	Exhibit Number:	Inventory Value Claim			Reinsurance Year Version Release Date	Draft	
Insurance Plan Code		50 Dollar Amount of Insurance					
Commodity Code		0073 Nursery	1		1010 Nursery (NVS)	-	1020 Controlled Enviroment (CE)
	Calculations	<u>Field</u> <u>Name</u>	<u>Record</u> Number	<u>Field</u> Number	<u>Field</u> Format	<u>Field</u> <u>Rounding</u>	Rules
Section 1: Loss Guarantee							
When Commodity Code is '	'0073" and Coverage Type Code EQUAL "A" and Unit Divis	ion Code equal "T":	1			1	
		Unadjusted Loss Amount	Internal		\$9999999999	None	Unadjusted Loss Amount will be by each individual record.
Unadjusted Loss Amount = Field Market Value A - Field Market Value B		Field Market Value A	P22	24	999999999	None	Field Market Value A will be by each individual record. For Liners (Type Code '071'), Field Market Value A will have the Survival Percent applied.
			P22	25	999999999	None	Field Market Value B will be by each individual record.
- Adjusted Loss Amount -	When Over Under Reporting Factor Code EQUAL "U": Unadjusted Loss Amount * Over Under Reporting Factor	Adjusted Loss Amount	P22	50	\$9999999999	Round to whole number	Adjusted Loss Amount will be by each individual record.
	When Over Under Reporting Factor Code EQUAL "O": Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Over Under Reporting Factor must be the same for all records within the same Practic Code, Claim Number and Inventory Inspection Number.
	Else: = Unadjusted Loss Amount						
When Commodity Code is '	"0073" and Coverage Type Code is EQUAL "C", or "A' with	Unit Division Code equal "S":		1			
		Unadjusted Loss Amount	Internal		\$9999999999	None	Unadjusted Loss Amount will be by each individual record.
Unadjusted Loss Amount	= Field Market Value A - (Field Market Value B	Field Market Value A	P22	24	999999999	None	Field Market Value A will be by each individual record. For Liners (Type Code '071'), Field Market Value A will have the Survival Percent applied.
		Field Market Value B	P22	25	999999999	None	Field Market Value B will be by each individual record.

Exhibit Name: Indemnity Calculation Exhibit Number: P22-2, Plan 50 Record Name: Inventory Value Claim

Record Code: P22

Reinsurance Year: 2024

Version: Draft Release Date: 6/13/2024

Insurance Plan Code		50 Dollar Amount of Insurance					
<u>Commodity Code</u>		0073 Nursery		-	1010 Nursery (NVS)		1020 Controlled Enviroment (CE)
	Calculations	<u>Field</u> Name	<u>Record</u> Number	<u>Field</u> Number	<u>Field</u> Format	<u>Field</u> Rounding	Rules
	When Over Under Reporting Factor Code EQUAL "U":						
		Unadjusted Loss Amount (summed)	Internal		S999999999	None	Summed for Unit.
Adjusted Loss Amount	When Over Under Reporting Factor Code EQUAL "O":	Adjusted Loss Amount	P22	50 51	\$999999999	Round to whole number	Adjusted Loss Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".
	Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Over Under Reporting Factor must be the same for all records within the same Pract Code, Claim Number and Inventory Inspection Number.
	ELSE: Unadjusted Loss Amount						
hen Commodity Code is "	1010" and Coverage Type Code EQUAL "A" and Unit Divis	ion Code equal "T":					
		Unadjusted Loss Amount	Internal		\$9999999999	None	Unadjusted Loss Amount will be by each individual record.
		Pre-Loss Actual Unit Value	P22	41	999999999	None	
Inadjusted Loss Amount =	(ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit = Value, 4)) * Pre-Loss Actual Unit Value	Post-Loss Damage Value	P22	42	999999999	None	
	OR	Selected Value Amount	P13	49	999999999	None	
	(ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Value, 4)) * (Selected Value Amount - Previous Loss Occurrence Amount)	Previous Loss Occurrence Amount	P22	43	\$99999999999	None	

Exhibit Name: Indemnity Calculation Exhibit Number: P22-2, Plan 50 Reinsurance Year: 2024 Record Name: Inventory Value Claim Version: Draft Release Date: 6/13/2024 Record Code: P22 Insurance Plan Code 50 Dollar Amount of Insurance 1010 Nursery (NVS) Commodity Code 1020 Controlled Enviroment (CE) 0073 Nursery Field Record Field Field Field **Calculations** Number Name Number Format Rounding **Rules** When Commodity Code is "1010" and Coverage Type Code EQUAL "C" or "A", and Unit Division Code equal "S": Unadjusted Loss Amount will be the same for all records within the same Practice Unadjusted Loss Amount Code, Claim Number, Inventory Inspection The lesser of: Internal \$999999999 None (summed) Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S". (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Unadjusted Loss Amount = P22 Pre-Loss Actual Unit Value 41 999999999 None Value, 4)) * Pre-Loss Actual Unit Value P22 42 Post-Loss Damage Value 999999999 None OR Sum of all P13 Selected Value Amount for P13 49 999999999 Selected Value Amount None the unit (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit \$99999999999 Value, 4)) * (Selected Value Amount - Previous Loss Previous Loss Occurrence Amount P22 43 None Occurrence Amount) When Commodity Code is "1020" and Coverage Type Code EQUAL "A" and Unit Division Code equal "T": Unadjusted Loss Amount will be by each \$999999999 The lesser of: Unadjusted Loss Amount Internal None ndividual record (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Pre-Loss Actual Unit Value P22 999999999 41 None Unadjusted Loss Amount = Value, 4)) * Pre-Loss Actual Unit Value P22 42 None OR Post-Loss Damage Value 999999999 (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit P13 49 999999999 Selected Value Amount None Value, 4)) * Selected Value Amount When Commodity Code is "1020" and Coverage Type Code EQUAL "C" and Unit Division Code equal "S": Unadjusted Loss Amount will be the same for all records within the same Practice Unadjusted Loss Amount Code, Claim Number, Inventory Inspection The lesser of: Internal \$999999999 None (summed) Number, and Basic Unit Number when Coverage Type Code equals "C" with Unit Unadjusted Loss Amount = Division Code equal "S". (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Pre-Loss Actual Unit Value 999999999 P22 41 None Value, 4)) * Pre-Loss Actual Unit Value OR Post-Loss Damage Value P22 42 999999999 None (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Sum of all P13 Selected Value Amount for Selected Value Amount P13 49 999999999 None Value, 4)) * Selected Value Amount the unit.

Exhibit Number:	Inventory Value Claim	Reinsurance Year: 2024 Version: Draft Release Date: 6/13/2024 Intervention 1010 Nursery (NVS) 1010 Nursery (NVS) 1020 Controlled Enviroment (CE) Record Field Number Format Rounding Rules					
Section 2: Indemnity Calculation							
When Commodity Code is "0073":	Unadjusted Indemnity Amount	P22	51 52	\$9999999999	Round to whole number	Unadjusted Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
Unadjusted Indemnity Amount = Adjusted Loss Amount - Occurrence Deductible Amount	Occurrence Deductible Amount	P22	28	999999999	None	Occurrence Deductible Amount for under reporting must equal lesser of: Field Market Value A * (1.000 - Coverage Level Percent) * Under Reporting Factor 'OR' Effective Crop Year Deductible. Occurrence Deductible Amount for over reporting must equal lesser of: Field Market Value A * (1.000 - Coverage Level Percent) * Over Reporting Factor + 1.000 'OR' Effective Crop Year Deductible. Otherwise Occurence Deductible Amount will be the lesser of the Effective Crop Year Deductible or Adjusted Loss. Occurrence Deductible Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	

Exhibit Numbe	e: Indemnity Calculation er: P22-2, Plan 50 e: Inventory Value Claim e: P22 50 Dollar Amount of Insurance 0073 Nursery Field	Reinsurance Year: 2024 Version: Draft Release Date: 6/13/2024 Intervention 1010 Nursery (NVS) 1020 Controlled Enviroment (CE) Record Field Field Field					
<u>Calculations</u>	Name	Number	Number	Format	Rounding	Rules	
When Commodity Code is "1010":							
	Unadjusted Indemnity Amount	P22	51 52	\$9999999999	Round to whole number	Unadjusted Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
Unadjusted Indemnity _ Unadjusted Loss Amount - Occurrence Deductible Amount ⁼ Amount	Occurrence Deductible Amount	P22	28	999999999	None	Occurrence Deductible Amount must equal lesser of: Pre-Loss Actual Unit Value * (1.000 - Coverage Level Percent) 'OR' Commodity Year Deductible Amount minus the sum of previous occurrence deductible amounts. Commodity Year Deductible Amount must be less than or equal to the Commodity Year Deductible Amount on the P13 record. Occurrence Deductible Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
When Commodity Code is "1020":					1		
Unadjusted Indemnity Amount = Unadjusted Loss Amount	Unadjusted Indemnity Amount	P22	52	\$9999999999	Round to whole number	Unadjusted Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" with Unit Division Code equal "S".	

	Exhibit Number:	Inventory Value Claim Version: Draft						
	Record Code.	FZZ			Release Date.	0/13/2024		
Insurance Plan Code		50 Dollar Amount of Insurance						
Commodity Code		0073 Nursery			1010 Nursery (NVS)		1020 Controlled Enviroment (CE)	
	Calculations	<u>Field</u> <u>Name</u>	<u>Record</u> Number	<u>Field</u> Number	<u>Field</u> Format	<u>Field</u> <u>Rounding</u>	Rules	
When Comodity Code is "00	73":							
Preliminary Indemnity		Preliminary Indemnity Amount	P22	52 53	\$99999999999	None	Preliminary Indemnity Amount will be the same for all records within the same Practic Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
Amount	XPS Effective Insurance Amount OR Unadjusted Indemnity Amount	XPS Effective Insurance Amount	P22	22	99999999999	None	XPS Effective Insurance Amount will be the same for all records within the same Practic Code, Claim Number, Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
When Comodity Code is "00	73":							
Indemnity Amount =	Droliminany Indomnity Amount * Incured Charo Decemt	Indemnity Amount	P22	47 48	\$99999999999	Round to whole number	Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, and Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
		Insured Share Percent	P22	29	9.9999	None		
		Price Election Percent	P14	35	9.9999	None		
When Comodity Code is " 10	110" or "1020": The lesser of:	Indemnity Amount	P22	47 48	\$999999999	Round to whole number	Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, and Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
Indemnity Amount =		Selected Value Amount	P13	49	999999999	None	Sum of all P13 Selected Value Amount for the unit when Unit Division Code equals "S"	
indemnity Amount =	- (Selected Value Amount * Insured Share Percent * Coverage Level Percent * Price Election Percent) -	Insured Share Percent	P22	29	9.9999	None		
	Previous Indemnity Amount	Coverage Level Percent	P14	34	9.9999	None		
	OR	Price Election Percent	P14	35	9.9999	None		
	Unadjusted Indemnity Amount * Insured Share Percent * Price Election Percent	Previous Indemnity Amount Page 6	P22 of 7	44	\$99999999999	None		

Insurance Plan Code Commodity Code	Exhibit Number:	Inventory Value Claim	Record	Field	Reinsurance Year: Version: Release Date: 1010 Nursery (NVS) Field	Draft	1020 Controlled Enviroment (CE)
	<u>Calculations</u>	Name	Number	Number	Format	Rounding	Rules
Rehabilitation Payment							
Section 3 Rehabilitation Pay							
When Comodity Code is "00	73" and Insurance Option Code List contains Rehabilitati	on Payment, "RH":					
	The lesser of:	Indemnity Amount	P22	47 48	\$99999999999	Round to whole number	
		Actual Rehab Amount	P22	39	99999999999		
=	Actual Rehab Amount * Over Under Reporting Factor	Over Under Reporting Factor	P22	23	9.999	None	
Indemnity Amount		Rehabilitation Plant Amount	P22	36	9999999999	None	
,	OR	Coverage Level Percent	P14	34	9.9999	None	
=	(Rehabilitation Plant Amount * .075) * Over Under Reporting Factor * Coverage Level Percent * Insured Share Percent	Insured Share Percent	P22	29	9.9999	None	
Section 4: Indemnity Calcula	tion 10" and Insurance Option Code List contains Occurrence						
	The lesser of:	Indemnity Amount	P22	47 48	\$999999999	Round to whole number	Indemnity Amount will be the same for all records within the same Practice Code, Claim Number, and Inventory Inspection Number, and Basic Unit Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".
		Selected Value Amount	P13	49	999999999	None	Sum of all P13 Selected Value Amount for the unit when Unit Division Code equals "S
		Insured Share Percent	P22	29	9.9999	None	
Indemnity Amount =	(Selected Value Amounty * Insured Share Percent * Coverage Level Percent * Price Election Percent) - Previous Indemnity Amount	Coverage Level Percent	P14	34	9.9999	None	
	OR	Price Election Percent	P14	35	9.9999	None	
	(Pre-Loss Actual Unit Value * (Insured Share Percent * (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Value, 4)) * Coverage Level Percent))	Previous Indemnity Amount	P22	44	\$99999999999	None	
		Pre-Loss Actual Unit Value	P22	41	999999999	None	
	OR	Post Loss Damage Value	P22	42	999999999	None	
	(Selected Value Amount - Previous Loss Occurrence Amount) * (Insured Share Percent * (ROUND(Post-Loss Damage Value / Pre-Loss Actual Unit Value, 4)) * Coverage Level Percent))	Previous Loss Occurrence Amount	P22	43	\$99999999999	None	