

U.S. DEPARTMENT OF AGRICULTURE GRAIN INSPECTION, PACKERS AND STOCKYARDS ADMINISTRATION PACKERS AND STOCKYARDS PROGRAM	RIDER FOR GENERAL USE WITH BOND Required Under the Packers and Stockyards Act, 1921, as Amended and Supplemented
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Know all that (1) _____
 (Name of Current Principal)

of (2) _____, _____
 (City, State)

as Principal, and (3) _____
 (Name of Surety)

as Surety, issued bond number (4) _____, dated (5) _____,

in favor of (6) _____, _____
 (Name of Trustee)

as Trustee.

In consideration of the premium charged for the above-described bond, Principal and Surety agree to amend the bond as follows:

Complete the applicable clause(s) set out below:	
7. Increase in Bond	The bond identified above is increased FROM: \$ _____ TO: \$ _____
8. Decrease in Bond	The bond identified above is decreased FROM: \$ _____ TO: \$ _____
9. Change in Name of Principal	The name and address of the Principal, as given on the bond identified above, are changed FROM _____ (Name and Address) _____ TO _____ (Name and Address) _____
10. Change in Name of Trustee	The name and address of the Trustee, as given on the bond identified above, are changed FROM _____ (Name and Address) _____ TO _____ (Name and Address) _____
11. Add Clearing Services	The bond identified above is amended to add Condition 3, Clearing Services. <input type="checkbox"/> Yes <input type="checkbox"/> No
12. Delete Clearing Services	The bond identified above is amended to delete Condition 3, Clearing Services. <input type="checkbox"/> Yes <input type="checkbox"/> No

PROVIDED, however, that the identified bond above shall be subject to all its agreements, limitations, and conditions except as herein expressly modified, and further that this bond and all riders attached thereto, including this rider, shall not be cumulative, and when loss shall occur under this bond during a period of time within which the penalty of the bond shall vary, the aggregate liability of Surety shall in no event exceed the largest penalty of this bond in force during the period of time within which such loss shall occur under this bond.

15. This rider shall become effective as of the _____ day of _____, 20____.

16. Signed and dated this _____ day of _____, 20____.

17. (Name of Principal)	(Signing on Behalf of Principal)
18. (Name of Surety)	(Signing on Behalf of Surety)
19. (Name of Trustee)	(Signing on Behalf of Trustee)

20. Optional Additional Notes from Surety (for example special State requirements)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015. The time required to complete this collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.