## NOTICE OF DEATH (LIVESTOCK)

NAME OF INSURED	:	
ADDRESS	:	
POLICY NUMBER	:	
LIVESTOCK INSURED	:	
CAUSE OF DEATH	:	
NUMBER OF HEADS	:	
DATE OF OCCURRENCE OF	F LOSS:	
SIGNATURE	:	
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NAME OF INSURED	·	
ADDRESS		
	:	
POLICY NUMBER	:	
LIVESTOCK INSURED	:	
CAUSE OF DEATH	:	
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