



Texas Department of Insurance

Financial, Financial Analysis & Examinations, Mail Code 303-1A
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SUPPLEMENTAL FILING FOR COUNTY MUTUALS
(To be filed with the 2006 Property and Casualty Annual Statement)

Insurer Name

1. In what territory does the company operate (TIC codified section 912.308) (Check one)

- () County of its domicile only
() County of its domicile and any adjoining counties only (Please List)
() Statewide

2. Amount of Statutory Deposit: \$

3. Name and position of Principal Officer responsible for handling funds

Amount of Bond: \$

4. Are all the persons who handle funds of the Company bonded? Yes No

State the name and the amount of bond on each person who handles funds other than the individual named in Item 3 above:

Table with 2 columns: Name of Employee, Amount of Bond

5. What is the largest automobile risk assumed and retained (TIC codified section 912.151)?

6. What is the largest fire risk assumed and retained?

7. Does the Company qualify as an exempt industrial county mutual under the provisions of Section 912.310 of the Texas Insurance Code? Yes No

8. State number of members holding policies in the Company.

9. What is the total amount of policyholders' contingent liability as provided in the bylaws?

[Required: \$2 for each \$100 of insurance coverage (Section 912.202)]