

List of Establishments

28 B. ADDITIONAL LOCATIONS OF OPERATIONS

Column (a) - List separately any establishments of your company and its subsidiaries that were not included on the PRE-IDENTIFIED LOCATIONS OF OPERATIONS but were in operation and engaged in the industry printed in the mailing address section on the first page of the consolidated report form. If your company operates at locations for which you have received separate report forms, do not list them, instead complete those forms. For acquired establishments that you list, complete **column (c2)**.

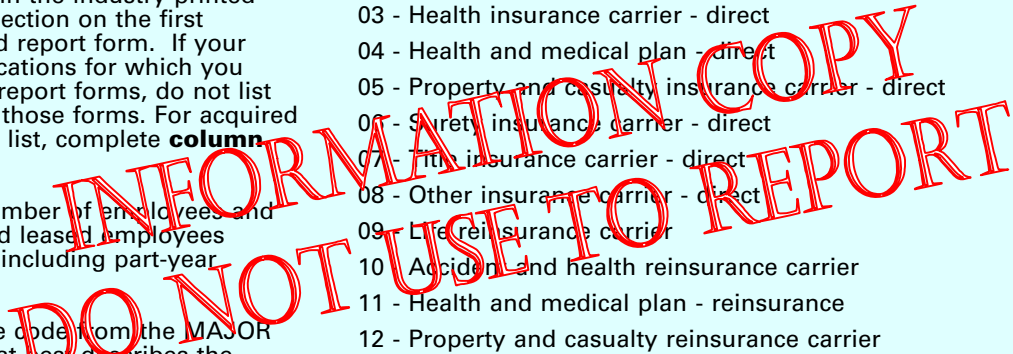
Column (b) - Report number of employees and payroll for both paid and leased employees for each establishment, including part-year operations.

Column (c1) - Enter the code from the MAJOR ACTIVITY CODES list that best describes the activity of each establishment and specify the principal products or services.

Column (c2) - Complete for acquired establishments.

MAJOR ACTIVITY CODES FOR COLUMN (c1)

- 01 - Life insurance carrier - direct
- 02 - Accident and disability income insurance - direct
- 03 - Health insurance carrier - direct
- 04 - Health and medical plan - direct
- 05 - Property and casualty insurance carrier - direct
- 06 - Surety insurance carrier - direct
- 07 - Title insurance carrier - direct
- 08 - Other insurance carrier - direct
- 09 - Life reinsurance carrier
- 10 - Accident and health reinsurance carrier
- 11 - Health and medical plan - reinsurance
- 12 - Property and casualty reinsurance carrier
- 13 - Surety reinsurance carrier
- 14 - Title reinsurance carrier
- 15 - Other reinsurance carrier



IMPORTANT - DO NOT DUPLICATE ESTABLISHMENTS PRELISTED IN 28A.

(a) Company Establishments and Subsidiaries (Employer Identification Number (EIN), establishment name, your store or plant number, if any, address of physical location, including ZIP Code)				(b) 2002 Employment and Payroll (Report the number of employees and payroll for each establishment, including part-year operations.)		(c1) Major Activity in 2002 (Enter the code from the MAJOR ACTIVITY CODES list and specify the principal products or services.)		
Line No.	EIN			Number of employees for pay period including March 12	2002		Code <input type="text"/> Specify ↴	
		-			Paid employees			
Name				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.	Former Owner or Operator (c2)	
Secondary name			Store or plant No.				Name of former owner or operator	
Physical location (Number and street)				Annual payroll			Mailing address (No. and street, P.O. box, etc.)	
City, town, village, etc.			State	ZIP Code	2002		City, town, village, etc. State ZIP Code	
				Number of employees for pay period including March 12	Leased employees			
Date establishment opened or is expected to open		Month	Day	Year	First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.	Date acquired
				Annual payroll				

28 B. ADDITIONAL LOCATIONS OF OPERATIONS - Continued

(a) Company Establishments and Subsidiaries				(b) 2002 Employment and Payroll			(c1) Major Activity in 2002		
Line No.	EIN			Number of employees for pay period including March 12	2002		Code <input type="text"/> Specify ↴		
		-			Paid employees				
Name				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.	Former Owner or Operator (c2)		
Secondary name					Store or plant No.		Name of former owner or operator		
Physical location (Number and street)				Annual payroll					
				Number of employees for pay period including March 12	2002		Mailing address (No. and street, P.O. box, etc.)		
City, town, village, etc.					State		ZIP Code		
				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.			City, town, village, etc.
Date establishment opened or is expected to open					Month		Year		
				Annual payroll			Date acquired		
Line No.	EIN			Number of employees for pay period including March 12	2002		Code <input type="text"/> Specify ↴		
		-			Paid employees				
Name				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.	Former Owner or Operator (c2)		
Secondary name					Store or plant No.		Name of former owner or operator		
Physical location (Number and street)				Annual payroll					
				Number of employees for pay period including March 12	2002		Mailing address (No. and street, P.O. box, etc.)		
City, town, village, etc.					State		ZIP Code		
				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.			City, town, village, etc.
Date establishment opened or is expected to open					Month		Year		
				Annual payroll			Date acquired		
Line No.	EIN			Number of employees for pay period including March 12	2002		Code <input type="text"/> Specify ↴		
		-			Paid employees				
Name				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.	Former Owner or Operator (c2)		
Secondary name					Store or plant No.		Name of former owner or operator		
Physical location (Number and street)				Annual payroll					
				Number of employees for pay period including March 12	2002		Mailing address (No. and street, P.O. box, etc.)		
City, town, village, etc.					State		ZIP Code		
				First quarter payroll (Jan.-Mar.)	\$ Mil.	Thou.			City, town, village, etc.
Date establishment opened or is expected to open					Month		Year		
				Annual payroll			Date acquired		