

Texas Department of Insurance

TPA/Premium Finance Section Mail Code 107-TPA-PF

P. O. Box 149104, Austin, Texas 78714-9104

512-322-3412 or 512-322-3555 telephones • 512-322-4380 fax • www.tdi.state.tx.us

ANNUAL REPORT FOR TPA'S HOLDING A <u>LIMITED</u> CERTIFICATE OF AUTHORITY IN TEXAS (TPA FORM 8A)

(An ANNUAL REPORT is to be completed by Third Party Administrators (TPA) for <u>EACH</u> limited certificate of authority issued to administer for multi-jurisdictional impaired insurance company estates in Texas.)

•	. , ,	,
TDI Company No:		
Name of Entity:		
Physical Address:		
City:	State:	Zip:
Mailing Address:		
City:	State:	Zip:
Telephone No:		
Point of Contact:		
In compliance with Article 21.0 be completed when one of the		TAC § 7.1616, the Annual Report is required to
(PLEASE INDICATE TYPE OF RE	PORT)	
	31, (And, will continue during the	endar year beginning on or after January 1, and coming year). This report is due no later than
		r year. Information required by this form and to the Texas Department of Insurance within
·		FOR THIS REPORT. CHECKS SHOULD BE CE. INFORMATION IS REQUIRED ONLY FOR
DATES COVERED BY THIS R	EPORT :	TO:
NUMBER OF FULLY INSURED	PLANS OR POLICIES:	
NUMBER OF TEXAS PARTICI	PANTS:	
	information required for the issuarty Administrator continues to be tr	ance of a <u>Limited</u> Certificate of Authority to do ue and correct.
(Date)		(Authorized Officer)

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