

<b>REPORT OF PREMIUMS WRITTEN DURING</b>		FOR:		
(Year)			(Company or Group Name)	(NAIC #)
PREPARER'S NAME	TITLE	DATE	TELEPHONE NUMBER	
PREPARER'S EMAIL	PREPARER'S ADDRESS		FAX NUMBER	

ANNUAL STATEMENT - Direct Premiums Written - Page 14, column 1 ENTER ENTIRE AMOUNT - <u>TO NEAREST DOLLAR</u>							This <u>Total</u> must match <b>TOTAL</b> shown below
Fire (Line 1)	Allied Lines (Line 2.1)	Farmowners (Line 3)	Homeowners (Line 4)	Commercial Multi- Peril *Non - Liability (Line 5.1)	Earthquake (Line 12)	<u>Total</u> (Lines 1-5,12)	
\$	\$	\$	\$	\$	\$	\$	

\* Non - Liability is considered Property - Fire and Allied Lines

In the following area, please allocate the premiums shown in ANNUAL STATEMENT above.

DIRECT PREMIUMS WRITTEN	ENTER ENTIRE AMOUNT - <u>TO NEAREST DOLLAR</u>	
<u>LINES OF BUSINESS</u>	<i>Direct Premiums Written</i>	<i>Reserved for Bureau Use</i>
<b>Line 1 - Fire</b>		
DWELLING PROPERTY	\$	
FARM PROPERTY	\$	
COMMERCIAL PROPERTY	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
<b>Line 2.1 - Allied Lines</b>		
DWELLING PROPERTY	\$	
FARM PROPERTY	\$	
COMMERCIAL PROPERTY	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
<b>Line 3</b>		
FARMOWNERS	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
<b>Line 4</b>		
HOMEOWNERS	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
<b>Line 5.1 - Commercial Multi-Peril - Non Liability</b>	<i>(ENTER PROPERTY PREMIUMS ONLY)</i>	
COMMERCIAL PACKAGE (include Market Segments programs & Businessowner Policies)	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
<b>Line 12 - Earthquake</b>		
COMMERCIAL	\$	
PERSONAL	\$	
OTHER THAN WSRB MATERIALS USED (Identify):	\$	
Capital Assets Program (if any):	\$	
Agricultural Capital Assets Program (if any):	\$	
<b>TOTAL</b>	\$	This <b>TOTAL</b> must match <u>Total</u> shown in <b>ANNUAL</b> <b>STATEMENT</b> above.

**MEMBER COMPANIES INCLUDED IN THIS REPORT (entry required):**  
(If none, enter "xxxxx" as NAIC# and "N/A" as Member Company)

**NAIC#**   **Member Company**