

AIP XX		FCIC LIVESTOCK DETAIL REPORT					LADR001
AIP NAME XX		REINSURANCE YEAR - YYYY					
C/O Mga Name							
ACCOUNTING CUTOFF: MM/DD/YYYY							
DATE CREATED : MM/DD/YYYY    HH.MM.SS							
STATE			COMMODITY		TOTAL		
ABBREVIATION	PIC CODE	POLICY NUMBER	YEAR	ENTITY NAME	PREMIUM	SUBSIDY	INDEMNITY
XX	XXX	XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
		XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
*TOTAL STATE XX					999,999,999	999,999,999	999,999,999
XX	XXX	XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
	XXX	XXXXXXXX	YYYY	XXXXX, XXXXXX	999,999	999,999	999,999
*TOTAL STATE XX					999,999,999	999,999,999	999,999,999
TOTAL					999,999,999	999,999,999	999,999,999