,000

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2008

Scheduled Personal Property

<u>Item</u>	<u>Form</u>	<u>Deductible</u>	<u>Limit of Insurance:</u>
14K W/G Matching Band w/ Two Baguettes	FP0461 01-98	\$0.00	\$600
14K W/G Engagement Ring w/ 1ct Diamond	FP0461 01-98	\$0.00	\$5,900

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2008

Policy Coverage

	<u>Limit</u>
Coverage H & I – Liability per Occurrence	\$1,000,000
Coverage H & I – General Aggregate	\$2,000,000
Coverage H – Fire Legal Liability	\$100,000
Coverage J – Medical Expenses per Person	\$5,000

Additional Liability Coverages and Endorsements:

<u>Form</u>	<u>Description</u>	<u>Limit</u>
13-056	Limited Pollution Liability Extension Endorsement	\$25,000
13-054	Chemical Drift Liability	\$25,000
13-486	Farm Identity Fraud Expense	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – FARM LIABILITY

This endorsement modifies insurance provided under the following:

FARM LIABILITY COVERAGE FORM

SCHEDULE *		
1. a.	Person or organization from whom you lease land:	
	b.	Description and location of land (specify part leased to you):
2. a.	Person or organization who is lessor or real estate manager of premises leased to you:	
	b.	Description and location of premises (specify part leased to you):
3. a.	Independently contracting operator-manager of a farm owned by or leased to you:	
	b.	Description and location of farm (as shown on Declarations unless acquired during policy period):
4. a.	Person or organization from whom you lease equipment:	
	b.	Location of leased equipment:
	c.	Description of leased equipment:
5. a.	Vendor who sells or distributes "your products" to other third parties:	
	b.	Description of "your products" sold or consigned to vendor:
6. a.	Non-resident co-owner of a residence away from the farm premises:	
	b.	Description and location of the residence:
7.	Person(s) or organization(s) that exercises financial control over you:	
* Information required to complete this Schedule, if not shown on this endorsement, will be shown in the Declarations.		

The insurance described by any of the following items, **A.** through **E.**, does not apply unless the required entries have been made in the applicable item(s) of the Schedule.

- A.** The definition of "insured" is amended to include the person(s) or organization(s) named in item(s) **1.a.**, **2.a.** and **3.a.** of the Schedule, but only with respect to liability arising out of the ownership, maintenance or use of land and premises owned by or leased to you and designated in the Schedule respectively as items **1.b.**, **2.b.** and **3.b.**

The insurance provided under this endorsement does not apply to:

1. Any "occurrence" that takes place after the expiration of the lease of land or premises described in item **1.b.** or **3.b.** of the Schedule;
2. Any "occurrence" that takes place after you cease to be a tenant on the premises described in item **2.b.** of the Schedule;
3. Structural alterations, new construction or demolition operations performed by or on behalf of any person or organization described in item **1.a.** or **2.a.** of the Schedule; or
4. "Bodily injury" to any "residence employee" of any person or organization named in the Schedule when the "bodily injury" arises out of or in the course of the employee's employment by the person or organization.

B. The definition of "insured" is amended to include the person or organization named in item **4.a.** of the Schedule, but only with respect to liability arising out of the maintenance, operation or use by you of equipment:

1. Leased to you by that person or organization;
2. Located on the premises designated in item **4.b.** of the Schedule; and
3. Described in item **4.c.** of the Schedule.

The insurance provided under this endorsement does not apply to:

- a. Any "occurrence" that takes place after the equipment lease expires; or
- b. "Bodily injury" or "property damage" arising out of the sole negligence of the person or organization named in item **4.a.** of the Schedule.

C. The definition of "insured" is amended to include the person or organization named in item **5.a.** of the Schedule (referred to below as vendor), but only with respect to "bodily injury" or "property damage" arising out of "your products" that are:

1. Distributed or sold in the regular course of the vendor's business; and
2. Described in item **5.b.** of the Schedule.

The insurance provided under this endorsement does not apply to:

- a. Any express warranty unauthorized by you;
- b. Any physical or chemical change in the product made intentionally by the vendor;
- c. Repackaging, unless unpacked solely for the purpose of inspection, demonstration or testing, and then repackaged in the original container;
- d. Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products; or
- e. Products that, after distribution or sale by you, have been labeled or relabeled or used by or for the vendor as a container, part or ingredient of any other thing or substance.

The insurance provided under this endorsement does not apply to any person or organization that is an "insured" and from whom you have acquired products described in item **5.b.** of the Schedule or to any ingredient, part of container entering into, accompanying or containing them.

D. The definition of "insured" is amended to include the person or organization named in item **6.a.** of the Schedule, but only with respect to liability arising out of the ownership, maintenance or use of the premises designated in item **6.b.** of the Schedule.

The insurance provided under this endorsement does not apply to "bodily injury" to any "residence employee" of any person or organization named in the Schedule when the "bodily injury" arises out of or in the course of the employee's employment by the person or organization.

E. The definition of "insured" is amended to include the person(s) or organization(s) named in item **7.** of the Schedule, but only with respect to their liability arising out of:

1. Their financial control of you; or
2. Premises they own, maintain or control while you lease or occupy those premises.

The insurance provided under this endorsement does not apply to structural alterations, new construction or demolition operations performed by or on behalf of any person or organization named in item **7.** of the Schedule.



ANDREINI & COMPANY
Insurance / Risk Management / Employee Benefits

Lands File
Byron Bank

April 19, 2007

Fish & Game

APR 20 2007

Yountville

Department of Fish & Game
C/O Scott Wilson
PO Box 47
Yountville, CA 94599

Re: Insured: Joan Jess
California Insurance Group, Policy #1FLP11030767
Policy Type: Agriculture Package
Policy Period: 05/01/07 to 05/01/08

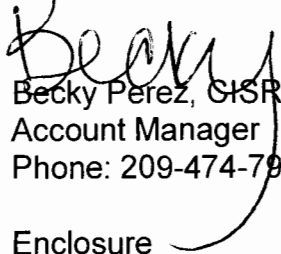
To Whom It May Concern:

Enclosed please find your copy of the policy written for our insured named above for which you are named Additional Insured.

Please keep this for your records.

Please contact our office with any questions or if we can be of further assistance.

Respectfully,


Becky Perez, CISR
Account Manager
Phone: 209-474-7932

Enclosure

FARM LIABILITY POLICY DECLARATION
California Capital Insurance Company

**ADDITIONAL INSURED -
DESIGNATED PREMISES ONLY COPY**

**Name & Address of Additional Insured -
Designated Premises Only**
Department of Fish & Game
c/o Scott Wilson
P O Box 47
Yountville, CA 94599

Name and Address of Insured
Jess, Donald & Joan
3100 Mountain House Road
Tracy, CA 95376

Policy #: 1-FLP-1-1030767 Declaration Type: Policy Renewal Effective Date: 05/01/2007

Policy Period: From 05/01/2007 To 05/01/2008 12:01 a.m. standard time.

This is Declaration #: 11 and when attached to the applicable forms, it completes the policy.

Transaction Reason: Extension

Form of Business: Individual

In return for payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

Policy Renewal Summary	
Total Premium For All Locations	\$5,055.00
Terrorism Risk Insurance Act of 2002	No charge
Total	\$5,055.00

Property Flat Deductible \$250 any one occurrence.

Policy Forms:

00-015 05-05	08-132 06-03	IL0017 11-85	08-041 01-06	IL0021 11-85
IL0270 03-00	02-094 09-01	FP1060 01-98	FP0461 01-98	FP0013 01-98
FP0090 01-98	FP0456 01-98	FP0304 01-98	FP0423 01-98	FL0020 01-98
13-054 09-01	FL0488 01-87	13-075 01-03	13-073 04-02	03-416 03-06
03-424 02-04	FL1070 11-02	FL1076 11-02	13-056 09-01	FL0116 09-94
13-074 04-02	IL0952 11-02			

Servicing Agency: 10350 Andreini & Company, 220 West 20th Ave, San Mateo, CA 94403
(650) 573-1111

Authorized Signature: _____

March 26, 2007

TO REPORT A CLAIM, CONTACT THE CLAIM SERVICE CENTER: (800) 986-9974

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

FARM LIABILITY POLICY DECLARATION
Effective Date: 05/01/2007

Policy – Optional Coverages

Farm-Pak Coverage

Insured Locations:

No.	Acres	Location
1	5	3100 Mountain House Road, Tracy, CA 95376
2	150	5500 Burns Road, Byron, CA 94514
3	134	South Bay Aqueduct Par 4, 5 & 6 Alameda, CA 94501
4	132	Corner of Delta Road & Byron Highway Knightsen, CA 94548
5	222	Parcels 6, 8, 9, 10, 11, 12, 13 & 136 Knightsen, CA 94548
6	503	Corner of Kelso & Bruns Alameda, CA 94501
7	115	South Bay Aqueduct Par 4, 6, 9 & 14 Alameda, CA 94501
8	177	Kelso Road, Alameda, CA 94501
9	105	3250 Mountain House Road, Tracy, CA 95376
10	69	Christensen Road N/W Tracy, CA 95376
11	215	Bryon Hot Springs Road, Byron, CA 94514
12	637	Dyer Road, Livermore, CA 94550

Named Insured: Jess, Donald & Joan

FARM LIABILITY POLICY DECLARATION

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2007

Location # 10: Christensen Road NW Tracy, CA 95376

Location 10 Forms:

FL0450 06-90

Location 10 - Additional Interests:

Additional Insured - FL0450
Designated Premises
Only:

Department of Fish & Game, c/o Scott Wilson, P O Box 47, Yountville, CA
94599

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2007

Coverage E – Farm Personal Property:

<u>Coverage:</u>	<u>Loss Settlement</u>	<u>Cause of Loss</u>	<u>Limit of Insurance:</u>
Misc. tools, equip & supplies, limited to \$2,000 per item	Actual Cash Value	Special	\$15,000
Hay in the Open	Actual Cash Value	Basic	\$20,000
Hay in a Structure	Actual Cash Value	Basic	\$10,000
Borrowed & Rented Equipment	Actual Cash Value	Special	\$100,000
Animal Collision 150 Head	Actual Cash Value	Collision	\$1,000

Named Insured: Jess, Donald & Joan

FARM LIABILITY POLICY DECLARATION

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2007

Scheduled Personal Property

<u>Item</u>	<u>Form</u>	<u>Deductible</u>	<u>Limit of Insurance:</u>
14K W/G Matching Band w/ Two Baguettes	FP0461 01-98	\$0.00	\$600
14K W/G Engagement Ring w/ 1ct Diamond	FP0461 01-98	\$0.00	\$5,900

Named Insured: Jess, Donald & Joan

FARM LIABILITY POLICY DECLARATION

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2007

Policy Coverage

	<u>Limit</u>
Coverage H & I – Liability per Occurrence	\$1,000,000
Coverage H & I – General Aggregate	\$2,000,000
Coverage H – Fire Legal Liability	\$100,000
Coverage J – Medical Expenses per Person	\$5,000

Additional Liability Coverages and Endorsements:

<u>Form</u>	<u>Description</u>	<u>Limit</u>
13-056	Limited Pollution Liability Extension Endorsement	\$25,000
13-054	Chemical Drift Liability	\$25,000

FARM LIABILITY POLICY DECLARATION
California Capital Insurance Company

FILED
MAY 07 2004
YOUNTVILLE

ADDITIONAL INSURED -
DESIGNATED PREMISES ONLY COPY

Name & Address of Additional Insured -
Designated Premises Only

Department of Fish & Game
c/o Scott Wilson
P O Box 47
Yountville, CA 94599

Name and Address of Insured

Jess, Donald & Joan
3100 Mountain House Road
Tracy, CA 95376

Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

Effective Date: 05/01/2004

Policy Period: From 05/01/2004 To 05/01/2005 12:01 a.m. standard time.

This is Declaration #: 8 and when attached to the applicable forms, it completes the policy.

Transaction Reason: Extension

Form of Business: Individual

In return for payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

Policy Renewal Summary	
Total Premium For All Locations	\$4,817.00
Terrorism Risk Insurance Act of 2002	No charge
Total	\$4,817.00

Property Flat Deductible \$250 any one occurrence.

Policy Forms:

00-015	08-132 06-03	IL0017 11-85	IL0021 11-85	IL0270 03-00
02-094 09-01	FP1060 01-98	FP0461 01-98	FP0013 01-98	FP0090 01-98
FP0456 01-98	FP0304 01-98	FP0423 01-98	FL0020 01-98	13-054 09-01
FL0488 01-87	13-075 01-03	13-073 04-02	FL1070 11-02	FL1076 11-02
13-056 09-01	FL0116 09-94	13-074 04-02	IL0952 11-02	

Servicing Agency: 10350 Andreini & Company, 220 W Twentieth Ave, San Mateo, CA 94403
(800) 969-2522

Authorized Signature: _____



March 26, 2004

TO REPORT A CLAIM, CONTACT THE CLAIM SERVICE CENTER: (800) 986-9974

Policy – Optional Coverages

Farm-Pak Coverage

Insured Locations:

No.	Acres	Location
1	5	3100 Mountain House Road, Tracy, CA 95376
2	150	5500 Burns Road, Byron, CA 94514
3	134	South Bay Aqueduct Par 4, 5 & 6 Alameda, CA 94501
4	132	Corner of Delta Road & Byron Highway Knightsen, CA 94548
5	222	Parcels 6, 8, 9, 10, 11, 12, 13 & 136 Knightsen, CA 94548
6	503	Corner of Kelso & Bruns Alameda, CA 94501
7	115	South Bay Aqueduct Par 4, 6, 9 & 14 Alameda, CA 94501
8	177	Kelso Road, Alameda, CA 94501
9	105	3250 Mountain House Road, Tracy, CA 95376
10	69	Christensen Road N/W Tracy, CA 95376
11	215	Bryon Hot Springs Road, Byron, CA 94514
12	637	Dyer Road, Livermore, CA 94550

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2004

Location # 10: Christensen Road NW Tracy, CA 95376

Location 10 Forms:
FL0450 06-90

Location 10 - Additional Interests:

Additional Insured -
Designated Premises
Only:

FL0450

Department of Fish & Game, c/o Scott Wilson, P O Box 47, Yountville, CA
94599

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

Declaration Type: Policy Renewal

FARM LIABILITY POLICY DECLARATION
Effective Date: 05/01/2004

Coverage E – Farm Personal Property:

<u>Coverage:</u>	<u>Replacement Cost</u>	<u>Cause of Loss</u>	<u>Limit of Insurance:</u>
Misc. tools, equip & supplies, limited to \$2,000 per item	Actual Cash Value	Special	\$15,000
Hay in the Open	Actual Cash Value	Basic	\$20,000
Hay in a Structure	Actual Cash Value	Basic	\$10,000
Borrowed & Rented Equipment	Actual Cash Value	Special	\$100,000
Animal Collision 150 Head	Actual Cash Value	Collision	\$1,000

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2004

Scheduled Personal Property

<u>Item</u>	<u>Form</u>	<u>Deductible</u>	<u>Limit of Insurance:</u>
14K W/G Engagement Ring w/ 1ct Diamond	FP0461 01-98	\$0.00	\$5,900
14K W/G Matching Band w/ Two Baguettes	FP0461 01-98	\$0.00	\$600

Named Insured: Jess, Donald & Joan
Policy #: 1-FLP-1-1030767

FARM LIABILITY POLICY DECLARATION
Declaration Type: Policy Renewal

Effective Date: 05/01/2004

Policy Coverage

	<u>Limit</u>
Coverage H & I – Liability per Occurrence	\$1,000,000
Coverage H & I – General Aggregate	\$2,000,000
Coverage H – Fire Legal Liability	\$100,000
Coverage J – Medical Expenses per Person	\$5,000

Additional Liability Coverages and Endorsements:

<u>Form</u>	<u>Description</u>	<u>Limit</u>
13-056	Limited Pollution Liability Extension Endorsement	\$25,000
13-054	Chemical Drift Liability	\$25,000

California Capital Insurance Company
P.O. Box 2093
Monterey CA 93942

1802-1999-025-02
Policy Type: Farm
Policy Number: 1-FLP-1-1030767
Policy Period: 5/01/2003
Through: 5/01/2004
Mailing Date: 2/23/2004

SH & G 4111

FEB 25 2004

YOUNTVILLE

ADDITIONAL INSURED COPY

INSURED:
Jess, Donald & Joan

Department of Fish & Game
c/o Scott Wilson
P.O. Box 47
Yountville CA 94599

PROPERTY LOCATION
3100 Mountain House Road
Tracy CA 95376

And all property locations and coverages insured by this policy.

NOTICE OF CANCELLATION

Our records indicate that we have received a bank returned check on Policy Number 1-FLP-1-1030767. If we do not receive the total balance due as indicated below by 03/06/2004, Policy Number 1-FLP-1-1030767, together with any mortgagee or loss payable clause, must be canceled in accordance with the conditions of the policy.

CANCELLATION DATE: 03/06/2004 12:01 A.M. STANDARD TIME.

The cancellation of the policy and the mortgagee or loss payee clause, if any, shall be effective on and after the cancellation date and time above. Either a refund due the insured, or a billing notice for premiums due the company, will be sent as soon as possible after the date of the cancellation.

Upon the named insured's written request, the company shall furnish the facts on which the cancellation is based.

COPIES TO: COMPANY, INSURED, AGENT

***** Notice: a \$20.00 fee is charged for this bank returned check *****

Requested by: Company

Reason: Bank Returned Check.

If you have any questions regarding this notice, please contact your agent.

Please attach here and return lower stub with remittance

Please write your Policy Number on your check.

1-FLP-1-1030767
Jess, Donald & Joan

Amount Paid _____ Check Number _____

Please remit to:

Unpaid Premium \$184.00
Unpaid Payments Due \$184.00

California Capital Insurance Company
P.O. Box 2093
Monterey CA 93942

Bank Returned
Check Amount \$184.00

Returned Check Fee \$20.00
Total Balance Due \$204.00

Premium Accounting

Date: 02/20/2004 Effective: 03/06/2004

Policy Type: Farm

Agent: 10350