GREAT AMERICAN INSURANCE COMPANY
Crop Insurance Division

PRECISION FARMING
ANNUAL CALIBRATION REPORT

Insured's Name:	Crop Year:	Policy Number:	Machine Brand & Model:	Yield Monitor Brand & Model:

FORM INSTRUCTIONS: In order to comply with crop insurance reporting requirements, this form may be used to document your yield monitor calibrations. Keep a copy of this sheet in each machine. Record each calibration performed throughout the crop year.
Note: Calibrations must be performed in accordance with your owner's manual.

A	B	C	D	E	F	G	H	I	J
Calibration Date/Time	Farm/Field Name/FSN	Crop Calibrated	Monitor Determined Weight	Scale Determined Weight	Difference (E - D)	% Difference (F ÷ E)	Scale Type Used	Moisture %	Distance Harvested (acres or feet)

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