

Illinois Department of Financial and Professional Regulation
Division of Insurance
Farm Mutual Semi-Annual Statement

June 30,

Insurance Company

(Company Name)

(Mailing Address)

(City, State & Zip Code)

Organized or Incorporated _____

Commenced Business _____

(Phone No.)

(Fax No.)

(Federal Employer's Identification No.)

E-mail Address: _____

Financial Statement as of June 30, _____

Officers

	Name	Address	Term Expires
President	_____	_____	_____
Vice Pres.	_____	_____	_____
Secretary	_____	_____	_____
Treasurer	_____	_____	_____

Directors

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____

June 30,

Insurance Company

1 Amount of total ledger assets, p. 5 col. 1, line 18, December 31 of previous year

Receipts of Ledger Assets

2 Premiums Received:

- a. Fire and other perils
- b. Wind

3 Gross survey, membership, and policy fees

--

4 Assumed reinsurance premiums received

--

5 Total premiums and fees (lines 2 through 4)

--

Deduct:

6 Proportional or pro rata reinsurance

- a. Fire and other perils
- b. Wind

7 Excess loss, catastrophe, and facultative reinsurance

- a. Fire and other perils
- b. Wind

8 Returned on cancellations

- a. Fire and other perils
- b. Wind

9 Total deductions (lines 6 through 8)

--

10 Net Premiums and fees (line 5 minus line 9)

--

11 Interest received on bonds (p. 9, col.9)

--

12 Interest received on bank deposits (p. 8, col.5)

--

13 Dividends received or reinvested (p.11, line 23)

--

14 Rents

--

15 Borrowed money

--

16 Cash received from sale or redemption of ledger assets

--

17 Cash received from sale of non-ledger assets

--

18 Commission on ceded reinsurance

--

19 Premiums collected on combination policies

--

20 Commissions on combination policies

--

21 Income taxes received (Sch. M, p. 16, line 1)

--

22 *Aggregate write-ins (itemize)

--

23 Total other receipts (lines 11 thru 22)

--

24 Total receipts (line 10 plus line 23)

--

25 Amount carried forward (line 1 plus line 24)

--

* List of write-ins on page 18

June 30,

Insurance Company

Disbursements of Ledger Assets

1	Amount brought forward (page 1, line 25)		<input type="text"/>
2	Gross losses paid to policyholders	<input type="text"/>	
3	Reinsurance losses paid (on assumed business)	<input type="text"/>	
4	Total losses paid (line 2 plus line 3)	<input type="text"/>	
5	Salvage and subrogation (p.14, col. 3)	<input type="text"/>	
6	Recovered from reinsurance (p 14, col. 4 plus p.15, col. 3)	<input type="text"/>	
7	Total loss reduction (line 5 plus line 6)	<input type="text"/>	
8	Net losses paid (line 4 less line 7)		<input type="text"/>
9	Adjusting expense (p. 15, col. 2)	<input type="text"/>	
10	Legal and auditing expense	<input type="text"/>	
11	Payments to agents including commissions and fees retained by agents	<input type="text"/>	
12	Salaries and expenses of directors, officers, and committees	<input type="text"/>	
13	Salaries of office employees	<input type="text"/>	
14	Premium on officers' bonds	<input type="text"/>	
15	General office expense including rent	<input type="text"/>	
16	Taxes and repairs on real estate	<input type="text"/>	
17	Insurance department licenses and fees	<input type="text"/>	
18	Payroll taxes	<input type="text"/>	
19	Advertising, printing, and stationery	<input type="text"/>	
20	Telegraph, telephone, express, and postage	<input type="text"/>	
21	National and state association dues	<input type="text"/>	
22	Fire department fees	<input type="text"/>	
23	Agents' balances charged off	<input type="text"/>	
24	Borrowed money repaid	<input type="text"/>	
25	Interest on borrowed money	<input type="text"/>	
26	Book value of ledger asset sold or redeemed	<input type="text"/>	
27	Purchase of non-ledger asset	<input type="text"/>	
28	Annual depreciation expense	<input type="text"/>	
29	Combination policy premiums remitted	<input type="text"/>	
30	Combination policy commissions paid	<input type="text"/>	
31	Combination policy returns and cancellations	<input type="text"/>	
32	Income taxes paid (Sch. M, p. 16, line 4)	<input type="text"/>	
33	*Aggregate write-ins (itemize)	<input type="text"/>	
34	Total other disbursements (lines 9 through 33)		<input type="text"/>
35	Total disbursements (line 8 plus line 34)		<input type="text"/>
36	Ledger assets (line 1 minus line 35) (p. 5, col.1, line 18)		<input type="text"/>

*List of write-ins on page 18.

June 30,

Insurance Company

Admitted Assets

	(1) Admitted Assets Current Year	(2) Admitted Assets Prior Year
1 Cash in company's office	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
2 Cash on deposit in checking account (p. 7, col. 4)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
3 Other cash deposits (p. 8, col.4)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
4 Bonds (at amortized cost) (p. 9, col. 6)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
5 Mutual funds (at market value) (p. 10, col. 6, line 8)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
6 Preferred stock (at market value) (p. 10, col. 6, line 16)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
7 Common stock (at market value) (p.10, col. 6, line 24)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
7a Total invested assets (line 1+2+3+4+5+6+7)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
8 Real Estate (net of accumulated depreciation and encumbrances)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
9 Agents' balances/uncollected premiums	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
10 Invested income due and accrued	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
11 Dividends declared but unpaid (p.10, col.11, line 25)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
12 Unpaid special assessments receivable	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
13 Reinsurance recoverable on paid losses and on paid loss adj. expense (p. 14, col. 5 plus p. 15, col. 4)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
14 Income tax refund due (Sch. M, p. 16, line 2)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
15 Reinsurance commission receivable	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
16 *Aggregate write-ins	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
17 Total Admitted Assets (total lines 7a through 16) (p. 5, col. 4, line 18)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

*List of write-ins on page 18.

June 30,

Insurance Company

Liabilities & Surplus

	(1) Current Year	(2) Prior Year
1 Net unpaid losses (p.12, line 1)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
2 Net unpaid loss adjustment expense (p.12, line 2)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
3 Unpaid salaries	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
4 Unpaid commissions	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
5 Balance due on borrowed money	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
6 Interest due on borrowed money	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
7 Net unearned premium reserve	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
8 Funds held but not yet remitted on combination policies	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
9 Reinsurance premium payable	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
10 Income taxes payable (Sch. M, p. 16, line 5)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
11 Payroll taxes owed by company	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Write-ins:		
12 <input style="width: 90%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
13 <input style="width: 90%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
14 *Aggregate write-ins	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
15 Total Liabilities	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
16 Surplus (assets less liabilities)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
17 Total (line 15 plus line 16) (p. 5, col.4, line 18)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
(should equal admitted assets)	=====	=====

*List of remaining write-ins on page 18.

June 30,

Insurance Company

Analysis of Assets

	(1) Ledger Assets	(2) Non-Ledger Assets (b)	(3) Assets not Admitted (c)	(4) Admitted Assets Col. 1+2-3
1 Cash in company's office	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 Cash deposited in checking account	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 Other cash deposits	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4 Bonds	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5 Mutual Funds	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6 Preferred Stock	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7 Common Stock	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8 Real Estate	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9 Agents' balance/ uncollected premiums (a)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10 Due and accrued investment income	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11 Dividends declared but unpaid	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12 Reinsurance recoverable on paid losses and on paid loss adj. expense	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13 Income tax refund due	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14 Reinsurance commission receivable	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15 Furniture and fixtures	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16 EDP equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17 Write-ins *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18 Totals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

P2, L36

P3,C1,L17

*List of write-ins on page 19.

NAMICO and NAMICO bank stock may be shown as either ledger or non-ledger, but must be non-admitted.

(a) Traditionally, companies have treated agents' balances as ledger (col.1) and uncollected premiums due from policyholders as non-ledger (col.2).

(b) Non-ledger assets should include excess of amortized over book value and the increase in market value of mutual funds, common stock and preferred stock over actual cost to company.

(c) Asset not admitted shall include excess of book value over amortized value of bonds and the excess of actual cost over market value of mutual funds, common stock and preferred stock.

Statement of Income

(1) (2)
Current year Prior Year

Underwriting Income

1 Net Premiums Earned (P. 13, Col. 8)

--	--

Deductions

2 Net Losses Incurred (P. 14, Col. 12)

--	--

3 Net Loss Adjustment Expense Incurred (P. 15, Col. 11)

--	--

4 Net Commission Expense (Sch. L on P. 16, L. 6)

--	--

5 Other Underwriting Expense Incurred (P. 17, L. 18, Col. 4)

--	--

6 Total Underwriting Deductions (Lines 2+3+4+5)

--	--

7 Net Underwriting Gain or (Loss) (Lines 1-6)

--	--

Investment Income

8 Net Investment Income Earned

--	--

9 Net Realized Capital Gains or (Losses)

--	--

10 Net Investment Gains or (Losses) (Lines 8+9)

--	--

Other Income

11 Rental Income

--	--

12 Commissions on Combination Policies (P. 1, L. 20)

--	--

13 Miscellaneous Income or (Losses) (a)

--	--

14 Total Other Income (Lines 11+12+13)

--	--

15 Net Income Before Income Taxes (Lines 7+10+14)

--	--

16 Income Taxes Incurred (Sch. M on P. 16, L. 7)

--	--

17 Net Income (Loss) (Lines 15-16)

--	--

(a) Miscellaneous Income and (Losses)

- Aggregate Write-ins from Page 1, Line 22
- + Aggregate Write-ins from Page 3, Line 16(CY)
- Aggregate Write-ins from Page 3, Line 16(PY)

Miscellaneous Income

P. 6, L. 13

Insurance Company

Cash in Banks or Savings and Loans

Name of institution and Location (list institution alphabetically)	(1) Interest Rate	(2) Account Balance 12/31/CY	(3) Checks Issued but not Cashed 12/31/CY	(4) Net Balance (Col. 2-3)	(5) Interest Received on Deposits during CY (a)	(6) Interest Accrued 12/31/CY (b)	(7) Interest Accrued 12/31/PY
Checking Accounts:							
Subtotal							

P3, L2

(a) Include both interest actually received and interest added to account balance during current year.

(b) Do not include interest already reflected in account balance of column 1.

Part I - Stocks and Mutual Funds Held at Year

(1) Name of Corporation	(2) Ticker Symbol	(3) Date Acquired	(4) Number of Shares	(5) Cost	(6) Market Value 12/31/CY	(7) Aggregate Unrealized Capital Gains (+) & Losses (-) (Col. 5 minus Col. 4)	(8) Prior Year Aggregate Unrealized Capital Gains (+) & Losses (-)	(9) Cash Dividends Received During CY	(10) Dividends Reinvested During CY	(11) Dividends Declared but Unpaid CY	(12) Dividends Declared but Unpaid PY
Mutual Funds											
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8. Total Mutual Funds (a)											
Preferred Stock											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
16. Total Preferred Stock (b)											
Common Stock											
17.											
18.											
19.											
20.											
21.											
22.											
23.											
24. Total Common Stock (b)											
25. Total Mutual Funds and Stocks (d)											

Sch. F, Col 4 Sch. F, Col 5

- (a) Page 3, Line 5 should equal the market value (col. 6) of Total Mutual Funds.
- (b) Page 3, Line 6 should equal the market value (col. 6) of Total Preferred Stock.
- (c) Page 3, Line 7 should equal the market value (col. 6) of Total Common Stock.
- (d) Add Line 8+Line 16+Line 24

Insurance Company
Stocks and Mutual Funds

June 30, Schedule C
(continued)

Part II - Stocks and Mutual Funds Sold During

(1) Name of Corporation	(2) Date Disposed	(3) Number of Shares	(4) Cost	(5) Market Value 12/31/PY	(6) Unrealized Capital Gains (+) & Losses (-) (Col. 5 minus Col. 4)	(7) Cash Dividends Received and Reinvested During CY
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8. Totals						

Part III - Stocks and Mutual Funds Purchased and Sold During

(1) Name of Corporation	(2) Date Acquired	(3) Date Disposed	(4) Cash Dividends Received & Reinvested During CY			
9.						
10.						
11.						
12.						
13.						
14.						
15. Totals						

16. Unrealized Capital Gain or Loss on Securities Currently Held (P.10, L.25, Col. 7 minus P.10, L.25, Col 8):			
17. Reversal of Previously Recognized Unrealized Capital Gain or Loss on Securities Sold During Current Year (P.11, L.8, Col. 6)			
18. Net Unrealized Capital Gain or Loss (P.11, L.16 minus P. 11, L 17):			
Total Dividends Received or Reinvested During Current Year			
19. P.10, L.25, Col. 9:			
20. +P.10, L.25, Col. 10:			
21. + P.11, L.8, Col. 7:			
22. + P.11, L.15, Col. 4:			
23. Total			

Insurance Company

Net Unpaid Losses & Adjusting Fees

1 Unpaid Losses

- a. Reported and adjusted
- b. Reported but not adjusted
- c. Incurred but not reported (at year end)
- d. Reinsurance recoverable on unpaid reported losses
- e. Reinsurance recoverable on incurred but not reported

--

--

Subtotal (a+b+c-d-e)

--

(Page 4, line 1)

2 Unpaid Adjusting Fees

- a. On reported and adjusted losses
- b. On reported but not adjusted losses
- c. On incurred by not reported losses (estimate)
- d. Reinsurance recoverable on unpaid adjusting fees

Subtotal (a+b+c-d)

--

(Page 4, line 2)

3 **Net unpaid losses & adjusting fees**

--

June 30,

Insurance Company

Net Premium Earned

(1) Line of Business	(2) Premiums Written (b)	(3) Reinsurance Ceded (c)	(4) Net Premiums Written Col. 2-3	(5) Net Unearned Premium PY	(6) Net Unearned Premium CY	(7) Policy Fees	(8) Net Premiums Earned Col. 4+5-6+7
Fire							
Other Peril(a)							
Wind							
Total							

P4, Col. 2, L7

P4, Col. 1, L7

P1, L3

P6, L1

(a) May be included with Fire

Advance premium should be included in Columns 2 and 6

(b)

Page 1, Line 2(a+b)

Uncollected Premium CY

+

Uncollected Premium PY

-

Returned on cancellations (Page 1, Line 8)

-

Assumed reinsurance premium (Page 1, Line 4)

+

Premiums written

Please complete footnotes (b) and (c).

(c)

Current year reinsurance

premium payable (Page 4, Col.1, Line 9)

Current year remittances:

a. Proportional (Page 1, Line 6)

+

b. Excess, Catastrophe & Facultative (Page 1, Line 7)

+

Prior year reinsurance premium payable (Page 4, Col. 2, Line 9)

-

Net Reinsurance Ceded

June 30,

_____ Insurance Company

Losses Incurred

(1) Line of Business	(2) Losses Paid	(3) Salvage & Subrogation Received	(4) Reinsurance Recovered	(5) Reinsurance Recoverable on Paid Losses CY	(6) Reinsurance Recoverable on Paid Losses PY	(7) Net Losses Paid Col. 2-3-4-5+6	(8) Unpaid Losses Current Year (Gross)	(9) Unpaid Losses Prior Year(Gross)	(10) Reinsurance Recoverable on Unpaid Losses CY	(11) Reinsurance Recoverable on Unpaid Losses PY	(12) Net Losses Incurred Col. 7+8-9-10+11
Fire	\$0										
Other Perils(a)	\$0										
Wind	\$0										
Total	\$0										
	P2, L2	P2, L5					(b)	(c)	(d)	(e)	P6, L2

- (a) May be included with fire.
- (b) Schedule G, Lines 1a+1b+1c from CY statement.
- (c) Schedule G, Lines 1a+1b+1c from PY statement.
- (d) Schedule G, Line 1d+1e from CY statement.
- (e) Schedule G, Line 1d+1e from PY statement.

June 30,

Insurance Company

Loss Adjustment Expense (LAE) Incurred

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Line of Business	LAE Paid (a)	Reinsurance Recovered	Reinsurance Recoverable on Paid LAE CY	Reinsurance Recoverable on Paid LAE PY	Net LAE Paid Col. 2-3-4+5	Unpaid LAE Current Year (Gross)	Unpaid LAE Prior Year (Gross)	Reinsurance Recoverable on Unpaid LAE CY	Reinsurance Recoverable on Unpaid LAE PY	Net LAE Incurred Col. 6+7-8-9+10
Fire										
Other Perils(a)										
Wind										
Total										
	P2, L9					(c)	(d)	(e)	(f)	P6, L3

- (a) LAE should include the loss adjuster's salary as well as the claims division's salaries.
- (b) May be combined with fire.
- (c) Schedule G, Lines 2a+2b+2c from CY statement.
- (d) Schedule G, Lines 2a+2b+2c from PY statement.
- (e) Schedule G, Line 2d from CY statement.
- (f) Schedule G, Line 2d from PY statement.

Net Commission Expense

Schedule L

Commissions incurred on:

- 1. Direct (a)
- 2. Reinsurance Assumed
- 3. Ceding reinsurance commission (b)
- 4. Contingent-net
- 5. Policy and membership fees

**Net commission expense
(1+2-3+4+5)**

P6, L4

- (a) Commissions paid (or retained by agent)
 - + Unpaid commissions (CY) (P4, L4, Col. 1)
 - Unpaid commissions, prior year (PY) (P4, L4, Col. 2)

- (b) Ceding commissions received (or retained by company)
 - + Ceding commissions receivable (CY) (P3, L15, Col.1)
 - Ceding commissions receivable (PY) (P3, L15, Col. 2)

Schedule M

Income Taxes Incurred

- 1. Income Tax Refund Received (P 1, L21)
- 2. Income Tax Refund Due (CY) (P3, L 14, Col. 1)
- 3. Income Tax Refund Due (PY) (P3, L 14, Col. 2)
- 4. Income Taxes Paid (P2, L32)
- 5. Income Taxes Payable (CY) (P4, L10, Col. 1)
- 6. Income Taxes Payable (PY) (P4, L10, Col. 2)

7. Income Taxes Incurred (1+2-3-4-5+6)

P6, L16

Other Underwriting Expenses

Expense	(1) Expense Paid (a)	(2) Unpaid Expense (CY) (b)	(3) Unpaid Expense (PY) (c)	(4) Expense Incurred Col. (1+2-3)
1 Legal and Auditing Expense				
2 Salaries and Expenses of Officers, Directors and Committees				
3 Salaries of Office Employees				
4 Premium on Officers' Bonds				
5 General Office Expense including Rent				
6 Taxes and Repairs on Real Estate				
7 Insurance Department Licenses and Fees				
8 Payroll Taxes				
9 Advertising, Printing, and Stationery				
10 Telegraph, Telephone, Express, and Postage				
11 National and State Association Dues				
12 Fire Department Fees				
13 Agents' Balances Charged Off				
14 Interest on Borrowed Money				
15 Purchase of Non-ledger Asset				
16 Annual Depreciation Expense				
17 * Aggregate Write-ins (itemize)				
18 Total Expenses				

P. 6, L. 5

(a) The amounts in this column come from Page 2, Lines 10 through 23, 25, 27, 28 and 32.

(b) The amounts in this column come from liabilities on Page 4 of current year's statement.

(c) The amounts in this column come from liabilities on Page 4 of the prior year's statement.

* List of write-ins on Page 19.

Write-in Page

Write-ins for **Receipt of Ledger Assets:**

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	Total (P1,L22)	_____

Write-ins for **Disbursements:**

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	Total (P2,L33)	_____

Write-ins for **Assets:**

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	Total (P3,L16)	_____

Write-ins for **Liabilities:**

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	Total (P4,L14)	_____

Write-in Page

Write-ins for **Analysis of Assets:**

	1	2	3	4
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. Total (P5,L17)	_____	_____	_____	_____

Write-ins for **Expenses:**

	1	2	3	4
1 _____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____
5 Total (P17, L17)	_____	_____	_____	_____

June 30,

State of Illinois

County of _____

_____ President, and _____

Secretary of the _____

Insurance Company, being duly sworn, each for himself deposes and says that they are the above described officers of the company, and that the foregoing Annual Statement, with the Schedules and explanations herein contained, annexed or referred to, are a full and correct Statement of all the Assets, Liabilities, Receipts, and Disbursements, and of the condition and affairs of said Company on the said day of , and for the period ended on that day, as the same were in fact and as the same are shown by the books of the Company, and that the foregoing declaration and answers are true, according to the best of their information, knowledge and belief, respectively.

_____, President

_____, Secretary

Suscribed in my presence and sworn to before me, by:

_____, as President

and _____, as Secretary

of the above named Insurance Company, this day of ,

WITNESS my hand and seal.

_____, Notary Public

_____, County, Illinois

Important Notice: Disclosure of this information is **required** under the Illinois Revised Statutes' insurance laws. Failure to provide information could result in a fine.