



ELIMINATION AGREEMENT

To whom it may concern:

It is hereby understood and agreed that I do not wish to have transit insurance coverage on shipments of livestock owned or transported by me on any or all equipment to **US 212 Beef Corporation, 53050 US Highway 212, Buffalo Lake, MN 55314** and I understand that I will not be eligible for coverage under the transit insurance program for a period of at least 12 months from the date signed below.

It is further understood and agreed that in the event of any loss on livestock owned or transported by me that there will be no claim paid whatsoever, and I hereby exempt The Hartford Financial Services Company or US 212 Beef Corporation from any claim or litigation.

Signature: _____ Date _____

Please Print: _____
(Name – any name used to market livestock)

(Address)
