



Texas Department of Insurance

Licensing Division, Mail Code 107-1A

333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104

512-322-3503 telephone • 512-475-1819 fax • www.tdi.state.tx.us

CE Automatic Fines Transmittal

Licensee: Please enclose with this form:

1. Copies of certificates or other proof of partial compliance you have, if any.
2. Check or money order in the amount of \$50 times the number of hours you are deficient.
3. This form, completed.

Date Mailed: _____

Name of Licensee: _____

License Number: _____

Purpose of this Payment: Continuing Education Fines

Amount Attached: \$ _____

ACCOUNTING: USE 462 & CRE100 – PLEASE RETURN TO LICENSING DIVISION- CONTINUING EDUCATION, MAIL CODE 107-1A