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SUBCHAPTER 20. REPORTING FINANCIAL DISCLOSURE AND EXCESS PROFITS

11:3-20.1 Purpose

This subchapter sets forth the financial disclosure and excess profits reporting requirements pursuant to N.J.S.A. 17:29A-5.6 to 17:29A-5.16.

Amended by R.1996 d.58, effective February 5, 1996.
See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).

Case Notes

Insurance commissioner failed to utilize statutory rule-making procedures in changing evaluation of excess profits. *American Employers' Ins. Co. v. Commissioner of Ins., Dept. of Ins., State of N.J.*, 236 N.J.Super. 428, 566 A.2d 202 (A.D.1989).

11:3-20.2 Scope

The provisions of this subchapter apply to all insurers authorized to transact private passenger automobile insurance business in this State.

11:3-20.3 Definitions

The following words and terms, when used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise:

“Actual investment income” means that portion of income generated by investment of policyholder-supplied funds.

“Actuarial gain” means the remainder obtained by subtracting the allowance for profit and contingencies from underwriting income, which remainder may be positive or negative.

“Allowance for profit and contingencies” means the amount that is determined by the Return on Equity formula in accordance with N.J.A.C. 11:3-16.10(a)1.

“AIRE Allocation” means the amount received exclusive of the company's share of Investment Income from the New Jersey Automobile Insurance Risk Exchange pursuant to N.J.S.A. 39A:6A-22.

“AIRE Assessment” means the amount paid to the Automobile Insurance Risk Exchange pursuant to N.J.S.A. 39:6A-22.

“AIRE Investment Income” means the company's share of Investment Income received from the New Jersey Automobile Insurance Risk Exchange pursuant to N.J.S.A. 39:6A-22.

“ALAE” means Defense and Cost Containment Expense as stated on the statutory annual statement, formerly identified as Allocated Loss Adjustment Expense.

“AY” means Accident Year.

“CY” means Calendar Year.

“Calendar-accident year” means the period from January 1 to December 31, during which, in the appropriate context:

1. Premium or investment income was earned;
2. Expenses were incurred; or
3. Accidents occurred which resulted in losses, loss adjustment expenses, and/or net AIRE compensation (allocation and investment income or assessments).

“Car year” means the unit of exposure equivalent to the insuring of one automobile for 12 months, or two automobiles for six months each.

“Combined profit report” means the excess profit report consisting of the aggregated results of all members within an insurance holding company system.

“Commissioner” means the Commissioner of Banking and Insurance.

“Development adjustment” means the difference obtained by subtracting:

1. Loss and loss adjustment expenses for that calendar accident year, developed to an ultimate basis and evaluated as of March 31 of the year preceding the year in which the profit report required by N.J.A.C. 11:3-20.5 is due, plus net AIRE compensation for that calendar-accident year, developed to an ultimate basis and evaluated as of March 31 of the year in which the profit report is due; from
2. Losses and loss adjustment expenses for the calendar-accident year, developed to an ultimate basis and evaluated as of March 31 of the year in which the profit report is due, plus net AIRE compensation for that calendar-accident year, developed to an ultimate basis and evaluated as of March 31 of the year in which the profit report is due.

“Direct business” means policies written by the insurer as the primary carrier, and does not reflect premiums ceded to or losses recovered from other carriers on account of reinsurance ceded, premiums received from or losses paid to other carriers on account of reinsurance assumed, or any expenses paid or incurred as a result of a reinsurance transaction.

“Excess liability” means personal catastrophe endorsements that may be purchased to cover excess personal automobile and homeowner's losses.

“Exempted types” are those kinds of coverage arising out of a specialty program which uses its own rates, rules, and policy forms which have been filed with and approved by the Department and does not include private passenger automobile insurance coverage. “Exempted types” include, but are not limited to, motorcycles, “off-road” vehicles, motor homes, antique automobiles and excess liability.

“Extraordinary loss” means that portion of the loss above five percent of earned premium, determined over three calendar-accident years on an all coverage combined basis.

“IBNR” means Incurred but Not Reported.

“Insurance holding company system” for the purpose of the excess profits report means two or more insurers under the same ultimate common ownership each of whom writes private passenger automobile insurance in New Jersey.

“Insurer” means an entity authorized or admitted to transact private passenger automobile insurance in New Jersey. Insurer does not include any residual market mechanism for automobile insurance for the purposes of this subchapter.

“LAD fees” mean a buy-out fee as defined in the New Jersey Personal Automobile Insurance Plan, Plan of Operation, Article 5, D8.

“Non-excessive subsidization” means the number of dollars of excess profit, as calculated pursuant to this subchapter, for an individual insurer within an insurance holding company system, that is less than or equal to .5 percent (one half of one percent) of its earned premiums for the three calendar-accident years immediately preceding the year in which the excess profit report is due to the extent that this excess profit has not been refunded or credited to policyholders.

“Page 14” means statutory Page 14 from the insurer’s annual statement for New Jersey.

“Private passenger automobile insurance business” means direct insurance on private passenger automobiles as defined in N.J.S.A. 39:6A-2, excluding personal excess liability insurance and insurance on commercial vehicles.

“Subsidization” means the number of dollars of excess profit as calculated pursuant to this subchapter, for a member of an insurance holding company system, which has not been refunded or credited to policyholders.

“Total actuarial gain” means the sum of the actuarial gains for the seven calendar-accident years immediately preceding the due date of the profit report required by N.J.A.C. 11:3-20.5, less the development adjustments submitted at the option of the insurer for the calendar-accident years beginning with the 11th calendar-accident year immediately preceding the due date of the profit report and ending with the eighth calendar-accident year immediately preceding the due date of the profit report.

“UCJF” means the Unsatisfied Claim and Judgment Fund.

“ULAE” means Adjusting & Other Expense as stated on the statutory annual statement, formerly identified as Unallocated Loss Adjustment Expense.

“Underwriting income” means the remainder obtained by subtracting the sum of all losses developed to an ultimate basis, all loss adjustment expenses developed to an ultimate basis, and all other expenses exclusive of UCJF assessments, from the sum of premiums earned and net AIRE compensation developed to an ultimate basis, which remainder may be positive or negative.

“UCJF assessments” means amounts paid by insurers to the Unsatisfied Claim and Judgment Fund pursuant to N.J.S.A. 39:6-63.

“UCJF reimbursements” means amounts received by an insurer from the Unsatisfied Claim and Judgment Fund as a result of excess medical expense benefit payments by the insurer pursuant to N.J.S.A. 39:6-73.1.

Amended by R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

Definitions added for “combined profits report”, “non-excessive subsidization” and “subsidization”.

Amended by R.1991 d.45, effective February 4, 1991.

See: 22 N.J.R. 1678(a), 23 N.J.R. 306(b).

Revised “Insurer” definition by deleting NJAFIUA reference and added “. . . any residual market mechanism for automobile insurance . . .” to text.

Amended by R.1996 d.58, effective February 5, 1996.

See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).

Amended “Anticipated investment income” and “Development adjustment”.

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2001 d.44, effective February 5, 2001.

See: 32 N.J.R. 3891(a), 33 N.J.R. 573(a).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Rewrote the section.

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

Rewrote the section.

Administrative correction.

See: 36 N.J.R. 2482(a).

11:3-20.4 General reporting requirements

(a) The data in the reports required by this subchapter shall be for New Jersey voluntary private passenger automobile insurance and the Personal Automobile Insurance Plan only.

(b) Each private passenger automobile insurer, except as provided in (e) and (f) below, shall annually file with the Commissioner the data and information required by this subchapter on or before July 1 of each year. Filings shall be sent to the following address:

ATTENTION: Excess Profit Report
New Jersey Department of Banking and Insurance
Office of Property and Casualty
20 West State Street
PO Box 325
Trenton, New Jersey 08625-0325

(c) The data required by this subchapter shall be submitted either on a CD-ROM or e-mailed to the Department at the address identified either on the Department's website (www.state.nj.us/DOBI) or by telephone call to the Department's main number, (609) 292-5360, and the Exhibits shall be submitted in written copy by using the forms and record layouts contained in the Appendix to this subchapter. The information shall be presented in a Microsoft Excel 97 or compatible spreadsheet. The written copy of the Exhibits shall include in the left and top margins the row and column location, respectively, to all the data in the worksheets. Each page shall also display in the bottom right corner the name of the computer file on which it is contained. All calculated values shall be given as a formula in the spreadsheet. Data shall be submitted in the format set forth in Exhibits found in the Appendix to this subchapter, incorporated herein by reference. Companies may download from the Department web site or submit a blank CD-ROM and self-addressed, stamped mailer to receive copies of the Microsoft Excel spreadsheets for current and future use in the excess profit reports required pursuant to this subchapter.

(d) The information shall be provided with respect to the insurer's New Jersey private passenger automobile insurance business separately for each of the following coverages:

1. Personal injury protection, including all options;
2. Bodily injury liability, including uninsured and underinsured motorist coverages, all reported at total limits;
3. Property damage liability reported at the total limits; and
4. Physical damage, consisting of comprehensive and collision coverages, including all deductibles.

(e) Any insurer having fewer than 150 earned car years of exposure in New Jersey during the three calendar-accident years immediately preceding the date the profit report is due shall file a certification to that effect, in lieu of all other requirements of this subchapter.

(f) If an insurer's sole activity in New Jersey is exempted types of insurance, as defined in N.J.A.C. 11:3-20.3, and does not include any private passenger automobile insurance, such insurer shall file a certification to that effect, in lieu of all other requirements of this subchapter.

Amended by R.1996 d.58, effective February 5, 1996.

See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2001 d.44, effective February 5, 2001.

See: 32 N.J.R. 3891(a), 33 N.J.R. 573(a).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Rewrote (c).

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

In (c), substituted "(www.dobi.state.nj.us)" for "(www.state.nj.us/DOBI)" following "Department's website" in the first sentence; in (d)2, inserted "all" following "motorist coverages".

11:3-20.5 Excess profit report

(a) Each insurer shall submit a complete and accurate profit report in the format of the exhibits appended to this subchapter, which exhibits are hereby incorporated by reference as part of these rules.

(b) The excess profit report shall contain the following information for each of the 12 most recent calendar-accident years, with an evaluation date as of March 31 of the year in which the excess profit report is due.

1. Paid, unpaid and incurred loss;
2. Case incurred loss developed to an ultimate basis;
3. Paid, unpaid and incurred ALAE;
4. Case incurred ALAE developed to an ultimate basis;
5. AIRE Allocation and investment income received;
6. AIRE Allocation and investment income developed to an ultimate basis;
7. AIRE Assessment; and
8. AIRE Assessment developed to an ultimate basis.

(c) In addition to the requirements in (b) above, each insurer shall file in the format of the exhibits appended to this subchapter, the following information of the calendar-accident year ending December 31 immediately preceding the date the excess profit report is due:

1. Premiums written;
2. Premiums earned;
3. Unallocated loss adjustment expense incurred;
4. Other expenses incurred, itemized separately as follows:
 - i. Commissions and brokerage fees;
 - ii. Taxes, licenses and fees;
 - iii. AIRE charges;
 - iv. UCJF assessments;
 - v. Other acquisition costs and general expenses;
 - vi. All policyholder dividends incurred by the insurer, including any excess profit refunded or credited to policyholders;
 - vii. The net of all catastrophe reinsurance premiums incurred to unaffiliated catastrophe reinsurers and all sums paid or owed by unaffiliated catastrophe reinsurers for losses that occurred during the calendar-accident year; and
 - viii. All expenses incurred for the services of a limited assignment distribution center pursuant to N.J.S.A. 17:29D-1 et seq.

5. Actual investment income; and
6. UCJF assessments.

(d) The excess profit report shall include a calculation of each of the following items in the format of the exhibits appended to this subchapter:

1. Underwriting income for each of the seven calendar-accident years immediately preceding the date of the profit report;
2. Actuarial gain for each of the seven calendar-accident years immediately preceding the date of the profit report;
3. Actual investment income for each of the seven calendar accident years immediately preceding the date of the excess profit report;
4. Development adjustment for the calendar-accident years beginning with the 11th calendar-accident year immediately preceding the due date of the profit report and ending with the eighth calendar-accident year immediately preceding the due date of the profit report;
5. Total actuarial gain;
6. Monies spent and monies encumbered to fund reinvestments by the insurer in the New Jersey private passenger automobile insurance market; and
7. Excess profit.

(e) An officer of the insurer shall certify on the profit report forms that the report complies with all statutory and regulatory requirements to the best of his or her information, knowledge and belief. The officer shall sign his or her name and provide title, date, and phone number.

Amended by R.1992 d.254, effective June 15, 1992.

See: 24 N.J.R. 529(a), 24 N.J.R. 2264(a).

Text added at (e) regarding Excess Profits Report expenses.

Amended by R.1994 d.24, effective January 3, 1994.

See: 25 N.J.R. 1829(a), 26 N.J.R. 241(a).

Amended by R.1996 d.58, effective February 5, 1996.

See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2001 d.44, effective February 5, 2001.

See: 32 N.J.R. 3891(a), 33 N.J.R. 573(a).

Rewrote (e).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Inserted "excess" preceding "profit" throughout; rewrote (b); in (c), deleted former 5 and 6 and recodified former 7 and 8 as new 5 and 6; in (d)3, substituted "Actual" for "Excess"; deleted (g).

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

In (b), substituted "12" for "eight" in the introductory paragraph; in (c)4, added new iii, recodified existing iii to v as iv and vi. added a new vii, viii, substituted "assessments" for "reimbursements received"; rewrote (d); deleted existing (e); recodified (f) as (e).

Law Review and Journal Commentaries

Auto Insurance. Steven P. Bann, 137 N.J.L.J. No. 16, 50 (1994).

Case Notes

Challenge to validity of regulation was justiciable. Matter of Commissioner of Insurance's Issuance of Orders A-92-189 and A-92-212, 274 N.J.Super. 385, 644 A.2d 616 (A.D.1993), affirmed 137 N.J. 93, 644 A.2d 576.

Commissioner of Insurance did not exceed his authority in prohibiting automobile insurers from deducting surtaxes and assessments under Fair Automobile Insurance Requirement Act as expenses. Matter of Commissioner of Insurance's Issuance of Orders A-92-189 and A-92-212, 274 N.J.Super. 385, 644 A.2d 616 (A.D.1993), affirmed 137 N.J. 93, 644 A.2d 576.

Insurance commissioner failed to utilize statutory rule-making procedures in changing evaluation of excess profits. American Employers' Ins. Co. v. Commissioner of Ins., Dept. of Ins., State of N.J., 236 N.J.Super. 428, 566 A.2d 202 (A.D.1989).

11:3-20.6 Reporting requirements for insurance holding company systems

(a) All private passenger automobile insurers that are part of an insurance company holding system shall file one combined excess profit report under N.J.S.A. 17:29A-5.7 and N.J.A.C. 11:3-20.5. In compliance with this obligation, separate certifications and individual excess profit reports may be filed for each insurer in an insurance holding company system and included with the combined excess profit report filed by the insurance company holding system.

(b) The Commissioner may order a complete excess profit report for any insurer in an insurance holding company system if, in his or her judgment, one or more of the insurers in that system are excessively subsidizing other insurers in that system. Excessive subsidization may exist if the number of dollars of excess profit, as calculated pursuant to this subchapter, for an individual insurer within an insurance holding company system, exceeds .5 percent (one half of one percent) of its earned premiums for the three calendar-accident years immediately preceding the year in which the excess profits report is due to the extent that this excess profit has not been refunded or credited to policyholders.

(c) Notwithstanding any provision of this section to the contrary, for purposes of evaluating the excess profit reports, the excess profit computation shall be performed solely on the insurance holding company system's combined excess profit report.

Amended by R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

New subsection (c) added, provision for determining excessive subsidization.

Amended by R.1994 d.425, effective August 15, 1994.

See: 26 N.J.R. 1938(b), 26 N.J.R. 3441(b).

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Rewrote (a); in (c), substituted "profit" for "profits" and inserted "excess" following "combined"; deleted (d), (e).

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

11:3-20.7 Determination of an excess profit

The existence of an excess profit shall be determined based upon calculations made in accordance with the Exhibits set forth in the Appendix to this subchapter for the seven calendar-accident years immediately preceding the date the excess profit report is due. An excess profit shall be deemed to exist when an insurer's total actuarial gain for all private passenger automobile coverages combined exceeds 2.5 percent of earned premium, or 3.85 percent on a pre-tax basis, using the Federal corporate tax rate of 35 percent.

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Rewrote the section.

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

Rewrote the section.

Case Notes

Insurance commissioner failed to utilize statutory rule-making procedures in changing evaluation of excess profits. *American Employers' Ins. Co. v. Commissioner of Ins., Dept. of Ins., State of N.J.*, 236 N.J.Super. 428, 566 A.2d 202 (A.D.1989).

11:3-20.8 Refund or credit of an excess profit

(a) If the Commissioner determines that an insurer is required to refund excess profits, the Commissioner shall issue written notice to the insurer of his or her determination. The notice shall contain a written explanation of the basis on which such a determination was made and shall advise the insurer that it may request a reevaluation of the determination as set forth at (b) below.

(b) An insurer may request a reevaluation of the determination that it is required to refund an excess profit by submitting a written request to the Department within 30 days of the receipt of the notice in (a) above.

1. The written request shall set forth the legal or factual basis for the requested reevaluation.

2. If the basis for the requested reevaluation is good faith error or excusable mistake, the request shall be accompanied by a written request to make a supplemental filing pursuant to N.J.A.C. 11:3-20.11.

3. The Commissioner shall notify the insurer in writing of his or her determination within 60 days, which shall constitute an initial agency decision. If no written request for a reevaluation is made as set forth in (b)1 and 2 above, the original notice of determination shall constitute a final agency decision.

(c) The insurer shall submit to the Commissioner a fair, practicable and nondiscriminatory plan to refund or credit to policyholders the excess profit within 30 days after receipt of the written notice referenced in (a) above or, if an insurer requests a reevaluation, within 30 days after notification, in accordance with (b)3 above, is made to the insurer that it is

required to refund an excess profit subsequent to the reevaluation having been performed.

1. The refund or credit plan shall be subject to approval by the Commissioner. Any refund or credit plan shall provide for the refund or credit to such group or groups of policyholders as the Commissioner may determine to be reasonable in consideration of the insurer's financial and business circumstances.

2. If the refund or credit plan is disapproved, the Commissioner shall issue a written notice to the insurer containing the reasons for disapproval, and specifications for corrections of the plan.

(d) Upon approval of the insurer's refund or credit plan, the Commissioner shall issue an order requiring the insurer to distribute all excess profit according to the approved plan.

(e) Within 15 days after the excess profit has been refunded or credited to policyholders, the insurer's corporate official shall certify that such refund or credit has occurred.

(f) Any refund or credit shall be deemed a policyholder dividend applicable to the year in which it is incurred for reporting in subsequent excess profit reports.

Amended by R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

Provision at (a) added to require certain information in notice; new (b) added describing procedure and content of request for reevaluation. Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

In (b)3, substituted "an initial" for "a final" following "constitute".

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

In (c), rewrote the introductory paragraph, and inserted the last sentence in 1; in (e) substituted "profit has" for "profit have".

11:3-20.9 Excess profit, extraordinary loss, carry forwards

(a) In the event an excess profit is returned by an insurer in accordance with this subchapter and subsequent reports demonstrate and additional excess profits are indicated, an excess profit carry forward shall be established.

(b) In the event an extraordinary loss has been incurred by an insurer and subsequent excess profit reports demonstrate that an excess profit is indicated, an extraordinary loss carry forward shall be established.

(c) Excess profit and/or extraordinary loss, carry forwards shall be applied by such insurer as an allowance against future determinations of excess profits. The allowance shall only be applied in the filing year that generates an excess profit. In such filing year, the insurer shall assign the carry forward or a portion thereof to the latest three AYs of that filing. Once a carry forward is assigned to an AY, it shall remain with that AY until it is no longer displayed in subsequent filings. Once a carry forward or a portion thereof is assigned to a particular AY, that portion of the carry forward amount is exhausted and shall not be applied as an

allowance against any other AY. The carry forward may be used until such allowance is exhausted or the end of a 15 year period from the date the excess profit was paid and/or extraordinary loss was incurred, whichever occurs first.

Amended by R.1990 d.470, effective September 17, 1990.
See: 22 N.J.R. 1025(a), 22 N.J.R. 2969(c).

New (c) added providing procedure by which insurer establishes "excess profit carry forward" credit.

Amended by R.1996 d.312, effective July 15, 1996.

See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

Rewrote (a) and (b); deleted (c).

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

Added a new (b); recodified former (b) as new (c); in new (c) substituted "Excess profit and/or extraordinary loss, carry forwards" for "This excess", and substituted "allowance" for "credit" throughout.

11:3-20.10 Order for further information

(a) If, after examination of the insurer's excess profit report, the Commissioner finds that any information or calculation in such report contains, results in, or is based upon aberrant, unusual or irregular data, the Commissioner shall issue an order to such insurer directing that the information or calculation be altered in a manner necessary to eliminate the effect of the aberrant, unusual or irregular data.

(b) Such insurer shall submit the revised information to the Commissioner within 15 days after receiving an order pursuant to (a) above.

Amended by R.2002 d.386, effective December 2, 2002.

See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).

In (a), substituted "profit" for "profits", deleted "contained" following "calculation" and "in writing" following "shall issue".

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

11:3-20.11 Supplemental filings

(a) An insurer may request permission to supplement its excess profit report filing due to good faith error or excusable mistake by submitting a written request to the Department containing the following:

1. The reasons why the insurer believes that a supplemental filing is necessary;
2. A brief but complete description of the nature of the information to be contained in the supplemental filing (Note: The actual supplemental filing should not be submitted until the insurer is notified that the request has been approved); and
3. The reasons why the insurer failed to provide this information in its initial excess profit report filing.

(b) The Commissioner shall either approve or disapprove the request, in writing, within 30 days after the request is received by the Department. If the insurer is notified that its request is approved, the insurer shall submit the supplemental filing to the Department within 10 days after the receipt of such notification.

New Rule, R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

Old 20.11, Compliance dates, has been recodified to 20.12.

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

11:3-20.12 (Reserved)

Recodified from 11:3-20.11, by R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

Repealed by R.1996 d.58, effective February 5, 1996.

See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).

Section was "Compliance dates".

11:3-20.13 Penalties

Failure to file a complete and accurate excess profit report so that it is received by the Commissioner on or before July 1 shall constitute a violation of this subchapter, and may result in the imposition of penalties as provided by statute.

Recodified from 11:3-20.12, by R.1991 d.17, effective January 7, 1991.

See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).

Amended by R.2004 d.97, effective March 15, 2004.

See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).

APPENDIX

EXCESS PROFIT EXHIBITS—INSTRUCTIONS

In all Exhibits, dollars are stated as whole numbers, and ratios are expressed as decimals to the third decimal place. Where a sum is expressed as a ratio, the ratio required is the ratio of the years' dollar figures and not the sum of the individual years' ratios. The Exhibits attached are 2004 exhibits. Where exhibits for later years must be reported, the filer is required to submit Exhibits which are substantially similar to the attached Exhibits to report the later years' data and which contain all information, including dates, adjusted accordingly.

INPUT SHEET

The Input Sheet consists of four sections:

Section A is for the Bodily Injury Liability coverage (BI).

Section B is for the other Liability coverages, including Property Damage Liability coverage and uninsured and underinsured motorist coverages (PD).

Section C is for the Personal Injury Protection and Medical Payments coverages (PIP).

Section D is for Comprehensive, Collision and other miscellaneous Physical Damage coverages (Phys Dam).

Enter the data in the appropriate sections as described below. The instructions apply uniformly to each of the four sections except where noted.

In this appendix, “Year 0” refers to the year in which the report is filed, “Year -1” refers to the first year prior to the year the report is filed, “Year -2” refers to the second year prior to the year the report is filed, and so on. For example, for reports filed in 2004, “Year -1” is 2003 and “Year -2” is 2002.

Exhibit One

All data in Exhibit One is from statutory Page 14 for CY Year -1 through Year -9.

- Col (1): Direct Written Premium

Item 1: Written Premium.

Items 2a through 2f: Data for Motorcycles, Off-Road Vehicles, Motor Homes, Antique Autos, Excess Liability and Finance & Service Charges, respectively. This data shall be listed only if it is included as part of Item 1 above.

Item 4: That portion of assessments paid by the company to the UCJF relating to private passenger automobile insurance (applicable for PIP only).

- Col (2): Direct Earned Premium

Item 1: Earned Premium.

Items 2a through 2f: same definition as in Col (1).

Item 4: same definition as Col (1).

- Col (3A): Paid Dividends

Item 1: Paid Dividends, including Excess Profit Refunds.

Items 2a through 2e: Data for Motorcycles, Off-Road Vehicles, Motor Homes, Antique Autos and Excess Liability, respectively. This data shall be listed only if it is included as part of Item 1 above.

- Col (3B): Declared, but Unpaid Dividends

Item 1: Declared, but Unpaid Dividends, including Excess Profit Refunds.

Items 2a through 2e: same definition as in Col (3A).

- Col (4): Direct Unearned Premium Reserve

Item 1: Unearned Premium Reserve.

Items 2a through 2e: same definition as in Col (3A).

- Col (5): Direct Paid Loss

Item 1: Paid Loss.

Items 2a through 2e: same definition as in Col (3A).

Item 4: Excess Medical Benefits reimbursed to the company from the UCJF relating to private passenger automobile insurance (applicable for PIP only).

- Col (6): Direct Incurred Loss

Item 1: Incurred Loss (Case plus Bulk/IBNR).

Items 2a through 2e: same definition as in Col (3A).

Item 4: Excess Medical Benefits reimbursed to the company from the UCJF relating to private passenger automobile insurance (applicable for PIP only).

- Col (7): Direct Unpaid Loss

Item 1: Unpaid Loss (Case plus Bulk/IBNR).

Items 2a through 2e: same definition as in Col (3A).

Item 4: Excess Medical Benefits reimbursed to the company from the UCJF relating to private passenger automobile insurance (applicable for PIP only).

- Col (8): Direct Paid ALAE

Item 1: Paid ALAE

Items 2a through 2e: same definition as in Col (3A).

- Col (9): Direct Incurred ALAE

Item 1: Incurred ALAE (Case plus Bulk/IBNR).

Items 2a through 2e: same definition as in Col (3A).

- Col (10): Direct Unpaid ALAE

Item 1: Unpaid ALAE (Case plus Bulk/IBNR).

Items 2a through 2e: same definition as in Col (3A).

Exhibit Two, Part One

All data in Exhibit Two, Part One is the allocation of CY data from statutory Page 14 to AYs Year -1 through Year -9.

- Col (1): Incremental Direct Paid Loss, by AY paid during each CY. The total of each column must equal Exhibit 1, Col (5), Item 1 less the sum of Items 2a-2e for each corresponding CY.
- Col (3A): Direct Unpaid Case Loss by AY as of each CY end.
Col (3B): Direct Unpaid Bulk/IBNR Loss by AY as of each CY end. The total of each column for Col (3A) and Col (3B) combined must equal Exhibit 1, Col (7), Item 1 less the sum of Items 2a-2e for each corresponding CY.
- Col (5): Incremental Direct Paid ALAE by AY paid during each CY. The total of each column must equal Exhibit 1, Col (8), Item 1 less the sum of Items 2a-2e for each corresponding CY.

- Col (7A): Direct Unpaid Case ALAE by AY as of each CY end.
Col (7B): Direct Unpaid Bulk/IBNR ALAE by AY as of each CY end. The total of each column for Col (7A) and Col (7B) combined must equal Exhibit 1, Col (10), Item 1 less the sum of Items 2a–2e for each corresponding CY.

Exhibit Two, Part Two

All data in Exhibit Two, Part Two is the allocation of data from the first calendar quarter to AY Year 0 through Year –8.

- Col (10): Incremental Direct Paid Loss by AY paid during the first calendar quarter of each year.
- Col (12A): Direct Unpaid Case Loss by AY as of the end of the first calendar quarter of each year.
Col (12B): Direct Unpaid Bulk/IBNR Loss by AY as of the end of the first calendar quarter of each year.
- Col (14): Incremental Direct Paid ALAE by AY paid during the first calendar quarter of each year.
- Col (16A): Direct Unpaid Case ALAE by AY as of the end of the first calendar quarter of each year.
Col (16B): Direct Unpaid Bulk/IBNR ALAE by AY as of the end of the first calendar quarter of each year.

Exhibit Two, Part Three

All data in Exhibit Two, Part Three is from Part III of the countrywide Insurance Expense Exhibit (IEE) for CYs Year –1 through Year –9 and is for BI/UM/PD/PIP and Phys Dam coverages only.

- Col (19): Direct Incurred Loss
- Col (20): Direct Incurred ALAE
- Col (22): Direct Incurred ULAE

Exhibit Three

Enter the tail factor for Incurred Loss and ALAE @ 99 months to ultimate, for BI and PIP coverages only. If the tail factor is greater than 1.000, provide documentation.

Enter the development adjustment for Year –8 to Year –11. If the adjustment is greater than zero, justification must be provided.

Exhibit Four

All data in Exhibit Four, Col (1) except for Net Catastrophe Reinsurance Expense is from Part III of the countrywide Insurance Expense Exhibit (IEE) for CYs Year –1 through Year –7 and is for BI/UM/PD/PIP and Phys Dam coverages only.

- Col (1), Item 1: Direct Written Premium
- Col (1), Item 2: Direct Earned Premium
- Col (1), Item 3: Direct Other Acquisition Expense
- Col (1), Item 4: Direct General Expense
- Col (1), Item 5: Direct Commission & Brokerage Expense
- Col (1), Item 7: Direct Taxes, Licenses & Fees

- Col (1), Item 9: Net Catastrophe Reinsurance Expense (provide an exhibit to substantiate the expense)

State the insurer's marketing method, "D" for a direct writer, "C" for a captive agency, and "I" for an independent agency. If multiple marketing methods are used within a group, use the method of the largest company within the group.

All data in Exhibit Four, Col (3) is from statutory Page 14 for CYs Year –1 through Year –7. For the BI and PD coverages, data reported on Line 19.2 is to be split and listed under the appropriate section.

- Col (3), Item 5: Direct Commission & Brokerage Expense
- Col (3), Item 7: Direct Taxes, Licenses & Fees
- Col (3), Item 9: Net Catastrophe Reinsurance Expense
- Col (3), Item 10: LAD Fees Paid

For filings made in 2004, only the most recent four (2001–2004) years of expense information shall be required. For filings made in 2005, only the most recent five years (2001–2005) of expense information shall be required. For filings made in 2006, only the most recent six years (2001–2006) of expense information shall be required. For calendar-accident years for which expense information is not submitted in accordance with this clause, the expense provisions shall be calculated as the average of the years submitted.

Exhibit Five

All data in Exhibit Five is countrywide for CYs Year –1 through Year –7 and is not split by coverage.

- Part 1, Item 1: Agents Balance
- Part 1, Item 2: Unearned Premium Reserve
- Part 2, Item 1: Interest, Dividends and Real Estate Income
- Part 2, Item 2.1: Investment Expense Incurred
- Part 2, Item 2.2: Depreciation on Real Estate
- Part 2, Item 2.3: Unaffiliated Preferred Stock
- Part 2, Item 2.4: Affiliated Preferred Stock
- Part 2, Item 2.5: Unaffiliated Common Stock
- Part 2, Item 2.6: Affiliated Common Stock
- Part 2, Item 2.7: Other Invested Assets

- Part 2, Item 2.8: Real Estate for Company's Own Occupancy
- Part 2, Item 4.1: Bonds Acquired
- Part 2, Item 4.2: Mortgage Loans on Real Estate
- Part 2, Item 4.3: Real Estate Acquired (except that portion acquired for the insurer's own occupancy)
- Part 2, Item 4.4: Collateral Loans
- Part 2, Item 4.5: Cash on Hand and on Deposit
- Part 2, Item 4.6: Short Term Investments
- Part 2, Item 4.7: Derivative Investments

For filings made in 2004, only the most recent four (2001-2004) years of information shall be required. For filings made in 2005, only the most recent five years (2001-2005) of information shall be required. For filings made in 2006, only the most recent six years (2001-2006) of information shall be required. For calendar-accident years for which information is not submitted in accordance with this clause, the provisions shall be calculated as the average of the years submitted.

Exhibit Six

All data in Exhibit Six is for the New Jersey Automobile Insurance Risk Exchange (NJ AIRE) and is AYs Year -1 through Year 7, evaluated @ 15 months and an estimate for AY Year 0 (applicable for BI only).

- Part 1: AIRE Allocation by AY received during the CY, as reported on the NJ AIRE Form 3 Reimbursement Report. Data for the latest AY shall be the company's best estimate; plus AIRE Investment Income by AY received during the CY, as reported on the NJ AIRE Annual Cash Settlement True-Up Report. Data for the latest AY shall be the company's best estimate.
- Part 4: AIRE Assessment by AY paid during the CY, as reported on the NJ AIRE Form 3 Reimbursement Report. Data for the current AY shall be the company's best estimate.

Exhibit Seven

All data in Exhibit 7 is for New Jersey business only and is for the CYs Year 0 through Year -16.

Item 1: List any excess profit refund paid in the applicable CYs

Item 2: List any excess profit carry forward used in the applicable AYs.

Exhibit Eight

All data in Exhibit 8 is for New Jersey business only and is for the CYs Year 0 through Year -16 and is for all coverages combined.

Item 1: List any extraordinary loss paid in the applicable CYs

Item 2: List any excess profit carry forward used in the applicable AYs.

Item 4: List any funds reinvested into New Jersey in the applicable CYs.

Item 5: List any reinvestment carry forward used in the applicable AYs.

Exhibit Nine

All data on Exhibit 9, except for Items 19 and 23, is generated from other exhibits.

- Item 19: State the profit and contingencies provision on a pre-tax basis from the insurer's last approved New Jersey rate filing.
- Item 23: State whether or not the insurer is part of an insurance company holding system.

EXHIBIT ONE

Exhibit One removes UCJF Assessments, Excess Medical Benefit Reimbursements and other exclusions from State-wide premiums, losses and allocated loss adjustment expenses. Exhibit One consists of 36 sheets, one for each coverage for each of 9 CYs, beginning the year immediately prior to the year of submission and is uniform across all coverages.

For all columns, Item 2 is the sum of Items 2a-2f for premiums and Items 2a-2e for loss and ALAE from the Input Sheet. Item 3 is Item 1-Item 2.

For Col (3), Item 5A is the sum of the excess profit refund paid, extraordinary loss incurred, and reinvestment into New Jersey listed in the Exhibits Seven and Eight portion of the Input Sheet. Item 5B = Item 3-Item 5A.

EXHIBIT TWO

Exhibit Two allocates CY Case Incurred Loss and ALAE to AYs and is uniform across all coverages.

Col (1) is the incremental Paid Loss for each AY in that CY only, taken from the Input Sheet.

Col (2) is the cumulative Paid Loss for each AY up to and including that CY.

Col (3) is the Case Unpaid Loss for each AY as of the end of that CY, taken from the Input Sheet.

Col (4) = Col (2) + Col (3).

Col (5) is the incremental Paid ALAE for each AY in that CY only, taken from the Input Sheet.

Col (6) is the cumulative Paid ALAE for each AY up to and including that CY.

Col (7) is the Case Unpaid ALAE for each AY as of the end of that CY, taken from the Input Sheet.

Col (8) = Col (6) + Col (7).

Col (9) = Col (4) + Col (8).

Col (10) is the incremental Paid Loss for each AY in the first quarter of that CY only, taken from the Input Sheet.

Col (11) = Col (2) + Col (10). For the most recent accident quarter, it is simply Col (10).

Col (12) is the Case Unpaid Loss for each AY as of the end of the first calendar quarter, taken from the Input Sheet.

Col (13) = Col (11) + Col (12).

Col (14) is the incremental Paid ALAE for each AY in the first quarter of that CY only, taken from the Input Sheet.

Col (15) = Col (6) + Col (14). For the most recent accident quarter, it is simply Col (14).

Col (16) is the Case Unpaid ALAE for each AY as of the end of the first calendar quarter, taken from the Input Sheet.

Col (17) = Col (15) + Col (16).

Col (18) = Col (13) + Col (17).

Col (19) through Col (23) are applicable only for Sheets 1 through 7 for each coverage.

Col (19) is the countrywide Direct Incurred Loss for that CY, taken from the Input Sheet.

Col (20) is the countrywide Direct Incurred ALAE for that CY, taken from the Input Sheet.

Col (21) = Col (19) + Col (20).

Col (22) is the countrywide Direct Incurred ULAE for that CY, taken from the Input Sheet.

Col (23) = Col (22) ÷ Col (21). The ULAE factor is the sum of one and the straight three-year average of the ratios, limited by a minimum of 1.05 and a maximum of 1.30.

EXHIBIT THREE

Exhibit Three shows the “development triangles” of Case Incurred Loss and ALAE for each coverage.

For each Part 2, any development factor that results in a division by zero shall instead not be considered in the calculation of loss development factors.

Part 1

Evaluations are at 15, 27, 39, 51, 63, 75, 87 and 99 months for BI and PIP coverages and at 15, 27, 39 and 51 months for PD and Phys Dam coverages.

This part is derived from Exhibit 2, Col (18).

- AY Year -1 @ 15 months = Sheet 1, AY Year -1.
- AY Year -2 @ 15 months = Sheet 2, AY Year -2.
- AY Year -2 @ 27 months = Sheet 1, AY Year -2.
- AY Year -3 @ 15 months = Sheet 3, AY Year -3.
- AY Year -3 @ 27 months = Sheet 2, AY Year -3.
- AY Year -3 @ 39 months = Sheet 1, AY Year -3.
- And so on through AY Year -8 @ 99 months for BI and PIP coverages and through AY Year -8 @ 51 months for PD and Phys Dam coverages.

Part 2

Development factors are through 87-99 months for BI and PIP coverages and through 39-51 months for PD and Phys Dam coverages.

- AY Year -2 @ 15-27 months = Part 1, AY Year -2 @ 27 months ÷ Part 1, AY Year -2 @ 15 months.
- AY Year -3 @ 15-27 months = Part 1, AY Year -3 @ 27 months ÷ Part 1, AY Year -3 @ 15 months.
- AY Year -3 @ 27-39 months = Part 1, AY Year -3 @ 39 months ÷ Part 1, AY Year -3 @ 27 months.
- And so on through AY Year -8 @ 87-99 months for BI coverages and through AY Year -8 @ 39-51 months for PD and Phys Dam coverages.

For BI and PIP coverages:

- Col (A), is the straight average of all non-zero development factors, excluding the maximum and minimum for 15-27, 27-39, 39-51 and 51-63 months and the straight average of all non-zero development factors for 63-75, 75-87 and 87-99 months.
- Col (A), Tail Factor @ 99 months to ultimate factor entered in the Input Sheet, if greater than one, otherwise it is the greater of one and the square root of the product of Col (A) @ 75-87 months and Col (A) @ 87-99 months.
- Col (B) Tail Factor = Col (A), Tail Factor.
- Col (B) @ 87 months to ultimate = Col (B), Tail Factor x Col (A) @ 87-99 months.
- Col (B) @ 75 months to ultimate = Col (B) @ 87 months to ultimate x Col (A) @ 75-87 months.
- Col (B) @ 63 months to ultimate = Col (B) @ 75 months to ultimate x Col (A) @ 63-75 months.
- And so on through 15 months to ultimate.

For PD and Phys Dam coverages:

- Col (A) is the straight average of all non-zero development factors, excluding the maximum and minimum.
- Col (B) @ 39 months to ultimate = Col (A) @ 39-51 months.

- Col (B) @ 27 months to ultimate = Col (B) @ 39 months to ultimate x Col (A) @ 27-39 months.
- Col (B) @ 15 months to ultimate = Col (B) @ 27 months to ultimate x Col (A) @ 15-27 months.

Part 3

Development is for AYs Year -1 through Year -7 for BI and PIP coverages and for AYs Year -1 through Year -4 for PD and Phys Dam coverages.

- Col (1), AY Year -1 = Part 1, AY Year -1 @ 15 months.
- Col (1), AY Year -2 = Part 1, AY Year -2 @ 27 months.
- And so on through AY Year -7 for BI and PIP coverages and through AY Year -4 for PD and Phys Dam coverages.
- Col (2), AY Year -1 = Part 2, Col (B) @ 15 months to ultimate.
- Col (2), AY Year -2 = Part 2, Col (B) @ 27 months to ultimate.
- And so on through AY Year -7 for BI and PIP coverages and through AY Year -4 for PD and Phys Dam coverages.
- Col (3) = Col (1) x Col (2).

EXHIBIT FOUR

Exhibit Four, Part 1 shows countrywide direct premiums and expenses from Part III of the statutory Insurance Expense Exhibit. Exhibit Four includes each of the seven years immediately preceding the year of submission.

Exhibit Four, Part 2 shows New Jersey direct premiums and expenses from statutory Page 14 for each of the seven years immediately preceding the year of submission.

- Part 1, Col (1), Items 1 through 5 are Direct Written Premium, Direct Earned Premium, Direct Other Acquisition Expense, Direct General Expense, and Direct Commission & Brokerage respectively, from the Input Sheet.
- Part 1, Col (1), Item 7 is Direct Taxes, Licenses, & Fees from the Input Sheet.
- Part 1, Col (1), Item 8 = $\frac{1}{2} \times (\text{Item 3} + \text{Item 4}) + \text{Item 6} \times (\text{Item 3} + \text{Item 4}) \div (\text{Item 3} + \text{Item 4} + \text{Item 5}) + \text{Item 5} + \text{Item 7}$.
- Part 1, Col (1), Item 9 is Net Catastrophe Reinsurance Expense from the Input Sheet.
- Part 1, Col (2), Item 3 = Col (1), Item 3 \div Col (1), Item 2.
- Part 1, Col (2), Item 4 = Col (1), Item 4 \div Col (1), Item 2.
- Part 1, Col (2), Item 5 = Col (1), Item 5 \div Col (1), Item 1.
- Part 1, Col (2), Item 7 = Col (1), Item 6 \div Col (1), Item 1.
- Part 1, Col (2), Item 8 = Col (1), Item 7 \div Col (1), Item 2.
- Part 1, Col (2), Item 9 = Col (1), Item 9 \div Col (1), Item 1.
- Part 2, Col (3), Item 1 = Exhibit 1, Col (1), Item 3—Exhibit 1, Col (1), Item 4.
- Part 2, Col (3), Item 2 = Exhibit 1, Col (2), Item 3—Exhibit 1, Col (1), Item 4.

- Part 2, Col (3), Item 3 = Col (3), Item 2 x Col (2), Item 3.
- Part 2, Col (3), Item 4 = Col (3), Item 2 x Col (2), Item 4.
- Part 2, Col (3), Item 5 is from the Input Sheet
- Part 2, Col (3), Item 6a = Part 2, Col (3), Sum of Items 3-5.
- Part 2, Col (3), Item 6b is the expense cap based on the insurer's marketing method calculated in accordance with N.J.A.C. 11:3-16 Appendix H.
- Part 2, Col (3), Item 6 = Item 6b—Item 6a if positive, and zero otherwise.
- Part 2, Col (3), Item 7 is from the Input Sheet.
- Part 2, Col (3), Item 8 = $\frac{1}{2} \times (\text{Item 3} + \text{Item 4}) + \text{Item 6} \times (\text{Item 3} + \text{Item 4}) \div (\text{Item 3} + \text{Item 4} + \text{Item 5}) + \text{Item 5} + \text{Item 7}$.
- Part 2, Col (3), Item 9 + Col (2), Item 9 x Col (1), Item 1.
- Part 2, Col (3), Item 10 is from the Input Sheet.
- Part 2, Col (4), Item 3 = Col (3), Item 3 \div Col (3), Item 2.
- Part 2, Col (4), Item 4 = Col (3), Item 4 \div Col (3), Item 2.
- Part 2, Col (4), Item 5 = Col (3), Item 5 \div Col (3), Item 1.
- Part 2, Col (4), Item 6 = Col (3), Item 6 \div Col (3), Item 1.
- Part 2, Col (4), Item 7 = Col (3), Item 7 \div Col (3), Item 2.
- Part 2, Col (4), Item 8 = Col (3), Item 8 \div Col (3), Item 2.
- Part 2, Col (4), Item 9 = Col (3), Item 9 \div Col (3), Item 1.
- Part 2, Col (4), Item 10 = Col (3), Item 10 \div Col (3), Item 1.

EXHIBIT FIVE

Exhibit Five, Part One shows actual investment income attributable to New Jersey private passenger auto for the purpose of completing excess profit reports in each of the seven calendar years covered by this report.

- Items 1 and 2 are from the Input Sheet.
- Item 3 = Item 1 \div Item 2, with a maximum of 1.0.
- Item 4 = Exhibit 4, Col (3), Item 7.
- Item 5 = Exhibit 4, Col (3), Item 1.
- Item 6 = Item 4 \div Item 5, with a maximum of 1.0.
- Item 7a for Year -1 = Exhibit 1, CY Year -2, Col (4), Item 4.
- Item 7a for Year -2 = Exhibit 1, CY Year -3, Col (4), Item 4.
- Item 7a for Year -3 = Exhibit 1, CY Year -4, Col (4), Item 4.
- Item 7b for Year -1 = Exhibit 1, CY Year -1, Col (4), Item 4.
- Item 7b for Year -2 = Exhibit 1, CY Year -2, Col (4), Item 4.
- Item 7b for Year -3 = Exhibit 1, CY Year -3, Col (4), Item 4.
- Item 7 = $[\text{Item 7a} + \text{Item 7b}] / 2$.
- Item 8 = Item 7 x $[1 - \text{Item 3} - \text{Item 6}]$ if positive, and zero otherwise.
- Item 9a for Year -1 = Exhibit 1, CY Year -2, Col (7), Item 4.
- Item 9a for Year -2 = Exhibit 1, CY Year -3, Col (7), Item 4.
- Item 9a for Year -3 = Exhibit 1, CY Year -4, Col (7), Item 4.

- Item 9b for Year -1 = Exhibit 1, CY Year -1, Col (7), Item 4.
- Item 9b for Year -2 = Exhibit 1, CY Year -2, Col (7), Item 4.
- Item 9b for Year -3 = Exhibit 1, CY Year -3, Col (7), Item 4.
- Item 9 = [Item 9a + Item 9b] / 2.
- Item 10a for Year -1 = Exhibit 1, CY Year -2, Col (10), Item 4.
- Item 10a for Year -2 = Exhibit 1, CY Year -3, Col (10), Item 4.
- Item 10a for Year -3 = Exhibit 1, CY Year -4, Col (10), Item 4.
- Item 10b for Year -1 = Exhibit 1, CY Year -1, Col (10), Item 4.
- Item 10b for Year -2 = Exhibit 1, CY Year -2, Col (10), Item 4.
- Item 10b for Year -3 = Exhibit 1, CY Year -3, Col (10), Item 4.
- Item 10 = [Item 10a + Item 10b] / 2.
- Item 11 = Exhibit 2, Part 3, ULAE Factor.
- Item 12 = [Item 9 + Item 10] x Item 11.
- Item 13 = Item 8 + Item 12.
- Item 14 = Part 2C, Item 8, 7 Year Total.
- Item 15 = Item 13 x Item 14.

Exhibit Five—Part Two. All data is from the countrywide statutory annual statement for investments purchased in each of the seven calendar years covered by this report.

- Part 2A, Items 1 through 2.8 are from the Input Sheet.
- Part 2A, Item 2 = the sum of Part 2A, Items 2.1 through 2.8.
- Part 2A, Item 3 = Part 2A, Item 1—Part 2A, Item 2.
- Part 2B, Items 4.1 through 4.7 are from the Input Sheet.
- Part 2B, Item 4 = the sum of Part 2B, Items 4.1 through 4.7.
- Part 2B, Item 5 = $\frac{1}{2}$ x Part 2B, Item 4.
- Part 2C, Item 6 = Part 2A, Item 3.
- Part 2C, Item 7 = Part 2B, Item 5.
- Part 2C, Item 8 = Part 2C, Item 6 ÷ Part 2C, Item 7.

EXHIBIT SIX

Exhibit Six—Part One shows the accumulated AIRE Allocation and Investment Income received by the insurer for each accident year as of the various stages of development, as derived from the Assessment Allocation column in the Statewide Company Annual Cash Settlement Report issued by ISO to AIRE member companies added to the Investment Income column in the Annual Cash Settlement True-Up Report issued by ISO to AIRE member companies. This exhibit applies only to the BI coverage.

For each Part 2 and 5, any development factor that results in a division by zero shall instead not be considered in the calculation of AIRE development factors.

Part 1

Evaluations are 15, 27, 39, 51, 63, 75 and 87 months.

All values in Part 1 is the cumulative of the Allocation and Investment Income received for the appropriate AYs.

Part 2

Evaluations are through 75–87 months.

- AY Year -2 @ 15–27 months = Part 1, AY Year -2 @ 27 months ÷ Part 1, AY Year -2 @ 15 months.
- AY Year -3 @ 15–27 months = Part 1, AY Year -3 @ 27 months ÷ Part 1, AY Year -3 @ 15 months.
- AY Year -3 @ 27–39 months = Part 1, AY Year -3 @ 39 months ÷ Part 1, AY Year -3 @ 27 months.
- And so on through AY Year -7 @ 75–87 months.
- Col (A) is the straight average of all non-zero development factors, excluding the maximum and minimum for 15–27, 27–39 and 39–51 and the straight average of all non-zero development factors for 51–63, 63–75 and 75–87 months.
- Col (B) @ 75 months to ultimate = Col (A) @ 75–87 months.
- Col (B) @ 63 months to ultimate = Col (B) @ 75 months to ultimate x Col (A) @ 63–75 months.
- And so on through 15 months to ultimate.

Part 3

Evaluations are for AY Year -1, Year -2 and Year -3.

- Col (1), AY Year -1 is the sum of the estimated AIRE Allocation and Investment Income @ 15 months as entered on the Input Sheet.
- Col (1), AY Year -2 = Part 1 AY Year -2 @ 15 months.
- Col (1), AY Year -3 = Part 1 AY Year -3 @ 27 months.
- Col (2), AY Year -1 and AY Year -2 = Part 2, Col (B) @ 15 months to ultimate.
- Col (2), AY Year -3 = Part 2, Col (B) @ 27 months to ultimate.
- Col (3) = Col (1) x Col (2)

Exhibit Six—Part Four shows the accumulated AIRE Assessment paid by the insurer for each accident year as of the various stages of development as derived from the Assessments at Present Rate column in the Annual Cash Settlement Report issued by ISO to AIRE member companies.

Parts 4–6

Parts 4–6 are substantially the same as Parts 1–3, with AIRE Assessment substituting for the sum of AIRE Allocation and Investment Income.

Part 7

- Col (1) = Part 3, Col (3)
- Col (2) = Part 6, Col (3)
- Col (3) = Col (1)-Col (2)

EXHIBIT SEVEN

Exhibit Seven shows the excess profit paid in each of the last 17 CYs and carry forward used in each of the last 19 AYs by coverage along with the total.

Item 1 is the excess profit paid by the company as stated in the Input Sheet.

Items 2.1 through 2.19 are the excess profit carry forwards used in the applicable AYs as stated in the Input Sheet.

Item 2 is the total of Items 2.1 through 2.19.

Item 3 = Item 1-Item 2.

EXHIBIT EIGHT

Exhibit Eight shows the extraordinary loss incurred and amount reinvested into New Jersey in each of the last 17 CYs and carry forward used in each of the last 19 AYs by coverage along with the total.

Item 1 is the extraordinary loss incurred by the company as stated in the Input Sheet.

Items 2.1 through 2.19 are the extraordinary loss carry forwards used in the applicable AYs as stated in the Input Sheet.

Item 2 is the total of Items 2.1 through 2.19.

Item 3 = Item 1-Item 2.

Item 4 is the amount reinvested into New Jersey by the company as stated in the Input Sheet.

Items 5.1 through 5.19 are the reinvestment carry forwards used in the applicable AYs as stated in the Input Sheet.

Item 5 is the total of Items 5.1 through 5.19.

Item 6 = Item 4-Item 5.

EXHIBIT NINE

Exhibit Nine uses the data developed in Exhibits One through Eight to calculate excess profit and any extraordinary loss for AYs Year -3, Year -2 and Year -1, as well as a seven-year total.

The sources of data for Exhibit Nine follow.

- Item 1 = Exhibit 1, Col (1), Item 3.
- Item 2 = Exhibit 1, Col (2), Item 3.
- Item 3 = Exhibit 1, Col (2), Item 4.
- Item 4 = Exhibit 1, Col (3), Item 5b.
- Item 5 = Exhibit 6, Part 7, Col (3) for BI and zero for all other coverages.
- Item 6 = Item 2-Item 3-Item 4 + Item 5.
- Item 7 = Exhibit 3, Part 3, Col (3).
- Item 8 = Exhibit 2, Part 3, ULAE Factor.
- Item 9 = Item 7 x Item 8.
- Item 10 = Item 9 ÷ Item 6.
- Item 11 = Exhibit 4, Col (3), Item 5.
- Item 12 = Exhibit 4, Col (3), Item 3.
- Item 13 = Exhibit 4, Col (3), Item 4.
- Item 14 = Exhibit 4, Col (3), Item 6.
- Item 15 = Exhibit 4, Col (3), Item 7.
- Item 16 = Exhibit 4, Col (3), Item 9.
- Item 17 = Exhibit 4, Col (3), Item 10.
- Item 18 = Sum of Items 11-17.
- Item 19 = Item 6-Item 9-Item 18
- Item 20 = Item 2 x Input Sheet, Item 19
- Item 21 = Exhibit 5, Part 1, Item 15
- Item 22 = Item 19-Item 20 + Item 21
- Item 23 = is from the Input Sheet.
- Item 24 = Item 22-Item 23, for the seven-year total only.
- Item 25 = Item 2 x Additional Non-Excessive Profit Allowance [2.5 percent divided by 1 minus the Federal corporate tax rate of 35 percent].
- Item 26 = Item 2 x Holding Company Non-Excessive Subsidization [0.5 percent]
- Item 27 = Item 24-Item 25-Item 26, for the seven-year total only
- Item 28 = Exhibit 7, Item 2.
- Items 29-33 are on an all coverages combined basis only.
- Item 29 = Exhibit 8, Item 2.
- Item 30 = Exhibit 8, Item 5.
- Item 31 is the amount of qualified reinvestment into the New Jersey automobile insurance market.
- Item 32 = Item 27-Item 28-Item 29-Item 30, for the seven-year total only.
- Item 33 = Item 31-Item 2 x -5 percent for the seven-year total for all coverages combined if positive, and zero otherwise.

APPENDIX

INPUT FORMS AND EXHIBITS

Introduction

The appendix contains the Input Forms that must be used by insurers in the submission of data as part of the excess profit report. The exact format contained herein must be used. In accordance with N.J.A.C. 11:3-20.4(a), insurers can receive a copy of these forms on a CD-ROM together with the required formulas from the Department. These Input Forms are to be used for the following coverages: BI, PD, PIP and physical damage.

The Appendix also contains copies of Exhibit One to Exhibit Nine of the excess profit report. Once again, the format must be strictly followed. Copies can be obtained in accordance with N.J.A.C. 11:3-20.4(c).

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name				BI Liab	XXX						Input Sheet
2	Group NAIC #:	#				PD Liab							Section A
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
55	Direct Paid Loss												
56	Col (5)	Item 1	Total		0	0	0	0	0	0	0	0	0
57	Col (5)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
58	Col (5)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
59	Col (5)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
60	Col (5)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
61	Col (5)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
62	Col (5)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
63													
64	Direct Incurred Loss (Case + Bulk/BNR)												
65	Col (6)	Item 1	Total		0	0	0	0	0	0	0	0	0
66	Col (6)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
67	Col (6)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
68	Col (6)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
69	Col (6)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
70	Col (6)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
71	Col (6)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
72													
73	Direct Unpaid Loss (Case + Bulk/BNR)												
74	Col (7)	Item 1	Total		0	0	0	0	0	0	0	0	0
75	Col (7)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
76	Col (7)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
77	Col (7)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
78	Col (7)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
79	Col (7)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
80	Col (7)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
81													
82	Direct Paid Defense & Cost Containment (ALAE)												
83	Col (8)	Item 1	Total		0	0	0	0	0	0	0	0	0
84	Col (8)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
85	Col (8)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
86	Col (8)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
87	Col (8)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
88	Col (8)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
89													
90	Direct Incurred ALAE (Case + Bulk/BNR)												
91	Col (9)	Item 1	Total		0	0	0	0	0	0	0	0	0
92	Col (9)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
93	Col (9)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
94	Col (9)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
95	Col (9)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
96	Col (9)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
97													
98	Direct Unpaid ALAE (Case + Bulk/BNR)												
99	Col (10)	Item 1	Total		0	0	0	0	0	0	0	0	0
100	Col (10)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
101	Col (10)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
102	Col (10)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
103	Col (10)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
104	Col (10)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
105													
106													

3-90.15

Supp. 3-15-04

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name				BI Liab	XXX						Input Sheet
2	Group NAIC #:	#				PD Liab							Section A
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
153	Incremental Direct Paid ALAE												
154	Col (5)	AY -1, Paid in the CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
155	Col (5)	AY -2, Paid in the CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
156	Col (5)	AY -3, Paid in the CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
157	Col (5)	AY -4, Paid in the CY	0	0	0	0	0	0	0	XXX	0	XXX	0
158	Col (5)	AY -5, Paid in the CY	0	0	0	0	0	0	0	0	0	XXX	0
159	Col (5)	AY -6, Paid in the CY	0	0	0	0	0	0	0	0	0	XXX	0
160	Col (5)	AY -7, Paid in the CY	0	0	0	0	0	0	0	0	0	0	XXX
161	Col (5)	AY -8, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
162	Col (5)	AY -9, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
163	Col (5)	AY -10 & prior, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
164		Total	0	0	0	0	0	0	0	0	0	0	0
165		Exhibit 1, Col (8)	0	0	0	0	0	0	0	0	0	0	0
166													
167	Direct Unpaid Case ALAE												
168	Col (7A)	AY -1, Unpaid at the end of CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
169	Col (7A)	AY -2, Unpaid at the end of CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
170	Col (7A)	AY -3, Unpaid at the end of CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
171	Col (7A)	AY -4, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	0	XXX	0
172	Col (7A)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0
173	Col (7A)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	XXX
174	Col (7A)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
175	Col (7A)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
176	Col (7A)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
177	Col (7A)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
178		Total	0	0	0	0	0	0	0	0	0	0	0
179													
180	Direct Unpaid Bulk/BNR ALAE												
181	Col (7B)	AY -1, Unpaid at the end of CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
182	Col (7B)	AY -2, Unpaid at the end of CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
183	Col (7B)	AY -3, Unpaid at the end of CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
184	Col (7B)	AY -4, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	0	XXX	0
185	Col (7B)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0
186	Col (7B)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	XXX
187	Col (7B)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
188	Col (7B)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
189	Col (7B)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
190	Col (7B)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
191		Total	0	0	0	0	0	0	0	0	0	0	0
192													
193		Total Col (7A) + Col (7B)	0	0	0	0	0	0	0	0	0	0	0
194		Exhibit 1, Col (10)	0	0	0	0	0	0	0	0	0	0	0
195													
196													

3-90.17

Supp. 3-15-04

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name				BI Liab	XXX						Input Sheet
2	Group NAIC #:	#				PD Liab							Section A
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
242	Incremental Direct Paid ALAE												
243	Col (14)	AY 0, Paid in the CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
244	Col (14)	AY -1, Paid in the CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
245	Col (14)	AY -2, Paid in the CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
246	Col (14)	AY -3, Paid in the CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
247	Col (14)	AY -4, Paid in the CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
248	Col (14)	AY -5, Paid in the CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
249	Col (14)	AY -6, Paid in the CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
250	Col (14)	AY -7, Paid in the CQ		0	0	0	0	0	0	0	0	XXX	XXX
251	Col (14)	AY -8, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
252	Col (14)	AY -9, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
253	Col (14)	AY -10 & prior, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
254		Total		0	0	0	0	0	0	0	0	0	0
255													
256	Direct Unpaid Case ALAE												
257	Col (16A)	AY 0, Unpaid at the end of CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
258	Col (16A)	AY -1, Unpaid at the end of CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
259	Col (16A)	AY -2, Unpaid at the end of CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
260	Col (16A)	AY -3, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
261	Col (16A)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
262	Col (16A)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
263	Col (16A)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
264	Col (16A)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
265	Col (16A)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
266	Col (16A)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
267	Col (16A)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
268		Total		0	0	0	0	0	0	0	0	0	0
269													
270	Direct Unpaid Bulk/IBNR ALAE												
271	Col (16B)	AY 0, Unpaid at the end of CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
272	Col (16B)	AY -1, Unpaid at the end of CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
273	Col (16B)	AY -2, Unpaid at the end of CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
274	Col (16B)	AY -3, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
275	Col (16B)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
276	Col (16B)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
277	Col (16B)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
278	Col (16B)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
279	Col (16B)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
280	Col (16B)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
281	Col (16B)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
282		Total		0	0	0	0	0	0	0	0	0	0
283													
284													
285	Exhibit 2 - Part 3												
286	Source: Countrywide Insurance Expense Exhibit (IEE),												
287	Part 3, Lines 19.1 + 19.2												
288	Col (19)	Direct Incurred Loss - CW		-1	-2	-3	-4	-5	-6	-7	-8	-9	
289	Col (20)	Direct Incurred ALAE - CW		0	0	0	0	0	0	0	0	0	0
290	Col (22)	Direct Incurred ULAE - CW		0	0	0	0	0	0	0	0	0	0
291													
292													
293	Exhibit 3												
294	Item 23	Tail Factor (99 months-ultimate)		1.000	Provide Documentation if greater than 1.000								
295		Development Adjustment (insurer's option)		0	Provide Documentation if greater than 0								
296													
298													

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name				BI Liab	XXX						Input Sheet
2	Group NAIC #:	#				PD Liab							Section A
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
297	Exhibit 4												
						Calendar Year							
298	Source: Countrywide Insurance Expense Exhibit (IEE),				-1	-2	-3	-4	-5	-6	-7	-8	-9
299	Part 3, Lines 19.1 + 19.2 (except Item 9)												
300	Col (1)	Item 1	Direct Written Premium - CW		0	0	0	0	0	0	0	XXX	XXX
301	Col (1)	Item 2	Direct Earned Premium - CW		0	0	0	0	0	0	0	XXX	XXX
302	Col (1)	Item 3	Direct Other Acquisition Expense - CW		0	0	0	0	0	0	0	XXX	XXX
303	Col (1)	Item 4	Direct General Expense - CW		0	0	0	0	0	0	0	XXX	XXX
304	Col (1)	Item 5	Direct Commission & Brokerage - CW		0	0	0	0	0	0	0	XXX	XXX
305	Col (1)	Item 7	Direct Taxes, Licenses & Fees - CW		0	0	0	0	0	0	0	XXX	XXX
306	Col (1)	Item 9	Net Catastrophe Reinsurance Exp. - CW		0	0	0	0	0	0	0	XXX	XXX
307													
308	Source: Annual Statement - NJ Page 14, Line 19.2 (B)												
309	Col (3)	Item 5	Direct Commission & Brokerage - NJ		0	0	0	0	0	0	0	XXX	XXX
310	Col (3)	Item 7	Direct Taxes, Licenses & Fees - NJ		0	0	0	0	0	0	0	XXX	XXX
311	Col (3)	Item 9	Net Catastrophe Reinsurance Exp. - NJ		0	0	0	0	0	0	0	XXX	XXX
312	Col (3)	Item 10	LAD Fees Paid - NJ		0	0	0	0	0	0	0	XXX	XXX
313													
314	Insurer Marketing Method (Direct, Captive Agent, Indep. Agent)				1 (if multiple methods in group, choose method of largest company)								
315													
316			Allowable Expense Caps		Direct	Captive Agent	Indep. Agent	Note: Expense caps will be put on the DOBI					
317			Liability		15.3%	18.2%	24.4%	web site by May 31 each year.					
318			Physical Damage		15.4%	18.1%	24.6%	http://www.state.nj.us/dobi					
319													
320	Exhibit 5												
						Purchase Year							
321	All data on Exhibit 5 is Countrywide, for all coverages combined.												
322					-1	-2	-3	-4	-5	-6	-7	-8	-9
323	Part 1	Item 1	Agents Balances		0	0	0	0	0	0	0	XXX	XXX
324	Part 1	Item 2	Unearned Premium Reserve		0	0	0	0	0	0	0	XXX	XXX
325													
326	Part 2A	Item 1	Interest, Dividend & Real Estate Income		0	0	0	0	0	0	0	XXX	XXX
327	Part 2A	Item 2.1	Investment Expense Incurred		0	0	0	0	0	0	0	XXX	XXX
328	Part 2A	Item 2.2	Depreciation on Real Estate		0	0	0	0	0	0	0	XXX	XXX
329	Part 2A	Item 2.3	Unaffiliated Preferred Stock		0	0	0	0	0	0	0	XXX	XXX
330	Part 2A	Item 2.4	Affiliated Preferred Stock		0	0	0	0	0	0	0	XXX	XXX
331	Part 2A	Item 2.5	Unaffiliated Common Stock		0	0	0	0	0	0	0	XXX	XXX
332	Part 2A	Item 2.6	Affiliated Common Stock		0	0	0	0	0	0	0	XXX	XXX
333	Part 2A	Item 2.7	Other Invested Assets		0	0	0	0	0	0	0	XXX	XXX
334	Part 2A	Item 2.8	Real Estate for Co's Own Occupancy		0	0	0	0	0	0	0	XXX	XXX
335													
336	Part 2B	Item 4.1	Bonds Acquired		0	0	0	0	0	0	0	XXX	XXX
337	Part 2B	Item 4.2	Mortgage Loans on Real Estate		0	0	0	0	0	0	0	XXX	XXX
338	Part 2B	Item 4.3	Real Estate Acquired		0	0	0	0	0	0	0	XXX	XXX
339	Part 2B	Item 4.4	Collateral Loans		0	0	0	0	0	0	0	XXX	XXX
340	Part 2B	Item 4.5	Cash on Hand and on Deposit		0	0	0	0	0	0	0	XXX	XXX
341	Part 2B	Item 4.6	Short-Term Investments		0	0	0	0	0	0	0	XXX	XXX
342	Part 2B	Item 4.7	Derivative Instruments		0	0	0	0	0	0	0	XXX	XXX
343													
344													

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name				BI Liab	XXX						Input Sheet
2	Group NAIC #:	#				PD Liab							Section A
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
348	Exhibit 6												
348	All data on Exhibit 6 is for New Jersey only.												
347						0000 (Estimated)	-1	-2	-3	-4	-5	-6	-7
349	Calendar Year ending 3/31												
349	Cumulative AIRE Allocation Received												
349	Part 1	AY -1, Received through CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
350	Part 1	AY -2, Received through CY	XXX	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
351	Part 1	AY -3, Received through CY	XXX	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
352	Part 1	AY -4, Received through CY	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
353	Part 1	AY -5, Received through CY	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
354	Part 1	AY -6, Received through CY	XXX	0	0	0	0	0	0	XXX	XXX	XXX	XXX
355	Part 1	AY -7, Received through CY	XXX	0	0	0	0	0	0	0	0	XXX	XXX
356	Part 1	AY -8, Received through CY	XXX	0	0	0	0	0	0	0	0	0	0
357													
358	Cumulative AIRE Investment Income Received												
358	Part 1	AY -1, Received through CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
359	Part 1	AY -2, Received through CY	XXX	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
360	Part 1	AY -3, Received through CY	XXX	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
361	Part 1	AY -4, Received through CY	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
362	Part 1	AY -5, Received through CY	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
363	Part 1	AY -6, Received through CY	XXX	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
364	Part 1	AY -7, Received through CY	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX
365	Part 1	AY -8, Received through CY	XXX	0	0	0	0	0	0	0	0	XXX	XXX
366	Part 1	AY -8, Received through CY	XXX	0	0	0	0	0	0	0	0	0	0
367													
368	Cumulative AIRE Assessment Paid												
368	Part 3	AY -1, Paid through CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
369	Part 3	AY -2, Paid through CY	XXX	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
370	Part 3	AY -3, Paid through CY	XXX	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
371	Part 3	AY -4, Paid through CY	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
372	Part 3	AY -5, Paid through CY	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
373	Part 3	AY -6, Paid through CY	XXX	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
374	Part 3	AY -6, Paid through CY	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX
375	Part 3	AY -7, Paid through CY	XXX	0	0	0	0	0	0	0	0	XXX	XXX
376	Part 3	AY -8, Paid through CY	XXX	0	0	0	0	0	0	0	0	0	0
377													
378													

	A	B	C	D	E	F	G	H	I	J	K	L	M	
1	Group Name:	Name				BI Liab	XXX						Input Sheet	
2	Group NAIC #:	#				PD Liab							Section A	
3	Company Name:	Name				PIP								
4	Company NAIC #:	#				Phys Dam								
5	Year Filed:	0				TOTAL								
6														
7														
425	Exhibit 8 - Part 1													
426	All data on Exhibit 8 is for NJ only, for all coverages combined.													
427													Calendar Year Extraordinary Loss Incurred	
428	Extraordinary Loss Incurred					0	-1	-2	-3	-4	-5	-6	-7	-8
429	Item 1					0	0	0	0	0	0	0	0	0
430														
431	Extraordinary Loss Carryforward Used													
432	Item 2.1	In AY -1				0	0	0	0	0	0	0	0	0
433	Item 2.2	In AY -2				0	0	0	0	0	0	0	0	0
434	Item 2.3	In AY -3				0	0	0	0	0	0	0	0	0
435	Item 2.4	In AY -4	XXX			0	0	0	0	0	0	0	0	0
436	Item 2.5	In AY -5	XXX			0	0	0	0	0	0	0	0	0
437	Item 2.6	In AY -6	XXX	XXX		0	0	0	0	0	0	0	0	0
438	Item 2.7	In AY -7	XXX	XXX	XXX		0	0	0	0	0	0	0	0
439	Item 2.8	In AY -8	XXX	XXX	XXX	XXX		XXX	0	0	0	0	0	0
440	Item 2.9	In AY -9	XXX	XXX	XXX	XXX	XXX		XXX	0	0	0	0	0
441	Item 2.10	In AY -10	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0	0	0	0
442	Item 2.11	In AY -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0	0	0
443														
444														
445														
446														
447	Extraordinary Loss Incurred						-9	-10	-11	-12	-13	-14	-15	-16
448	Item 1					0	0	0	0	0	0	0	0	0
449	Extraordinary Loss Carryforward Used													
450	Item 2.1	In AY -1				0	0	0	0	0	0	0	0	0
451	Item 2.2	In AY -2				0	0	0	0	0	0	0	0	0
452	Item 2.3	In AY -3				0	0	0	0	0	0	0	0	0
453	Item 2.4	In AY -4				0	0	0	0	0	0	0	0	0
454	Item 2.5	In AY -5				0	0	0	0	0	0	0	0	0
455	Item 2.6	In AY -6				0	0	0	0	0	0	0	0	0
456	Item 2.7	In AY -7				0	0	0	0	0	0	0	0	0
457	Item 2.8	In AY -8				0	0	0	0	0	0	0	0	0
458	Item 2.9	In AY -9				0	0	0	0	0	0	0	0	0
459	Item 2.10	In AY -10				0	0	0	0	0	0	0	0	0
460	Item 2.11	In AY -11				0	0	0	0	0	0	0	0	0
461	Item 2.12	In AY -12				0	0	0	0	0	0	0	0	0
462	Item 2.13	In AY -13				0	0	0	0	0	0	0	0	0
463	Item 2.14	In AY -14	XXX			0	0	0	0	0	0	0	0	0
464	Item 2.15	In AY -15	XXX	XXX		0	0	0	0	0	0	0	0	0
465	Item 2.16	In AY -16	XXX	XXX	XXX		XXX	0	0	0	0	0	0	0
466	Item 2.17	In AY -17	XXX	XXX	XXX	XXX		XXX	0	0	0	0	0	0
467	Item 2.18	In AY -18	XXX	XXX	XXX	XXX	XXX		XXX	0	0	0	0	0
468	Item 2.19	In AY -19	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	0	0	0
469														

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A	B	C	D	E	F	G	H	I	J	K	L	M
1	Group Name:	Name			BI Liab	XXX						Input Sheet
2	Group NAIC #:	#			PD Liab							Section A
3	Company Name:	Name			PIP							
4	Company NAIC #:	#			Phys Dam							
5	Year Filed:	0			TOTAL							
6												
7												
470	Exhibit 8 - Part 2											
471				0	-1	-2	-3	-4	-5	-6	-7	-8
472	Reinvestment into New Jersey											
473	Item 1			0	0	0	0	0	0	0	0	0
474												
475	Reinvestment Carryforward Used											
476	Item 5.1	in AY -1		0	0	0	0	0	0	0	0	0
477	Item 5.2	in AY -2		0	0	0	0	0	0	0	0	0
478	Item 5.3	in AY -3		0	0	0	0	0	0	0	0	0
479	Item 5.4	in AY -4	XXX	0	0	0	0	0	0	0	0	0
480	Item 5.5	in AY -5	XXX	XXX	0	0	0	0	0	0	0	0
481	Item 5.6	in AY -6	XXX	XXX	XXX	0	0	0	0	0	0	0
482	Item 5.7	in AY -7	XXX	XXX	XXX	XXX	0	0	0	0	0	0
483	Item 5.8	in AY -8	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
484	Item 5.9	in AY -9	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
485	Item 5.10	in AY -10	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
486	Item 5.11	in AY -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
487												
488												
489												
490	Reinvestment into New Jersey											
491	Item 1			0	0	0	0	0	0	0	0	0
492												
493	Reinvestment Carryforward Used											
494	Item 5.1	in AY -1		0	0	0	0	0	0	0	0	0
495	Item 5.2	in AY -2		0	0	0	0	0	0	0	0	0
496	Item 5.3	in AY -3		0	0	0	0	0	0	0	0	0
497	Item 5.4	in AY -4		0	0	0	0	0	0	0	0	0
498	Item 5.5	in AY -5		0	0	0	0	0	0	0	0	0
499	Item 5.6	in AY -6		0	0	0	0	0	0	0	0	0
500	Item 5.7	in AY -7		0	0	0	0	0	0	0	0	0
501	Item 5.8	in AY -8		0	0	0	0	0	0	0	0	0
502	Item 5.9	in AY -9		0	0	0	0	0	0	0	0	0
503	Item 5.10	in AY -10		0	0	0	0	0	0	0	0	0
504	Item 5.11	in AY -11		0	0	0	0	0	0	0	0	0
505	Item 5.12	in AY -12		0	0	0	0	0	0	0	0	0
506	Item 5.13	in AY -13	XXX	0	0	0	0	0	0	0	0	0
507	Item 5.14	in AY -14	XXX	XXX	0	0	0	0	0	0	0	0
508	Item 5.15	in AY -15	XXX	XXX	XXX	0	0	0	0	0	0	0
509	Item 5.16	in AY -16	XXX	XXX	XXX	XXX	0	0	0	0	0	0
510	Item 5.17	in AY -17	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
511	Item 5.18	in AY -18	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
512	Item 5.19	in AY -19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
513												
514	Exhibit 9											
515	Item 19b	Pre-Tax Profit & Contingencies Provision		5.4%		(from last approved rate filing)						
516	Item 26	Holding Company System (Y or N)		N								

	A	B	C	D	E	F	G	H	I	J
1	Group Name:	Name				BI Liab	XXX			Exhibit 1A
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Calendar Year -1		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
8			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
9			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
10			Premium	Premium	Business	Premium	Losses	Losses	Losses	
11	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
12	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
13	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
14	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
15										
16	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
17	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
18										
19										
20				Col (8)	Col (9)	Col (10)				
21				Direct	Direct	Direct				
22				Paid	Incurred	Unpaid				
23				ALAE	ALAE	ALAE				
24	Item 1	Source: Statutory Page 14		0	0	0				
25	Item 2	Total Exclusions		0	0	0				
26	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
27										
28										

	A	B	C	D	E	F	G	H	I	J
57	Group Name:	Name				BI Liab	XXX			Exhibit 1A
58	Group NAIC #:	#				PD Liab				Sheet 3
59	Company Name:	Name				PIP				
60	Company NAIC #:	#				Phys Dam				
61	Year Filed:	0				TOTAL				
62										
63	Calendar Year -3		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
64			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
65			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	Unpaid
66			Premium	Premium	Business	Premium	Losses	Losses	Losses	Losses
67	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
68	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
69	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
70	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
71										
72	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
73	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
74										
75										
76				Col (8)	Col (9)	Col (10)				
77				Direct	Direct	Direct				
78				Paid	Incurred	Unpaid				
79				ALAE	ALAE	ALAE				
80	Item 1	Source: Statutory Page 14		0	0	0				
81	Item 2	Total Exclusions		0	0	0				
82	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
83										
84										

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	A	B	C	D	E	F	G	H	I	J
85	Group Name:	Name				BI Liab	XXX			Exhibit 1A
86	Group NAIC #:	#				PD Liab				Sheet 4
87	Company Name:	Name				PIP				
88	Company NAIC #:	#				Phys Dam				
89	Year Filed:	0				TOTAL				
90										
91	Calendar Year -4			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
92				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
93				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
94				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
95	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
96	Item 2	Total Exclusions		0	0	0	0	0	0	0
97	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
98	Item 4	UCJF Assessments & Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX
99										
100	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
101	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
102										
103										
104					Col (8)	Col (9)	Col (10)			
105					Direct	Direct	Direct			
106					Paid	Incurred	Unpaid			
107					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
108	Item 1	Source: Statutory Page 14			0	0	0			
109	Item 2	Total Exclusions			0	0	0			
110	Item 3	Excess Profit Data (Item 1 - Item 2)			0	0	0			
111										
112										

	A	B	C	D	E	F	G	H	I	J
113	Group Name:	Name				BI Liab	XXX			Exhibit 1A
114	Group NAIC #:	#				PD Liab				Sheet 5
115	Company Name:	Name				PIP				
116	Company NAIC #:	#				Phys Dam				
117	Year Filed:	0				TOTAL				
118										
119	Calendar Year -5		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
120			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
121			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	Direct
122			Premium	Premium	Business	Premium	Losses	Losses	Losses	Losses
123	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
124	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
125	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
126	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
127										
128	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
129	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
130										
131										
132				Col (8)	Col (9)	Col (10)				
133				Direct	Direct	Direct				
134				Paid	Incurred	Unpaid				
135				ALAE	ALAE	ALAE				
136	Item 1	Source: Statutory Page 14	0	0	0	0				
137	Item 2	Total Exclusions	0	0	0	0				
138	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
139										
140										

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169	Group Name:	Name				BI Liab	XXX				Exhibit 1A
170	Group NAIC #:	#				PD Liab					Sheet 7
171	Company Name:	Name				PIP					
172	Company NAIC #:	#				Phys Dam					
173	Year Filed:	0				TOTAL					
174											
175	Calendar Year -7		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)		
176			Direct	Direct	Dividends	Direct	Direct	Direct	Direct		
177			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid		
178			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>		
179	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0		0
180	Item 2	Total Exclusions	0	0	0	0	0	0	0		0
181	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0		0
182	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
183											
184	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX		XXX
185	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX		XXX
186											
187											
188				Col (8)	Col (9)	Col (10)					
189				Direct	Direct	Direct					
190				Paid	Incurred	Unpaid					
191				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>					
192	Item 1	Source: Statutory Page 14		0	0	0					
193	Item 2	Total Exclusions		0	0	0					
194	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0					
195											
196											

	A	B	C	D	E	F	G	H	I	J
197	Group Name:	Name				BI Liab	XXX			Exhibit 1A
198	Group NAIC #:	#				PD Liab				Sheet 8
199	Company Name:	Name				PIP				
200	Company NAIC #:	#				Phys Dam				
201	Year Filed:	0				TOTAL				
202										
203	Calendar Year -8			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
204				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
205				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
206				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
207	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
208	Item 2	Total Exclusions		0	0	0	0	0	0	0
209	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
210	Item 4	UCJF Assessments & Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX
211										
212	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
213	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
214										
215										
216					Col (8)	Col (9)	Col (10)			
217					Direct	Direct	Direct			
218					Paid	Incurred	Unpaid			
219					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
220	Item 1	Source: Statutory Page 14		0	0	0	0			
221	Item 2	Total Exclusions		0	0	0	0			
222	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
223										
224										

	A	B	C	D	E	F	G	H	I	J
225	Group Name:	Name				BI Liab	XXX			Exhibit 1A
226	Group NAIC #:	#				PD Liab				Sheet 9
227	Company Name:	Name				PIP				
228	Company NAIC #:	#				Phys Dam				
229	Year Filed:	0				TOTAL				
230										
231	Calendar Year -9			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
232				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
233				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
234				Premium	Premium	Business	Premium	Losses	Losses	Losses
235	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
236	Item 2	Total Exclusions		0	0	0	0	0	0	0
237	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
238	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
239										
240	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
241	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
242										
243										
244					Col (8)	Col (9)	Col (10)			
245					Direct	Direct	Direct			
246					Paid	Incurred	Unpaid			
247					ALAE	ALAE	ALAE			
248	Item 1	Source: Statutory Page 14		0	0	0	0			
249	Item 2	Total Exclusions		0	0	0	0			
250	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
251										
252										

	A	B	C	D	E	F	G	H	I	J
1	Group Name:	Name				BI Liab	XXX			Exhibit 2A
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
8	Calendar Year -1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
9		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
10	<u>Accident Year</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>	<u>@ 12/31-01</u>
11	-1	0	0	0	0	0	0	0	0	0
12	-2	0	0	0	0	0	0	0	0	0
13	-3	0	0	0	0	0	0	0	0	0
14	-4	0	0	0	0	0	0	0	0	0
15	-5	0	0	0	0	0	0	0	0	0
16	-6	0	0	0	0	0	0	0	0	0
17	-7	0	0	0	0	0	0	0	0	0
18	-8	0	0	0	0	0	0	0	0	0
19	-9	0	0	0	0	0	0	0	0	0
20	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
21	Total	0	0	0	0	0	0	0	0	0
22										
23	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
24	Calendar Qtr 0-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
25		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
26	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
27	0	0	0	0	0	0	0	0	0	0
28	-1	0	0	0	0	0	0	0	0	0
29	-2	0	0	0	0	0	0	0	0	0
30	-3	0	0	0	0	0	0	0	0	0
31	-4	0	0	0	0	0	0	0	0	0
32	-5	0	0	0	0	0	0	0	0	0
33	-6	0	0	0	0	0	0	0	0	0
34	-7	0	0	0	0	0	0	0	0	0
35	-8	0	0	0	0	0	0	0	0	0
36	-9	0	0	0	0	0	0	0	0	0
37	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
38	Total	0	0	0	0	0	0	0	0	0
39										
40	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
41	<u>Calendar Year</u>	<u>Incurred Loss</u>	<u>Incurred ALAE</u>	<u>Inc. Loss+ALAE</u>	<u>Incurred ULAE</u>	<u>ULAE Ratio</u>				
42	-1	0	0	0	0	0.000				
43	-2	0	0	0	0	0.000				
44	-3	0	0	0	0	0.000				
45	Average					0.000				
46	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
47										
48										

49	Group Name:	Name				BI Liab	XXX			Exhibit 2A
50	Group NAIC #:	#				PD Liab				Sheet 2
51	Company Name:	Name				PIP				
52	Company NAIC #:	#				Phys Dam				
53	Year Filed:	0				TOTAL				
54										
55	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
56	Calendar Year -2	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
57		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
58	<u>Accident Year</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>
59	-2	0	0	0	0	0	0	0	0	0
60	-3	0	0	0	0	0	0	0	0	0
61	-4	0	0	0	0	0	0	0	0	0
62	-5	0	0	0	0	0	0	0	0	0
63	-6	0	0	0	0	0	0	0	0	0
64	-7	0	0	0	0	0	0	0	0	0
65	-8	0	0	0	0	0	0	0	0	0
66	-9	0	0	0	0	0	0	0	0	0
67	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
68	Total	0	0	0	0	0	0	0	0	0
69										
70	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
71	Calendar Qtr -1-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
72		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
73	<u>Accident Year</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>
74	-1	0	0	0	0	0	0	0	0	0
75	-2	0	0	0	0	0	0	0	0	0
76	-3	0	0	0	0	0	0	0	0	0
77	-4	0	0	0	0	0	0	0	0	0
78	-5	0	0	0	0	0	0	0	0	0
79	-6	0	0	0	0	0	0	0	0	0
80	-7	0	0	0	0	0	0	0	0	0
81	-8	0	0	0	0	0	0	0	0	0
82	-9	0	0	0	0	0	0	0	0	0
83	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
84	Total	0	0	0	0	0	0	0	0	0
85										
86	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
87	<u>Calendar Year</u>	<u>Incurred Loss</u>	<u>Incurred ALAE</u>	<u>Inc. Loss+ALAE</u>	<u>Incurred ULAE</u>	<u>ULAE Ratio</u>				
88	-2	0	0	0	0	0.000				
89	-3	0	0	0	0	0.000				
90	-4	0	0	0	0	0.000				
91	Average					0.000				
92	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
93										
94										

	A	B	C	D	E	F	G	H	I	J
95	Group Name:	Name				BI Liab	XXX			Exhibit 2A
96	Group NAIC #:	#				PD Liab				Sheet 3
97	Company Name:	Name				PIP				
98	Company NAIC #:	#				Phys Dam				
99	Year Filed:	0				TOTAL				
100										
101	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
102	Calendar Year -3	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
103		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
104	<u>Accident Year</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>
105	-3	0	0	0	0	0	0	0	0	0
106	-4	0	0	0	0	0	0	0	0	0
107	-5	0	0	0	0	0	0	0	0	0
108	-6	0	0	0	0	0	0	0	0	0
109	-7	0	0	0	0	0	0	0	0	0
110	-8	0	0	0	0	0	0	0	0	0
111	-9	0	0	0	0	0	0	0	0	0
112	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
113	Total	0	0	0	0	0	0	0	0	0
114										
115	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
116	Calendar Qtr -2-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
117		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
118	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
119	-2	0	0	0	0	0	0	0	0	0
120	-3	0	0	0	0	0	0	0	0	0
121	-4	0	0	0	0	0	0	0	0	0
122	-5	0	0	0	0	0	0	0	0	0
123	-6	0	0	0	0	0	0	0	0	0
124	-7	0	0	0	0	0	0	0	0	0
125	-8	0	0	0	0	0	0	0	0	0
126	-9	0	0	0	0	0	0	0	0	0
127	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
128	Total	0	0	0	0	0	0	0	0	0
129										
130	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
131	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
132	-3	0	0	0	0	0.000				
133	-4	0	0	0	0	0.000				
134	-5	0	0	0	0	0.000				
135	Average					0.000				
136	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
137										
138										

	A	B	C	D	E	F	G	H	I	J
139	Group Name:	Name				BI Liab	XXX			Exhibit 2A
140	Group NAIC #:	#				PD Liab				Sheet 4
141	Company Name:	Name				PIP				
142	Company NAIC #:	#				Phys Dam				
143	Year Filed:	0				TOTAL				
144										
145	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
146	Calendar Year -4	Incremental Paid Loss	Cumulative Paid Loss	Case Unpaid Loss	Case Incurred Loss	Incremental Paid ALAE	Cumulative Paid ALAE	Case Unpaid ALAE	Case Incurred ALAE	Case Incurred Loss+ALAE
147										
148	<u>Accident Year</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>
149	-4	0	0	0	0	0	0	0	0	0
150	-5	0	0	0	0	0	0	0	0	0
151	-6	0	0	0	0	0	0	0	0	0
152	-7	0	0	0	0	0	0	0	0	0
153	-8	0	0	0	0	0	0	0	0	0
154	-9	0	0	0	0	0	0	0	0	0
155	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
156	Total	0	0	0	0	0	0	0	0	0
157										
158	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
159	Calendar Qtr -3-1	Incremental Paid Loss	Cumulative Paid Loss	Case Unpaid Loss	Case Incurred Loss	Incremental Paid ALAE	Cumulative Paid ALAE	Case Unpaid ALAE	Case Incurred ALAE	Case Incurred Loss+ALAE
160										
161	<u>Accident Year</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>
162	-3	0	0	0	0	0	0	0	0	0
163	-4	0	0	0	0	0	0	0	0	0
164	-5	0	0	0	0	0	0	0	0	0
165	-6	0	0	0	0	0	0	0	0	0
166	-7	0	0	0	0	0	0	0	0	0
167	-8	0	0	0	0	0	0	0	0	0
168	-9	0	0	0	0	0	0	0	0	0
169	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
170	Total	0	0	0	0	0	0	0	0	0
171										
172	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
173	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
174	-4	0	0	0	0	0.000				
175	-5	0	0	0	0	0.000				
176	-6	0	0	0	0	0.000				
177	Average					0.000				
178	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
179										
180										

3-90.37

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	A	B	C	D	E	F	G	H	I	J
181	Group Name:	Name				BI Liab	XXX			Exhibit 2A
182	Group NAIC #:	#				PD Liab				Sheet 5
183	Company Name:	Name				PIP				
184	Company NAIC #:	#				Phys Dam				
185	Year Filed:	0				TOTAL				
186										
187	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
188	Calendar Year -5	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
189		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
190	<u>Accident Year</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>
191	-5	0	0	0	0	0	0	0	0	0
192	-6	0	0	0	0	0	0	0	0	0
193	-7	0	0	0	0	0	0	0	0	0
194	-8	0	0	0	0	0	0	0	0	0
195	-9	0	0	0	0	0	0	0	0	0
196	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
197	Total	0	0	0	0	0	0	0	0	0
198										
199	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
200	Calendar Qtr -4-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
201		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
202	<u>Accident Year</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>
203	-4	0	0	0	0	0	0	0	0	0
204	-5	0	0	0	0	0	0	0	0	0
205	-6	0	0	0	0	0	0	0	0	0
206	-7	0	0	0	0	0	0	0	0	0
207	-8	0	0	0	0	0	0	0	0	0
208	-9	0	0	0	0	0	0	0	0	0
209	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
210	Total	0	0	0	0	0	0	0	0	0
211										
212	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
213	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
214	-5	0	0	0	0	0.000				
215	-6	0	0	0	0	0.000				
216	-7	0	0	0	0	0.000				
217	Average					0.000				
218	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
219										
220										

221	Group Name:	Name				BI Liab	XXX			Exhibit 2A
222	Group NAIC #:	#				PD Liab				Sheet 6
223	Company Name:	Name				PIP				
224	Company NAIC #:	#				Phys Dam				
225	Year Filed:	0				TOTAL				
226										
227	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
228	Calendar Year -6	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
229		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
230	<u>Accident Year</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>
231	-6	0	0	0	0	0	0	0	0	0
232	-7	0	0	0	0	0	0	0	0	0
233	-8	0	0	0	0	0	0	0	0	0
234	-9	0	0	0	0	0	0	0	0	0
235	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
236	Total	0	0	0	0	0	0	0	0	0
237										
238	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
239	Calendar Qtr -5-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
240		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
241	<u>Accident Year</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>
242	-5	0	0	0	0	0	0	0	0	0
243	-6	0	0	0	0	0	0	0	0	0
244	-7	0	0	0	0	0	0	0	0	0
245	-8	0	0	0	0	0	0	0	0	0
246	-9	0	0	0	0	0	0	0	0	0
247	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
248	Total	0	0	0	0	0	0	0	0	0
249										
250	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
251	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
252	-6	0	0	0	0	0.000				
253	-7	0	0	0	0	0.000				
254	-8	0	0	0	0	0.000				
255	Average					0.000				
256	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
257										
258										

3-90.39

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259	Group Name:	Name				BI Liab	XXX			Exhibit 2A
260	Group NAIC #:	#				PD Liab				Sheet 7
261	Company Name:	Name				PIP				
262	Company NAIC #:	#				Phys Dam				
263	Year Filed:	0				TOTAL				
264										
265	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
266	Calendar Year -7,	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
267		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
268	<u>Accident Year</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>	<u>@ 12/31/07</u>
269	-7	0	0	0	0	0	0	0	0	0
270	-8	0	0	0	0	0	0	0	0	0
271	-9	0	0	0	0	0	0	0	0	0
272	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
273	Total	0	0	0	0	0	0	0	0	0
274										
275	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
276	Calendar Qtr -6-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
277		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
278	<u>Accident Year</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>	<u>@ 3/31/06</u>
279	-6	0	0	0	0	0	0	0	0	0
280	-7	0	0	0	0	0	0	0	0	0
281	-8	0	0	0	0	0	0	0	0	0
282	-9	0	0	0	0	0	0	0	0	0
283	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
284	Total	0	0	0	0	0	0	0	0	0
285										
286	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
287	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
288	-7	0	0	0	0	0.000				
289	-8	0	0	0	0	0.000				
290	-9	0	0	0	0	0.000				
291	Average					0.000				
292	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
293										
294										

295	Group Name:	Name				BI Liab	XXX			Exhibit 2A
296	Group NAIC #:	#				PD Liab				Sheet B
297	Company Name:	Name				PIP				
298	Company NAIC #:	#				Phys Dam				
299	Year Filed:	0				TOTAL				
300										
301	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
302	Calendar Year -8	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
303		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
304	<u>Accident Year</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>
305	-8	0	0	0	0	0	0	0	0	0
306	-9	0	0	0	0	0	0	0	0	0
307	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
308	Total	0	0	0	0	0	0	0	0	0
309										
310	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
311	Calendar Qtr -7-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
312		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
313	<u>Accident Year</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>
314	-7	0	0	0	0	0	0	0	0	0
315	-8	0	0	0	0	0	0	0	0	0
316	-9	0	0	0	0	0	0	0	0	0
317	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
318	Total	0	0	0	0	0	0	0	0	0
319										
320										

3-90.41

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	A	B	C	D	E	F	G	H	I	J
321	Group Name:	Name				BI Liab	XXX			Exhibit 2A
322	Group NAIC #:	#				PD Liab				Sheet 9
323	Company Name:	Name				PIP				
324	Company NAIC #:	#				Phys Dam				
325	Year Filed:	0				TOTAL				
326										
327	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
328	Calendar Year -9	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
329		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
330	<u>Accident Year</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>
331	-9	0	0	0	0	0	0	0	0	0
332	<u>-10 & prior</u>	0	0	0	0	0	0	0	0	0
333	Total	0	0	0	0	0	0	0	0	0
334										
335	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
336	Calendar Qtr -8-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
337		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
338	<u>Accident Year</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>
339	-8	0	0	0	0	0	0	0	0	0
340	-9	0	0	0	0	0	0	0	0	0
341	<u>-10 & prior</u>	0	0	0	0	0	0	0	0	0
342	Total	0	0	0	0	0	0	0	0	0

	A	B	C	D	E	F	G	H	I	J	K	L		
1	Group Name:	Name				BI Liab	XXX					Exhibit 3A		
2	Group NAIC #:	#				PD Liab								
3	Company Name:	Name				PIP								
4	Company NAIC #:	#				Phys Dam								
5	Year Filed:	0				TOTAL								
6														
7														
8	Part 1													
9	Cumulative													
10	Case Incurred													
11	Loss + ALAE	Accident Year												
12	as of	-9	-8	-7	-6	-5	-4	-3	-2	-1				
13	15 months	0	0	0	0	0	0	0	0	0				
14	27 months	0	0	0	0	0	0	0	0	0				
15	39 months	0	0	0	0	0	0	0	0	0				
16	51 months	0	0	0	0	0	0	0	0	0				
17	63 months	0	0	0	0	0	0	0	0	0				
18	75 months	0	0	0	0	0	0	0	0	0				
19	87 months	0	0	0	0	0	0	0	0	0				
20	99 months	0	0	0	0	0	0	0	0	0				
21														
22	Part 2													
23	Development	Accident Year										Col (A)	Col (B)	
24	Factors	-9	-8	-7	-6	-5	-4	-3	-2			Incremental	Development	Cumulative
25	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		LDF	Factors	LDF
26	27-39 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	15 mo. - ult.	1.000
27	39-51 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	27 mo. - ult.	1.000
28	51-63 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	39 mo. - ult.	1.000
29	63-75 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	51 mo. - ult.	1.000
30	75-87 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	63 mo. - ult.	1.000
31	87-99 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		1.000	75 mo. - ult.	1.000
32												1.000	87 mo. - ult.	1.000
33												1.000	99 mo. - ult.	1.000
34	Part 3													
35		Col (1)	Col (2)	Col (3)										
36		Case Incurred	Loss + ALAE	Projected										
37		Loss + ALAE	Development	Ultimate										
38	Accident Year	@ 3/31/00	Factor	Loss + ALAE	@ 3/31/00									
39	-1	0	1.000	0	0									
40	-2	0	1.000	0	0									
41	-3	0	1.000	0	0									
42	-4	0	1.000	0	0									
43	-5	0	1.000	0	0									
44	-6	0	1.000	0	0									
45	-7	0	1.000	0	0									

3-90.43

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	A	B	C	D	E	F	G
1	Group Name:	Name		BI Liab		XXX	Exhibit 4A
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
7				Part 1 - Countrywide		Part 2 - New Jersey	
8				Insurance Expense Exhibit		Statutory Page 14	
9				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
10		<u>Calendar Year -1</u>					
11	Item 1	Direct Written Premium	\$0			\$0	
12	Item 2	Direct Earned Premium	0			0	
13	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
14	Item 4	Direct General Expense	0	0.00%		0	0.00%
15	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
16	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
17	Item 6b	Allowable Capped Expense	--	--		0	24.40%
18	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
19	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
20	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
21	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
22	Item 10	LAD Fees Paid	--	--		0	0.00%
23							
24				Part 1 - Countrywide		Part 2 - New Jersey	
25				Insurance Expense Exhibit		Statutory Page 14	
26				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
27		<u>Calendar Year -2</u>					
28	Item 1	Direct Written Premium	\$0			\$0	
29	Item 2	Direct Earned Premium	0			0	
30	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
31	Item 4	Direct General Expense	0	0.00%		0	0.00%
32	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
33	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
34	Item 6b	Allowable Capped Expense	--	--		0	24.40%
35	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
36	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
37	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
38	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
39	Item 10	LAD Fees Paid	--	--		0	0.00%
40							
41				Part 1 - Countrywide		Part 2 - New Jersey	
42				Insurance Expense Exhibit		Statutory Page 14	
43				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
44		<u>Calendar Year -3</u>					
45	Item 1	Direct Written Premium	\$0			\$0	
46	Item 2	Direct Earned Premium	0			0	
47	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
48	Item 4	Direct General Expense	0	0.00%		0	0.00%
49	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
50	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
51	Item 6b	Allowable Capped Expense	--	--		0	24.40%
52	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
53	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
54	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
55	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
56	Item 10	LAD Fees Paid	--	--		0	0.00%
57							

	A	B	C	D	E	F	G
1	Group Name:	Name		BI Liab		XXX	Exhibit 4A
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
58				Part 1 - Countrywide		Part 2 - New Jersey	
59				Insurance Expense Exhibit		Statutory Page 14	
60				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
61		<u>Calendar Year -4</u>					
62	Item 1	Direct Written Premium		\$0		\$0	
63	Item 2	Direct Earned Premium		0		0	
64	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
65	Item 4	Direct General Expense		0	0.00%	0	0.00%
66	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
67	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
68	Item 6b	Allowable Capped Expense		--	--	0	24.40%
69	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
70	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
71	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
72	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
73	Item 10	LAD Fees Paid		--	--	0	0.00%
74							
75				Part 1 - Countrywide		Part 2 - New Jersey	
76				Insurance Expense Exhibit		Statutory Page 14	
77				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
78		<u>Calendar Year -5</u>					
79	Item 1	Direct Written Premium		\$0		\$0	
80	Item 2	Direct Earned Premium		0		0	
81	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
82	Item 4	Direct General Expense		0	0.00%	0	0.00%
83	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
84	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
85	Item 6b	Allowable Capped Expense		--	--	0	24.40%
86	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
87	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
88	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
89	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
90	Item 10	LAD Fees Paid		--	--	0	0.00%
91							
92				Part 1 - Countrywide		Part 2 - New Jersey	
93				Insurance Expense Exhibit		Statutory Page 14	
94				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
95		<u>Calendar Year -6</u>					
96	Item 1	Direct Written Premium		\$0		\$0	
97	Item 2	Direct Earned Premium		0		0	
98	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
99	Item 4	Direct General Expense		0	0.00%	0	0.00%
100	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
101	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
102	Item 6b	Allowable Capped Expense		--	--	0	24.40%
103	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
104	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
105	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
106	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
107	Item 10	LAD Fees Paid		--	--	0	0.00%
108							

	A	B	C	D	E	F	G
1	Group Name:	Name		BI Liab		XXX	Exhibit 4A
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
109			Part 1 - Countrywide			Part 2 - New Jersey	
110			Insurance Expense Exhibit			Statutory Page 14	
111			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
112		<u>Calendar Year -7</u>					
113	Item 1	Direct Written Premium	\$0			\$0	
114	Item 2	Direct Earned Premium	0			0	
115	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
116	Item 4	Direct General Expense	0	0.00%		0	0.00%
117	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
118	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
119	Item 6b	Allowable Capped Expense	--	--		0	24.40%
120	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
121	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
122	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
123	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
124	Item 10	LAD Fees Paid	--	--		0	0.00%

	A	B	C	D	E	F	G	H	I
1	Group Name:	Name			BI Liab	XXX			Exhibit 5A
2	Group NAIC #:	#			PD Liab				Part 1
3	Company Name:	Name			PIP				
4	Company NAIC #:	#			Phys Dam				
5	Year Filed:	0			TOTAL				
6									
7									
8	Part 1		-7	-6	-5	-4	-3	-2	-1
9	Item 1	Agents Balances	0	0	0	0	0	0	0
10	Item 2	Unearned Premium Reserve	0	0	0	0	0	0	0
11	Item 3	Agents Balance Ratio [(Item 1 / Item 2)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
12	Item 4	Direct Prepaid Expenses - NJ (Exhibit 4)	0	0	0	0	0	0	0
13	Item 5	Direct Net Written Premium - NJ (Exhibit 4)	0	0	0	0	0	0	0
14	Item 6	Prepaid Expense Ratio [Item 4 / Item 5]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
15	Item 7a	Direct Unearned Premium Reserve - Beginning (Exhibit 1)	0	0	0	0	0	0	0
16	Item 7b	Direct Unearned Premium Reserve - Ending (Exhibit 1)	0	0	0	0	0	0	0
17	Item 7	Average Unearned Premium Reserve [(Item 7a + Item 7b) / 2]	0	0	0	0	0	0	0
18	Item 8	Investable Unearned Premium [Item 7 * (1 - Item 3 - Item 6)]	0	0	0	0	0	0	0
19	Item 9a	Direct Unpaid Loss - Beginning (Exhibit 1)	0	0	0	0	0	0	0
20	Item 9b	Direct Unpaid Loss - Ending (Exhibit 1)	0	0	0	0	0	0	0
21	Item 9	Average Loss Reserve [(Item 9a + Item 9b) / 2]	0	0	0	0	0	0	0
22	Item 10a	Direct Unpaid ALAE - Beginning (Exhibit 1)	0	0	0	0	0	0	0
23	Item 10b	Direct Unpaid ALAE - Ending (Exhibit 1)	0	0	0	0	0	0	0
24	Item 10	Average ALAE Reserve [(Item 10a + Item 10b) / 2]	0	0	0	0	0	0	0
25	Item 11	ULAE Factor (Exhibit 2)	0.000	0.000	0.000	0.000	0.000	0.000	0.000
26	Item 12	Average Loss + LAE Reserve [(Item 9 + Item 10) * Item 11]	0	0	0	0	0	0	0
27	Item 13	Total Reserve [Item 8 + Item 12]	0	0	0	0	0	0	0
28	Item 14	Pre-Tax Rate of Return (Part 2C, Item 8, 3-Yr Total)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
29	Item 15	Actual Investment Income Earned [Item 13 * Item 14]	0	0	0	0	0	0	0

	A	B	C	D	E	F	G	H	I	J	K
1	Group Name:	Name				BI Liab	XXX				Exhibit 6
2	Group NAIC #:	#				PD Liab					Parts 1-3
3	Company Name:	Name				PIP					
4	Company NAIC #:	#				Phys Dam					
5	Year Filed:	0				TOTAL					
6											
7											
8	Part 1										
9	Cumulative										
10	AIRE Allocation plus										
11	Investment Income										
12	Received as of	-8	-7	-6	-5	-4	-3	-2			
13	15 months	0	0	0	0	0	0	0			
14	27 months	0	0	0	0	0	0	0			
15	39 months	0	0	0	0	0					
16	51 months	0	0	0	0						
17	63 months	0	0	0							
18	75 months	0	0								
19	87 months	0									
20											
21	Part 2										
22	Development	Accident Year							Col (A)	Development	Col (B)
23	Factors	-8	-7	-6	-5	-4	-3	Selected	Factors	Projected	
24	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000	
25	27-39 months	1.000	1.000	1.000	1.000	1.000		1.000	0	1.000	
26	39-51 months	1.000	1.000	1.000	1.000			1.000	0	1.000	
27	51-63 months	1.000	1.000	1.000				1.000	0	1.000	
28	63-75 months	1.000	1.000					1.000	0	1.000	
29	75-87 months	1.000						1.000	0	1.000	
30											
31	Part 3										
32		Col (1)	Col (2)	Col (3)							
33		AIRE Allocation		Projected							
34		plus Investment		Ultimate							
35	Accident Year	Income	Development	Allocation plus							
36	-1 (Estimate)	@ 3/31/00	Factor	Investment Income							
37	-2	0	1.000	0							
38	-3	0	1.000	0							
39	-4	0	1.000	0							
40	-5	0	1.000	0							
41	-6	0	1.000	0							
42	-7	0	1.000	0							
43											
44											

	A	B	C	D	E	F	G	H	I	J	K		
45	Group Name:	Name				BI Liab	XXX				Exhibit 6 Parts 4-7		
46	Group NAIC #:	#				PD Liab							
47	Company Name:	Name				PIP							
48	Company NAIC #:	#				Phys Dam							
49	Year Filed:	0				TOTAL							
50													
51	Part 4												
52	AIRE Assessment	Accident Year											
53	Paid as of	-8	-7	-6	-5	-4	-3	-2	-1	0			
54	15 months	0	0	0	0	0	0	0	0	0			
55	27 months	0	0	0	0	0	0	0	0	0			
56	39 months	0	0	0	0	0	0	0	0	0			
57	51 months	0	0	0	0	0	0	0	0	0			
58	63 months	0	0	0	0	0	0	0	0	0			
59	75 months	0	0	0	0	0	0	0	0	0			
60	87 months	0	0	0	0	0	0	0	0	0			
61													
62	Part 5												
63	Development	Accident Year									Col (A)	Col (B)	
64	Factors	-8	-7	-6	-5	-4	-3	-2	-1	0	Selected	Development	Projected
65	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	Factor	Factors	Factor
66	27-39 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000
67	39-51 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000
68	51-63 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000
69	63-75 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000
70	75-87 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0	1.000
71													
72	Part 6												
73		Col (1)	Col (2)	Col (3)									
74		AIRE	Development	Projected									
75	Accident Year	@ 3/31/00	Factor	Ultimate									
76	-1 (Estimate)	0	1.000	Assessment									
77	-2	0	1.000										
78	-3	0	1.000										
79	-4	0	1.000										
80	-5	0	1.000										
81	-6	0	1.000										
82	-7	0	1.000										
83													
84	Part 7												
85	Net AIRE	Col (1)	Col (2)	Col (3)									
86		Projected	Projected	Net									
87		Ultimate	Ultimate	AIRE									
88		Allocation plus	Assessment	(1) - (2)									
89	Accident Year	Investment Income											
90	-1 (Estimate)	0	0										
91	-2	0	0										
92	-3	0	0										
93	-4	0	0										
94	-5	0	0										
95	-6	0	0										
96	-7	0	0										

	A	B	C	D	E	F	G	H	I	J
1	Group Name:		Name					BI Liab	XXX	Exhibit 7A
2	Group NAIC #:		#					PD Liab		Sheet 1
3	Company Name:		Name					PIP		
4	Company NAIC #:		#					Phys Dam		
5	Year Filed:		0					TOTAL		
6										
7										
8			Calendar Year							
9			0	-1	-2	-3	-4	-5	-6	-7
10	Item 1 Excess Profit Paid		0	0	0	0	0	0	0	0
11										
12										
13	Carryforward Used		Calendar Year Excess Profit Paid							
14	for Accident Year		0	-1	-2	-3	-4	-5	-6	-7
15	Item 2.1 -1		0	0	0	0	0	0	0	0
16	Item 2.2 -2		0	0	0	0	0	0	0	0
17	Item 2.3 -3		0	0	0	0	0	0	0	0
18	Item 2.4 -4	XXX		0	0	0	0	0	0	0
19	Item 2.5 -5	XXX	XXX		0	0	0	0	0	0
20	Item 2.6 -6	XXX	XXX	XXX		0	0	0	0	0
21	Item 2.7 -7	XXX	XXX	XXX	XXX		0	0	0	0
22	Item 2.8 -8	XXX	XXX	XXX	XXX	XXX		0	0	0
23	Item 2.9 -9	XXX	XXX	XXX	XXX	XXX	XXX		0	0
24	Item 2.10 -10	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
25	Item 2.11 -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26	Item 2.12 -12	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
27	Item 2.13 -13	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28	Item 2.14 -14	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
29	Item 2.15 -15	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Item 2.16 -16	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31	Item 2.17 -17	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32	Item 2.18 -18	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33	Item 2.19 -19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34										
35	Item 2 Total Carryforward Used		0	0	0	0	0	0	0	0
36										
37	Item 3 Carryforward Unused		0	0	0	0	0	0	0	0

	K	L	M	N	O	P	Q	R	S	T
1	Group Name:	Name						BI Liab	XXX	Exhibit 7A
2	Group NAIC #:	#						PD Liab		Sheet 2
3	Company Name:	Name						PIP		
4	Company NAIC #:	#						Phys Dam		
5	Year Filed:	0						TOTAL		
6										
7										
8	Calendar Year									
9	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
10	0	0	0	0	0	0	0	0	0	0
11										
12										
13	Calendar Year Excess Profit Paid									
14	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
15	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0
23	0	0	0	0	0	0	0	0	0	0
24	0	0	0	0	0	0	0	0	0	0
25	0	0	0	0	0	0	0	0	0	0
26	XXX	0	0	0	0	0	0	0	0	0
27	XXX	XXX	0	0	0	0	0	0	0	0
28	XXX	XXX	XXX	0	0	0	0	0	0	0
29	XXX	XXX	XXX	XXX	0	0	0	0	0	0
30	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
31	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
32	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
34										
35	0	0	0	0	0	0	0	0	0	0
36										
37	0	0	0	0	0	0	0	0	0	0

	A	B	C	D	E	F	G	H	I	J
1	Group Name:	Name			BI Liab	XXX				Exhibit 9A
2	Group NAIC #:	#			PO Liab					
3	Company Name:	Name			PIP					
4	Company NAIC #:	#			Phys Dam					
5	Year Filed:	0			TOTAL					
6										
7			-7	-6	-5	-4	-3	-2	-1	Total
8	Item 1	Direct Calendar Year Written Premium [Exhibit 1A, Col (1), Item 3]	0	0	0	0	0	0	0	0
9	Item 2	Direct Calendar Year Earned Premium [Exhibit 1A, Col (2), Item 3]	0	0	0	0	0	0	0	0
10	Item 3	UCJF Assessment [Exhibit 1A, Col (2), Item 4]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
11	Item 4	Dividends excluding Refund of Excess Profit [Exhibit 1A, Col (3), Item 5b]	0	0	0	0	0	0	0	0
12	Item 5	Net AIRE [Exhibit 6, Part 7, Col (3)]	0	0	0	0	0	0	0	0
13	Item 6	Direct CY Net Earned Premium [Item 2 - Item 3 - Item 4 + Item 5]	0	0	0	0	0	0	0	0
14										
15	Item 7	Direct Accident Year Ultimate Loss & ALAE [Exhibit 3A, Part 3, Col (3)]	0	0	0	0	0	0	0	0
16	Item 8	ULAE Ratio [Exhibit 2A, Part 3, Col (23)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Item 9	Direct Accident Year Ultimate Loss & LAE [Item 7 * Item 6]	0	0	0	0	0	0	0	0
18	Item 10	Direct Accident Year Ultimate Loss & LAE Ratio [Item 9 / Item 6]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
19										
20	Item 11	Direct Commission & Brokerage [Exhibit 4A, Col (3), Item 5]	0	0	0	0	0	0	0	0
21	Item 12	Direct Other Acquisition Expense [Exhibit 4A, Col (3), Item 3]	0	0	0	0	0	0	0	0
22	Item 13	Direct General Expense [Exhibit 4A, Col (3), Item 4]	0	0	0	0	0	0	0	0
23	Item 14	Additional Allowable Efficiency Expense [Exhibit 4A, Col (3), Item 6]	0	0	0	0	0	0	0	0
24	Item 15	Direct Taxes, Licenses & Fees [Exhibit 4A, Col (3), Item 7]	0	0	0	0	0	0	0	0
25	Item 16	Net Catastrophe Reinsurance [Exhibit 4A, Col (3), Item 9]	0	0	0	0	0	0	0	0
26	Item 17	LAD Fees Paid [Exhibit 4A, Col (3), Item 10]	0	0	0	0	0	0	0	0
27	Item 18	Total Expenses [Sum (Item 11 - Item 17)]	0	0	0	0	0	0	0	0
28										
29	Item 19	Underwriting Income [Item 6 - Item 9 - Item 16]	0	0	0	0	0	0	0	0
30	Item 20	Allowance for Pre-Tax Profit & Contingencies [Item 2 * 5.38% Pre-Tax]	0	0	0	0	0	0	0	0
31	Item 21	Actual Investment Income Earned [Exhibit 5A, Part 1, Item 15]	0	0	0	0	0	0	0	0
32	Item 22	Actuarial Gain [Item 19 - Item 20 + Item 21]	0	0	0	0	0	0	0	0
33										
34	Item 23	Total Development Adjustment [Input Sheet]	--	--	--	--	--	--	--	0
35	Item 24	Total Actuarial Gain [Item 22 - Item 23]	--	--	--	--	--	--	--	0
36										
37	Item 25	Additional Non-Excessive Profit Allowance [Item 2 * 3.85% Pre-Tax]	--	--	--	--	--	--	--	0
38	Item 26	Holding Company Non-Excessive Subsidization [Item 2 * 0.5%]	--	--	--	--	--	--	--	0
39	Item 27	Gross Excess Profit / (Loss) [Item 24 - Item 25 - Item 26]	--	--	--	--	--	--	--	0
40										
41	Item 28	Carryforward of Refund of Excess Profit [Exhibit 7A, Item 2]	0	0	0	0	0	0	0	0

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab	XXX						Section B
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
8	Exhibit 1												
9	Source: Annual Statement - NJ Page 14, Line 19.2 (PD)												
10	Note: List data in Exclusions (Items 2a-2f) only if the data is included in Item 1.												
					-1	-2	-3	-4	-5	-6	-7	-8	-9
11	Direct Written Premium												
12	Col (1)	Item 1	Total		0	0	0	0	0	0	0	0	0
13	Col (1)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
14	Col (1)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
15	Col (1)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
16	Col (1)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
17	Col (1)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
18	Col (1)	Item 2f	Finance & Service Charges		0	0	0	0	0	0	0	0	0
19	Col (1)	Item 4	UCJF Assessments		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
20													
21	Direct Earned Premium												
22	Col (2)	Item 1	Total		0	0	0	0	0	0	0	0	0
23	Col (2)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
24	Col (2)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
25	Col (2)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
26	Col (2)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
27	Col (2)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
28	Col (2)	Item 2f	Finance & Service Charges		0	0	0	0	0	0	0	0	0
29	Col (2)	Item 4	UCJF Assessments		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30													
31	Paid Dividends (Incl. Excess Profit Refunds)												
32	Col (3A)	Item 1	Total		0	0	0	0	0	0	0	0	0
33	Col (3A)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
34	Col (3A)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
35	Col (3A)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
36	Col (3A)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
37	Col (3A)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
38													
39	Declared, but Unpaid Dividends (Incl. Excess Profit Refunds)												
40	Col (3B)	Item 1	Total		0	0	0	0	0	0	0	0	0
41	Col (3B)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
42	Col (3B)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
43	Col (3B)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
44	Col (3B)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
45	Col (3B)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
46													
47	Direct Unearned Premium Reserves												
48	Col (4)	Item 1	Total		0	0	0	0	0	0	0	0	0
49	Col (4)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
50	Col (4)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
51	Col (4)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
52	Col (4)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
53	Col (4)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
54													

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	
1	Group Name:		Name											Input Sheet
2	Group NAIC #:		#											Section B
3	Company Name:		Name											
4	Company NAIC #:		#											
5	Year Filed:		0											
6														
7														
55	Direct Paid Loss													
56	Col (5)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
57	Col (5)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
58	Col (5)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
59	Col (5)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
60	Col (5)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
61	Col (5)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
62	Col (5)	Item 4	Excess Medical Benefits	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	
63														
64	Direct Incurred Loss (Case + Bulk/BNR)													
65	Col (6)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
66	Col (6)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
67	Col (6)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
68	Col (6)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
69	Col (6)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
70	Col (6)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
71	Col (6)	Item 4	Excess Medical Benefits	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	
72														
73	Direct Unpaid Loss (Case + Bulk/BNR)													
74	Col (7)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
75	Col (7)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
76	Col (7)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
77	Col (7)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
78	Col (7)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
79	Col (7)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
80	Col (7)	Item 4	Excess Medical Benefits	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	
81														
82	Direct Paid Defense & Cost Containment (ALAE)													
83	Col (8)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
84	Col (8)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
85	Col (8)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
86	Col (8)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
87	Col (8)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
88	Col (8)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
89														
90	Direct Incurred ALAE (Case + Bulk/BNR)													
91	Col (9)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
92	Col (9)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
93	Col (9)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
94	Col (9)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
95	Col (9)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
96	Col (9)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
97														
98	Direct Unpaid ALAE (Case + Bulk/BNR)													
99	Col (10)	Item 1	Total	0	0	0	0	0	0	0	0	0	0	
100	Col (10)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0	
101	Col (10)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0	
102	Col (10)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0	
103	Col (10)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0	
104	Col (10)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0	
105														
106														

3-90.55

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA			
1	Group Name: Name												Input Sheet			
2	Group NAIC #: #												Section B			
3	Company Name: Name															
4	Company NAIC #: #															
5	Year Filed: 0															
6																
7																
107	Exhibit 2 - Part 1															
108	Allocation of Page 14 data (from Exh 1) by Accident Year															
109								Calendar Year Paid Loss								
110								-1	-2	-3	-4	-5	-6	-7	-8	-9
111	Incremental Direct Paid Loss															
112	Col (1)	AY -1, Paid in the CY	0	XXX		XXX		XXX		XXX		XXX		XXX		XXX
113	Col (1)	AY -2, Paid in the CY	0		0	XXX		XXX		XXX		XXX		XXX		XXX
114	Col (1)	AY -3, Paid in the CY	0				0	XXX		XXX		XXX		XXX		XXX
115	Col (1)	AY -4, Paid in the CY	0						0	XXX		XXX		XXX		XXX
116	Col (1)	AY -5, Paid in the CY	0								0	XXX		XXX		XXX
117	Col (1)	AY -6, Paid in the CY	0										0	XXX		XXX
118	Col (1)	AY -7, Paid in the CY	0												0	XXX
119	Col (1)	AY -8, Paid in the CY	0													0
120	Col (1)	AY -9, Paid in the CY	0													
121	Col (1)	AY -10 & prior, Paid in the CY	0													
122	Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
123	Exhibit 1, Col (5)		0	0	0	0	0	0	0	0	0	0	0	0	0	0
124	Direct Unpaid Case Loss															
125	Col (3A)	AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX		XXX		XXX		XXX		XXX
126	Col (3A)	AY -2, Unpaid at the end of CY	0		0	XXX		XXX		XXX		XXX		XXX		XXX
127	Col (3A)	AY -3, Unpaid at the end of CY	0				0	XXX		XXX		XXX		XXX		XXX
128	Col (3A)	AY -4, Unpaid at the end of CY	0						0	XXX		XXX		XXX		XXX
129	Col (3A)	AY -5, Unpaid at the end of CY	0								0	XXX		XXX		XXX
130	Col (3A)	AY -6, Unpaid at the end of CY	0										0	XXX		XXX
131	Col (3A)	AY -7, Unpaid at the end of CY	0												0	XXX
132	Col (3A)	AY -8, Unpaid at the end of CY	0													0
133	Col (3A)	AY -9, Unpaid at the end of CY	0													
134	Col (3A)	AY -10 & prior, Unpaid at the end of CY	0													
135	Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
136	Direct Unpaid Bulk/BNR Loss															
138	Col (3B)	AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX		XXX		XXX		XXX		XXX
139	Col (3B)	AY -2, Unpaid at the end of CY	0		0	XXX		XXX		XXX		XXX		XXX		XXX
140	Col (3B)	AY -3, Unpaid at the end of CY	0				0	XXX		XXX		XXX		XXX		XXX
141	Col (3B)	AY -4, Unpaid at the end of CY	0						0	XXX		XXX		XXX		XXX
142	Col (3B)	AY -5, Unpaid at the end of CY	0								0	XXX		XXX		XXX
143	Col (3B)	AY -6, Unpaid at the end of CY	0										0	XXX		XXX
144	Col (3B)	AY -7, Unpaid at the end of CY	0												0	XXX
145	Col (3B)	AY -8, Unpaid at the end of CY	0													0
146	Col (3B)	AY -9, Unpaid at the end of CY	0													
147	Col (3B)	AY -10 & prior, Unpaid at the end of CY	0													
148	Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
149																
150	Total Col (3A) + Col (3B)		0	0	0	0	0	0	0	0	0	0	0	0	0	0
151	Exhibit 1, Col (7)		0	0	0	0	0	0	0	0	0	0	0	0	0	0
152																

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab	XXX						Section B
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phya Dam							
5	Year Filed:	0				TOTAL							
6													
7													
153	Incremental Direct Paid ALAE												
154	Col (5)	AY -1, Paid in the CY	0	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX
155	Col (5)	AY -2, Paid in the CY	0		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX
156	Col (5)	AY -3, Paid in the CY	0		0		0	XXX	XXX	XXX	XXX	XXX	XXX
157	Col (5)	AY -4, Paid in the CY	0		0	0	0		XXX	XXX	XXX	XXX	XXX
158	Col (5)	AY -5, Paid in the CY	0		0	0	0	0		XXX	XXX	XXX	XXX
159	Col (5)	AY -6, Paid in the CY	0		0	0	0	0	0	XXX	XXX	XXX	XXX
160	Col (5)	AY -7, Paid in the CY	0		0	0	0	0	0		XXX	XXX	XXX
161	Col (5)	AY -8, Paid in the CY	0		0	0	0	0	0	0		0	XXX
162	Col (5)	AY -9, Paid in the CY	0		0	0	0	0	0	0	0	0	0
163	Col (5)	AY -10 & prior, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
164		Total	0	0	0	0	0	0	0	0	0	0	0
165		Exhibit 1, Col (8)	0	0	0	0	0	0	0	0	0	0	0
166													
167	Direct Unpaid Case ALAE												
168	Col (7A)	AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX
169	Col (7A)	AY -2, Unpaid at the end of CY	0		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX
170	Col (7A)	AY -3, Unpaid at the end of CY	0		0		0	XXX	XXX	XXX	XXX	XXX	XXX
171	Col (7A)	AY -4, Unpaid at the end of CY	0		0	0	0		XXX	XXX	XXX	XXX	XXX
172	Col (7A)	AY -5, Unpaid at the end of CY	0		0	0	0	0		XXX	XXX	XXX	XXX
173	Col (7A)	AY -6, Unpaid at the end of CY	0		0	0	0	0	0		XXX	XXX	XXX
174	Col (7A)	AY -7, Unpaid at the end of CY	0		0	0	0	0	0	0		XXX	XXX
175	Col (7A)	AY -8, Unpaid at the end of CY	0		0	0	0	0	0	0	0		XXX
176	Col (7A)	AY -9, Unpaid at the end of CY	0		0	0	0	0	0	0	0	0	0
177	Col (7A)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
178		Total	0	0	0	0	0	0	0	0	0	0	0
179													
180	Direct Unpaid Bulk/BNR ALAE												
181	Col (7B)	AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX
182	Col (7B)	AY -2, Unpaid at the end of CY	0		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX
183	Col (7B)	AY -3, Unpaid at the end of CY	0		0		0	XXX	XXX	XXX	XXX	XXX	XXX
184	Col (7B)	AY -4, Unpaid at the end of CY	0		0	0	0		XXX	XXX	XXX	XXX	XXX
185	Col (7B)	AY -5, Unpaid at the end of CY	0		0	0	0	0		XXX	XXX	XXX	XXX
186	Col (7B)	AY -6, Unpaid at the end of CY	0		0	0	0	0	0		XXX	XXX	XXX
187	Col (7B)	AY -7, Unpaid at the end of CY	0		0	0	0	0	0	0		XXX	XXX
188	Col (7B)	AY -8, Unpaid at the end of CY	0		0	0	0	0	0	0	0		XXX
189	Col (7B)	AY -9, Unpaid at the end of CY	0		0	0	0	0	0	0	0	0	0
190	Col (7B)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
191		Total	0	0	0	0	0	0	0	0	0	0	0
192													
193		Total Col (7A) + Col (7B)	0	0	0	0	0	0	0	0	0	0	0
194		Exhibit 1, Col (10)	0	0	0	0	0	0	0	0	0	0	0
195													
196													

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	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA		
1	Group Name:	Name				BI Liab								Input Sheet	
2	Group NAIC #:	#				PD Liab		XXX							Section B
3	Company Name:	Name				PIP									
4	Company NAIC #:	#				Phys Dam									
5	Year Filed:	0				TOTAL									
6															
7															
107	Exhibit 2 - Part 2														
198	Allocation of Calendar Quarter 1, by Accident Year														
199	First Quarter Paid Loss														
200					1Q-0	1Q-1	1Q-2	1Q-3	1Q-4	1Q-5	1Q-6	1Q-7	1Q-8		
201	Col (10)	AY 0, Paid in the CQ	0	XXX		XXX		XXX		XXX		XXX			
202	Col (10)	AY -1, Paid in the CQ	0		0	XXX		XXX		XXX		XXX			
203	Col (10)	AY -2, Paid in the CQ	0		0		0	XXX		XXX		XXX			
204	Col (10)	AY -3, Paid in the CQ	0		0		0		0	XXX		XXX			
205	Col (10)	AY -4, Paid in the CQ	0		0		0	0	0	XXX		XXX			
206	Col (10)	AY -5, Paid in the CQ	0		0		0	0	0		0	XXX			
207	Col (10)	AY -6, Paid in the CQ	0		0		0	0	0		0		XXX		
208	Col (10)	AY -7, Paid in the CQ	0		0		0	0	0		0	0	XXX		
209	Col (10)	AY -8, Paid in the CQ	0		0		0	0	0		0	0	0		
210	Col (10)	AY -9, Paid in the CQ	0		0		0	0	0		0	0	0		
211	Col (10)	AY -10 & prior, Paid in the CQ	0		0		0	0	0		0	0	0		
212		Total	0		0		0	0	0		0	0	0		
213															
214	Direct Unpaid Case Loss														
215	Col (12A)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX			
216	Col (12A)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX			
217	Col (12A)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX			
218	Col (12A)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX			
219	Col (12A)	AY -4, Unpaid at the end of CQ	0		0		0	0	0	XXX		XXX			
220	Col (12A)	AY -5, Unpaid at the end of CQ	0		0		0	0	0		0	XXX			
221	Col (12A)	AY -6, Unpaid at the end of CQ	0		0		0	0	0		0		XXX		
222	Col (12A)	AY -7, Unpaid at the end of CQ	0		0		0	0	0		0	0	XXX		
223	Col (12A)	AY -8, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
224	Col (12A)	AY -9, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
225	Col (12A)	AY -10 & prior, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
226		Total	0		0		0	0	0		0	0	0		
227															
228	Direct Unpaid Bulk/IBNR Loss														
229	Col (12B)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX			
230	Col (12B)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX			
231	Col (12B)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX			
232	Col (12B)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX			
233	Col (12B)	AY -4, Unpaid at the end of CQ	0		0		0	0	0	XXX		XXX			
234	Col (12B)	AY -5, Unpaid at the end of CQ	0		0		0	0	0		0	XXX			
235	Col (12B)	AY -6, Unpaid at the end of CQ	0		0		0	0	0		0		XXX		
236	Col (12B)	AY -7, Unpaid at the end of CQ	0		0		0	0	0		0	0	XXX		
237	Col (12B)	AY -8, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
238	Col (12B)	AY -9, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
239	Col (12B)	AY -10 & prior, Unpaid at the end of CQ	0		0		0	0	0		0	0	0		
240		Total	0		0		0	0	0		0	0	0		
241															

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	
1	Group Name:		Name		BI Liab									Input Sheet
2	Group NAIC #:		#		PD Liab		XXX							Section B
3	Company Name:		Name		PIP									
4	Company NAIC #:		#		Phys Dam									
5	Year Filed:		0		TOTAL									
6														
7														
242	Incremental Direct Paid ALAE													
243	Col (14)	AY 0, Paid in the CQ	0	XXX		XXX		XXX		XXX		XXX	XXX	
244	Col (14)	AY -1, Paid in the CQ	0		0	XXX		XXX		XXX		XXX	XXX	
245	Col (14)	AY -2, Paid in the CQ	0		0		0	XXX		XXX		XXX	XXX	
246	Col (14)	AY -3, Paid in the CQ	0		0		0		0	XXX		XXX	XXX	
247	Col (14)	AY -4, Paid in the CQ	0		0		0		0		0	XXX	XXX	
248	Col (14)	AY -5, Paid in the CQ	0		0		0		0		0		XXX	
249	Col (14)	AY -6, Paid in the CQ	0		0		0		0		0			
250	Col (14)	AY -7, Paid in the CQ	0		0		0		0		0		0	
251	Col (14)	AY -8, Paid in the CQ	0		0		0		0		0		0	
252	Col (14)	AY -9, Paid in the CQ	0		0		0		0		0		0	
253	Col (14)	AY -10 & prior, Paid in the CQ	0		0		0		0		0		0	
254	Total		0		0		0		0		0		0	
255														
256	Direct Unpaid Case ALAE													
257	Col (16A)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX	XXX	
258	Col (16A)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX	XXX	
259	Col (16A)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX	XXX	
260	Col (16A)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX	XXX	
261	Col (16A)	AY -4, Unpaid at the end of CQ	0		0		0		0		0	XXX	XXX	
262	Col (16A)	AY -5, Unpaid at the end of CQ	0		0		0		0		0		XXX	
263	Col (16A)	AY -6, Unpaid at the end of CQ	0		0		0		0		0			
264	Col (16A)	AY -7, Unpaid at the end of CQ	0		0		0		0		0		0	
265	Col (16A)	AY -8, Unpaid at the end of CQ	0		0		0		0		0		0	
266	Col (16A)	AY -9, Unpaid at the end of CQ	0		0		0		0		0		0	
267	Col (16A)	AY -10 & prior, Unpaid at the end of CQ	0		0		0		0		0		0	
268	Total		0		0		0		0		0		0	
269														
270	Direct Unpaid Bulk/BNR ALAE													
271	Col (16B)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX	XXX	
272	Col (16B)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX	XXX	
273	Col (16B)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX	XXX	
274	Col (16B)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX	XXX	
275	Col (16B)	AY -4, Unpaid at the end of CQ	0		0		0		0		0	XXX	XXX	
276	Col (16B)	AY -5, Unpaid at the end of CQ	0		0		0		0		0		XXX	
277	Col (16B)	AY -6, Unpaid at the end of CQ	0		0		0		0		0			
278	Col (16B)	AY -7, Unpaid at the end of CQ	0		0		0		0		0		0	
279	Col (16B)	AY -8, Unpaid at the end of CQ	0		0		0		0		0		0	
280	Col (16B)	AY -9, Unpaid at the end of CQ	0		0		0		0		0		0	
281	Col (16B)	AY -10 & prior, Unpaid at the end of CQ	0		0		0		0		0		0	
282	Total		0		0		0		0		0		0	
283														
284														
285	Exhibit 2 - Part 3													
286	Not Applicable													
287	Calendar Year													
288	Col (19)	Direct Incurred Loss - CW		-1		-2		-3		-4		-5		-6
289	Col (20)	Direct Incurred ALAE - CW	XXX		XXX		XXX		XXX		XXX		XXX	
290	Col (22)	Direct Incurred ULAE - CW	XXX		XXX		XXX		XXX		XXX		XXX	
291														
292														
293	Exhibit 3		Tail Factor (99 months-ultimate)		XXX		Not Applicable							
294	Item 23		Development Adjustment (insurer's option)		0		Provide Documentation if greater than 0							
295														
296														

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	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	
1	Group Name:			Name									BI Liab	Input Sheet
2	Group NAIC #:			#									PD Liab	Section B
3	Company Name:			Name									PIP	
4	Company NAIC #:			#									Phys Dam	
5	Year Filed:			0									TOTAL	
6														
7														
297	Exhibit 4				Calendar Year									
298	Not Applicable				-1	-2	-3	-4	-5	-6	-7	-8	-9	
299														
300	Col (1)	Item 1	Direct Written Premium - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
301	Col (1)	Item 2	Direct Earned Premium - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
302	Col (1)	Item 3	Direct Other Acquisition Expense - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
303	Col (1)	Item 4	Direct General Expense - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
304	Col (1)	Item 5	Direct Commission & Brokerage - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
305	Col (1)	Item 7	Direct Taxes, Licenses & Fees - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
306	Col (1)	Item 9	Net Catastrophe Reinsurance Exp. - CW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
307														
308	Source: Annual Statement - NJ Page 14, Line 19.2 (PD)													
309	Col (3)	Item 5	Direct Commission & Brokerage - NJ	0	0	0	0	0	0	0	0	XXX	XXX	
310	Col (3)	Item 7	Direct Taxes, Licenses & Fees - NJ	0	0	0	0	0	0	0	0	XXX	XXX	
311	Col (3)	Item 9	Net Catastrophe Reinsurance Exp. - NJ	0	0	0	0	0	0	0	0	XXX	XXX	
312	Col (3)	Item 10	LAD Fees Paid - NJ	0	0	0	0	0	0	0	0	XXX	XXX	
313														
314														
315														
316														
317														
318														
319														
320	Exhibit 5				Purchase Year									
321	Not Applicable				-1	-2	-3	-4	-5	-6	-7	-8	-9	
322														
323	Part 1	Item 1	Agents Balances	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
324	Part 1	Item 2	Unearned Premium Reserve	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
325														
326	Part 2A	Item 1	Interest, Dividend & Real Estate Income	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
327	Part 2A	Item 2.1	Investment Expense Incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
328	Part 2A	Item 2.2	Depreciation on Real Estate	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
329	Part 2A	Item 2.3	Unaffiliated Preferred Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
330	Part 2A	Item 2.4	Affiliated Preferred Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
331	Part 2A	Item 2.5	Unaffiliated Common Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
332	Part 2A	Item 2.6	Affiliated Common Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
333	Part 2A	Item 2.7	Other Invested Assets	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
334	Part 2A	Item 2.8	Real Estate for Co's Own Occupancy	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
335														
336	Part 2B	Item 4.1	Bonds Acquired	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
337	Part 2B	Item 4.2	Mortgage Loans on Real Estate	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
338	Part 2B	Item 4.3	Real Estate Acquired	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
339	Part 2B	Item 4.4	Collateral Loans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
340	Part 2B	Item 4.5	Cash on Hand and on Deposit	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
341	Part 2B	Item 4.6	Short-Term Investments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
342	Part 2B	Item 4.7	Derivative Instruments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
343														
344														

	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA
1	Group Name: Name				BI Liab								Input Sheet
2	Group NAIC #: #				PD Liab		XXX						Section B
3	Company Name: Name				PIP								
4	Company NAIC #: #				Phys Dam								
5	Year Filed: 0				TOTAL								
6													
7													
345	Exhibit 6												
346	Not Applicable												
347													
348	Calendar Year ending 3/31												
349	0000 (Estimated)												
349	-1 -2 -3 -4 -5 -6 -7												
349	Part 1	AY -1, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
350	Part 1	AY -2, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
351	Part 1	AY -3, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
352	Part 1	AY -4, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
353	Part 1	AY -5, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
354	Part 1	AY -6, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
355	Part 1	AY -7, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
356	Part 1	AY -8, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
357													
358	Cumulative AIRE Investment Income Received												
359	Part 1	AY -1, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
360	Part 1	AY -2, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
361	Part 1	AY -3, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
362	Part 1	AY -4, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
363	Part 1	AY -5, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
364	Part 1	AY -6, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
365	Part 1	AY -7, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
366	Part 1	AY -8, Received through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
367													
368	Cumulative AIRE Assessment Paid												
368	Part 3	AY -1, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
370	Part 3	AY -2, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
371	Part 3	AY -3, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
372	Part 3	AY -4, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
373	Part 3	AY -5, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
374	Part 3	AY -6, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
375	Part 3	AY -7, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
376	Part 3	AY -8, Paid through CY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
377													
378													

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	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab	XXX						Section B
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
379	Exhibit 7												
380	All data on Exhibit 7 is for New Jersey business only.												
381					0	-1	-2	-3	-4	-5	-6	-7	-8
382	Calendar Year Excess Profit Paid												
382	Excess Profit Refund Paid												
383	Item 1				0	0	0	0	0	0	0	0	0
384													
385	Excess Profit Carryforward Used												
386	Item 2.1	In AY -1			0	0	0	0	0	0	0	0	0
387	Item 2.2	In AY -2			0	0	0	0	0	0	0	0	0
388	Item 2.3	In AY -3			0	0	0	0	0	0	0	0	0
389	Item 2.4	In AY -4	XXX		0	0	0	0	0	0	0	0	0
390	Item 2.5	In AY -5	XXX	XXX	0	0	0	0	0	0	0	0	0
391	Item 2.6	In AY -6	XXX	XXX	XXX	0	0	0	0	0	0	0	0
392	Item 2.7	In AY -7	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
393	Item 2.8	In AY -8	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
394	Item 2.9	In AY -9	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
395	Item 2.10	In AY -10	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
396	Item 2.11	In AY -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
397													
398													
399													
400	Calendar Year Excess Profit Paid												
400	Excess Profit Refund Paid												
401	Item 1				0	0	0	0	0	0	0	0	0
402													
403	Excess Profit Carryforward Used												
404	Item 2.1	In AY -1			0	0	0	0	0	0	0	0	0
405	Item 2.2	In AY -2			0	0	0	0	0	0	0	0	0
406	Item 2.3	In AY -3			0	0	0	0	0	0	0	0	0
407	Item 2.4	In AY -4			0	0	0	0	0	0	0	0	0
408	Item 2.5	In AY -5			0	0	0	0	0	0	0	0	0
409	Item 2.6	In AY -6			0	0	0	0	0	0	0	0	0
410	Item 2.7	In AY -7			0	0	0	0	0	0	0	0	0
411	Item 2.8	In AY -8			0	0	0	0	0	0	0	0	0
412	Item 2.9	In AY -9			0	0	0	0	0	0	0	0	0
413	Item 2.10	In AY -10			0	0	0	0	0	0	0	0	0
414	Item 2.11	In AY -11			0	0	0	0	0	0	0	0	0
415	Item 2.12	In AY -12			0	0	0	0	0	0	0	0	0
416	Item 2.13	In AY -13			0	0	0	0	0	0	0	0	0
417	Item 2.14	In AY -14			0	0	0	0	0	0	0	0	0
418	Item 2.15	In AY -15			0	0	0	0	0	0	0	0	0
419	Item 2.16	In AY -16			0	0	0	0	0	0	0	0	0
420	Item 2.17	In AY -17			0	0	0	0	0	0	0	0	0
421	Item 2.18	In AY -18			0	0	0	0	0	0	0	0	0
422	Item 2.19	In AY -19			0	0	0	0	0	0	0	0	0
423													
424													

	L	M	N	O	P	Q	R	S	T	U
1	Group Name:	Name				BI Liab				Exhibit 1B
2	Group NAIC #:	#				PD Liab	XXX			Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Calendar Year -1		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
8			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
9			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
10			Premium	Premium	Business	Premium	Losses	Losses	Losses	
11	Item 1	Source: Statutory Page 14	0.	0	0	0	0	0	0	0
12	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
13	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
14	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
15										
16	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
17	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
18										
19										
20				Col (8)	Col (9)	Col (10)				
21				Direct	Direct	Direct				
22				Paid	Incurred	Unpaid				
23				ALAE	ALAE	ALAE				
24	Item 1	Source: Statutory Page 14		0	0	0				
25	Item 2	Total Exclusions		0	0	0				
26	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
27										
28										

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	L	M	N	O	P	Q	R	S	T	U
29	Group Name:	Name				BI Liab				Exhibit 1B
30	Group NAIC #:	#				PD Liab	XXX			Sheet 2
31	Company Name:	Name				PIP				
32	Company NAIC #:	#				Phys Dam				
33	Year Filed:	0				TOTAL				
34										
35	Calendar Year -2		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
36			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
37			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
38			Premium	Premium	Business	Premium	Losses	Losses	Losses	
39	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
40	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
41	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
42	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43										
44	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
45	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
46										
47										
48				Col (8)	Col (9)	Col (10)				
49				Direct	Direct	Direct				
50				Paid	Incurred	Unpaid				
51				ALAE	ALAE	ALAE				
52	Item 1	Source: Statutory Page 14		0	0	0				
53	Item 2	Total Exclusions		0	0	0				
54	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
55										
56										

	L	M	N	O	P	Q	R	S	T	U
57	Group Name:	Name				BI Liab				Exhibit 1B
58	Group NAIC #:	#				PD Liab	XXX			Sheet 3
59	Company Name:	Name				PIP				
60	Company NAIC #:	#				Phys Dam				
61	Year Filed:	0				TOTAL				
62										
63	Calendar Year -3			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
64				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
65				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
66				Premium	Premium	Business	Premium	Losses	Losses	Losses
67	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
68	Item 2	Total Exclusions		0	0	0	0	0	0	0
69	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
70	Item 4	UCJF Assessments & Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX
71										
72	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
73	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
74										
75										
76					Col (8)	Col (9)	Col (10)			
77					Direct	Direct	Direct			
78					Paid	Incurred	Unpaid			
79					ALAE	ALAE	ALAE			
80	Item 1	Source: Statutory Page 14			0	0	0			
81	Item 2	Total Exclusions			0	0	0			
82	Item 3	Excess Profit Data (Item 1 - Item 2)			0	0	0			
83										
84										

	L	M	N	O	P	Q	R	S	T	U
113	Group Name:	Name				BI Liab				Exhibit 1B
114	Group NAIC #:	#				PD Liab	XXX			Sheet 5
115	Company Name:	Name				PIP				
116	Company NAIC #:	#				Phys Dam				
117	Year Filed:	0				TOTAL				
118										
119	Calendar Year -5		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
120			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
121			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
122			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
123	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
124	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
125	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
126	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
127										
128	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
129	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
130										
131										
132				Col (8)	Col (9)	Col (10)				
133				Direct	Direct	Direct				
134				Paid	Incurred	Unpaid				
135				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
136	Item 1	Source: Statutory Page 14		0	0	0				
137	Item 2	Total Exclusions		0	0	0				
138	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
139										
140										

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	L	M	N	O	P	Q	R	S	T	U
169	Group Name:	Name				BI Liab				Exhibit 1B
170	Group NAIC #:	#				PD Liab	XXX			Sheet 7
171	Company Name:	Name				PIP				
172	Company NAIC #:	#				Phys Dam				
173	Year Filed:	0				TOTAL				
174										
175	Calendar Year -7		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
176			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
177			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
178			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
179	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
180	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
181	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
182	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
183										
184	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
185	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
186										
187										
188				Col (8)	Col (9)	Col (10)				
189				Direct	Direct	Direct				
190				Paid	Incurred	Unpaid				
191				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
192	Item 1	Source: Statutory Page 14		0	0	0				
193	Item 2	Total Exclusions		0	0	0				
194	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
195										
196										

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	L	M	N	O	P	Q	R	S	T	U
197	Group Name:	Name				BI Liab				Exhibit 1B
198	Group NAIC #:	#				PD Liab	XXX			Sheet 8
199	Company Name:	Name				PIP				
200	Company NAIC #:	#				Phys Dam				
201	Year Filed:	0				TOTAL				
202										
203	Calendar Year -8		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
204			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
205			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
206			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
207	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
208	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
209	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
210	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
211										
212	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
213	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
214										
215										
216				Col (8)	Col (9)	Col (10)				
217				Direct	Direct	Direct				
218				Paid	Incurred	Unpaid				
219				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
220	Item 1	Source: Statutory Page 14	0	0	0	0				
221	Item 2	Total Exclusions	0	0	0	0				
222	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
223										
224										

	L	M	N	O	P	Q	R	S	T	U
225	Group Name:	Name				BI Liab				Exhibit 1B
226	Group NAIC #:	#				PD Liab	XXX			Sheet 9
227	Company Name:	Name				PIP				
228	Company NAIC #:	#				Phys Dam				
229	Year Filed:	0				TOTAL				
230										
231	Calendar Year -9		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
232			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
233			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
234			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
235	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
236	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
237	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
238	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
239										
240	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
241	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
242										
243										
244				Col (8)	Col (9)	Col (10)				
245				Direct	Direct	Direct				
246				Paid	Incurred	Unpaid				
247				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
248	Item 1	Source: Statutory Page 14		0	0	0				
249	Item 2	Total Exclusions		0	0	0				
250	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
251										
252										

	L	M	N	O	P	Q	R	S	T	U
1	Group Name:	Name				BI Liab				Exhibit 2B
2	Group NAIC #:	#				PD Liab	XXX			Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
8	Calendar Year -1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
9		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
10	<u>Accident Year</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>	<u>@ 12/31/01</u>
11	-1	0	0	0	0	0	0	0	0	0
12	-2	0	0	0	0	0	0	0	0	0
13	-3	0	0	0	0	0	0	0	0	0
14	-4	0	0	0	0	0	0	0	0	0
15	-5	0	0	0	0	0	0	0	0	0
16	-6	0	0	0	0	0	0	0	0	0
17	-7	0	0	0	0	0	0	0	0	0
18	-8	0	0	0	0	0	0	0	0	0
19	-9	0	0	0	0	0	0	0	0	0
20	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
21	Total	0	0	0	0	0	0	0	0	0
22										
23	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
24	Calendar Qtr 0-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
25		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
26	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
27	0	0	0	0	0	0	0	0	0	0
28	-1	0	0	0	0	0	0	0	0	0
29	-2	0	0	0	0	0	0	0	0	0
30	-3	0	0	0	0	0	0	0	0	0
31	-4	0	0	0	0	0	0	0	0	0
32	-5	0	0	0	0	0	0	0	0	0
33	-6	0	0	0	0	0	0	0	0	0
34	-7	0	0	0	0	0	0	0	0	0
35	-8	0	0	0	0	0	0	0	0	0
36	-9	0	0	0	0	0	0	0	0	0
37	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
38	Total	0	0	0	0	0	0	0	0	0
39										
40	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
41	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
42	-1	0	0	0	0	0.000				
43	-2	0	0	0	0	0.000				
44	-3	0	0	0	0	0.000				
45	Average					0.000				
46	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
47										
48										

95	Group Name:	Name				BI Liab				Exhibit 2B
96	Group NAIC #:	#				PD Liab	XXX			Sheet 3
97	Company Name:	Name				PIP				
98	Company NAIC #:	#				Phys Dam				
99	Year Filed:	0				TOTAL				
100										
101	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
102	Calendar Year -3	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
103		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
104	<u>Accident Year</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>	<u>@ 12/31/-03</u>
105	-3	0	0	0	0	0	0	0	0	0
106	-4	0	0	0	0	0	0	0	0	0
107	-5	0	0	0	0	0	0	0	0	0
108	-6	0	0	0	0	0	0	0	0	0
109	-7	0	0	0	0	0	0	0	0	0
110	-8	0	0	0	0	0	0	0	0	0
111	-9	0	0	0	0	0	0	0	0	0
112	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
113	Total	0	0	0	0	0	0	0	0	0
114										
115	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
116	Calendar Qtr -2-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
117		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
118	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
119	-2	0	0	0	0	0	0	0	0	0
120	-3	0	0	0	0	0	0	0	0	0
121	-4	0	0	0	0	0	0	0	0	0
122	-5	0	0	0	0	0	0	0	0	0
123	-6	0	0	0	0	0	0	0	0	0
124	-7	0	0	0	0	0	0	0	0	0
125	-8	0	0	0	0	0	0	0	0	0
126	-9	0	0	0	0	0	0	0	0	0
127	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
128	Total	0	0	0	0	0	0	0	0	0
129										
130	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
131	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
132	-3	0	0	0	0	0.000				
133	-4	0	0	0	0	0.000				
134	-5	0	0	0	0	0.000				
135	Average					0.000				
136	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
137										
138										

	L	M	N	O	P	Q	R	S	T	U
139	Group Name:	Name				BI Liab				Exhibit 2B
140	Group NAIC #:	#				PD Liab	XXX			Sheet 4
141	Company Name:	Name				PIP				
142	Company NAIC #:	#				Phys Dam				
143	Year Filed:	0				TOTAL				
144										
145	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
146	Calendar Year -4	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
147		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
148	<u>Accident Year</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>
149	-4	0	0	0	0	0	0	0	0	0
150	-5	0	0	0	0	0	0	0	0	0
151	-6	0	0	0	0	0	0	0	0	0
152	-7	0	0	0	0	0	0	0	0	0
153	-8	0	0	0	0	0	0	0	0	0
154	-9	0	0	0	0	0	0	0	0	0
155	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
156	Total	0	0	0	0	0	0	0	0	0
157										
158	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
159	Calendar Qtr -3-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
160		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
161	<u>Accident Year</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>
162	-3	0	0	0	0	0	0	0	0	0
163	-4	0	0	0	0	0	0	0	0	0
164	-5	0	0	0	0	0	0	0	0	0
165	-6	0	0	0	0	0	0	0	0	0
166	-7	0	0	0	0	0	0	0	0	0
167	-8	0	0	0	0	0	0	0	0	0
168	-9	0	0	0	0	0	0	0	0	0
169	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
170	Total	0	0	0	0	0	0	0	0	0
171										
172	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
173	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
174	-4	0	0	0	0	0.000				
175	-5	0	0	0	0	0.000				
176	-6	0	0	0	0	0.000				
177	Average					0.000				
178	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
179										
180										

	L	M	N	O	P	Q	R	S	T	U
181	Group Name:	Name				BI Liab				Exhibit 2B
182	Group NAIC #:	#				PD Liab	XXX			Sheet 5
183	Company Name:	Name				PIP				
184	Company NAIC #:	#				Phys Dam				
185	Year Filed:	0				TOTAL				
186										
187	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
188	Calendar Year -5	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
189		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
190	<u>Accident Year</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>	<u>@ 12/31/-05</u>
191	-5	0	0	0	0	0	0	0	0	0
192	-6	0	0	0	0	0	0	0	0	0
193	-7	0	0	0	0	0	0	0	0	0
194	-8	0	0	0	0	0	0	0	0	0
195	-9	0	0	0	0	0	0	0	0	0
196	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
197	Total	0	0	0	0	0	0	0	0	0
198										
199	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
200	Calendar Qtr -4-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
201		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
202	<u>Accident Year</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>	<u>@ 3/31/-04</u>
203	-4	0	0	0	0	0	0	0	0	0
204	-5	0	0	0	0	0	0	0	0	0
205	-6	0	0	0	0	0	0	0	0	0
206	-7	0	0	0	0	0	0	0	0	0
207	-8	0	0	0	0	0	0	0	0	0
208	-9	0	0	0	0	0	0	0	0	0
209	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
210	Total	0	0	0	0	0	0	0	0	0
211										
212	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
213	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
214	-5	0	0	0	0	0.000				
215	-6	0	0	0	0	0.000				
216	-7	0	0	0	0	0.000				
217	Average					0.000				
218	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
219										
220										

	L	M	N	O	P	Q	R	S	T	U
221	Group Name:	Name				BI Liab				Exhibit 2B
222	Group NAIC #:	#				PD Liab	XXX			Sheet 6
223	Company Name:	Name				PIP				
224	Company NAIC #:	#				Phys Dam				
225	Year Filed:	0				TOTAL				
226										
227	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
228	Calendar Year -6	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
229		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
230	<u>Accident Year</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>	<u>@ 12/31/06</u>
231	-6	0	0	0	0	0	0	0	0	0
232	-7	0	0	0	0	0	0	0	0	0
233	-8	0	0	0	0	0	0	0	0	0
234	-9	0	0	0	0	0	0	0	0	0
235	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
236	Total	0	0	0	0	0	0	0	0	0
237										
238	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
239	Calendar Qtr -5-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
240		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
241	<u>Accident Year</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>	<u>@ 3/31/05</u>
242	-5	0	0	0	0	0	0	0	0	0
243	-6	0	0	0	0	0	0	0	0	0
244	-7	0	0	0	0	0	0	0	0	0
245	-8	0	0	0	0	0	0	0	0	0
246	-9	0	0	0	0	0	0	0	0	0
247	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
248	Total	0	0	0	0	0	0	0	0	0
249										
250	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
251	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
252	-6	0	0	0	0	0.000				
253	-7	0	0	0	0	0.000				
254	-8	0	0	0	0	0.000				
255	Average					0.000				
256	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
257										
258										

	L	M	N	O	P	Q	R	S	T	U
259	Group Name:	Name				BI Liab				Exhibit 2B
260	Group NAIC #:	#				PD Liab	XXX			Sheet 7
261	Company Name:	Name				PIP				
262	Company NAIC #:	#				Phys Dam				
263	Year Filed:	0				TOTAL				
264										
265	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
266	Calendar Year -7	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
267		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
268	<u>Accident Year</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>
269	-7	0	0	0	0	0	0	0	0	0
270	-8	0	0	0	0	0	0	0	0	0
271	-9	0	0	0	0	0	0	0	0	0
272	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
273	Total	0	0	0	0	0	0	0	0	0
274										
275	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
276	Calendar Qtr -6-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
277		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
278	<u>Accident Year</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>
279	-6	0	0	0	0	0	0	0	0	0
280	-7	0	0	0	0	0	0	0	0	0
281	-8	0	0	0	0	0	0	0	0	0
282	-9	0	0	0	0	0	0	0	0	0
283	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
284	Total	0	0	0	0	0	0	0	0	0
285										
286	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
287	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
288	-7	0	0	0	0	0.000				
289	-8	0	0	0	0	0.000				
290	-9	0	0	0	0	0.000				
291	Average					0.000				
292	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
293										
294										

	L	M	N	O	P	Q	R	S	T	U
295	Group Name:	Name				BI Liab				Exhibit 2B
296	Group NAIC #:	#				PD Liab	XXX			Sheet 8
297	Company Name:	Name				PIP				
298	Company NAIC #:	#				Phys Dam				
299	Year Filed:	0				TOTAL				
300										
301	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
302	Calendar Year -8	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
303		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
304	<u>Accident Year</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>	<u>@ 12/31/-08</u>
305	-8	0	0	0	0	0	0	0	0	0
306	-9	0	0	0	0	0	0	0	0	0
307	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
308	Total	0	0	0	0	0	0	0	0	0
309										
310	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
311	Calendar Qtr -7-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
312		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
313	<u>Accident Year</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>	<u>@ 3/31/-07</u>
314	-7	0	0	0	0	0	0	0	0	0
315	-8	0	0	0	0	0	0	0	0	0
316	-9	0	0	0	0	0	0	0	0	0
317	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
318	Total	0	0	0	0	0	0	0	0	0
319										
320										

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Supp. 3-15-04

	L	M	N	O	P	Q	R	S	T	U
321	Group Name:	Name				BI Liab	XXX			Exhibit 2B
322	Group NAIC #:	#				PD Liab				Sheet 9
323	Company Name:	Name				PIP				
324	Company NAIC #:	#				Phys Dam				
325	Year Filed:	0				TOTAL				
326										
327	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
328	Calendar Year -9	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
329		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
330	<u>Accident Year</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>
331	-9	0	0	0	0	0	0	0	0	0
332	-10 & prior	0	0	0	0	0	0	0	0	0
333	Total	0	0	0	0	0	0	0	0	0
334										
335	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
336	Calendar Qtr -8-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
337		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
338	<u>Accident Year</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>
339	-8	0	0	0	0	0	0	0	0	0
340	-9	0	0	0	0	0	0	0	0	0
341	-10 & prior	0	0	0	0	0	0	0	0	0
342	Total	0	0	0	0	0	0	0	0	0
343										
344										

	N	O	P	Q	R	S	T	U	V	W	X	Y	
1	Group Name:	Name				BI Liab						Exhibit 3B	
2	Group NAIC #:	#				PD Liab	XXX						
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
8	Part 1												
9	Cumulative												
10	Case Incurred												
11	Loss + ALAE	Accident Year											
12	as of	-9	-8	-7	-6	-5	-4	-3	-2	-1			
13	15 months	0	0	0	0	0	0	0	0	0		0	
14	27 months	0	0	0	0	0	0	0	0	0			
15	39 months	0	0	0	0	0	0	0	0	0			
16	51 months	0	0	0	0	0	0	0	0	0			
17													
18													
19													
20													
21													
22	Part 2												
23	Development	Accident Year										Col (A)	Col (B)
24	Factors	-9	-8	-7	-6	-5	-4	-3	-2		Incremental	Development	Cumulative
25	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	LDF	Factors	LDF
26	27-39 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	15 mo. - ult.	1.000
27	39-51 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	27 mo. - ult.	1.000
28												39 mo. - ult.	1.000
29													
30													
31													
32													
33													
34	Part 3												
35		Col (1)	Col (2)	Col (3)									
36		Case Incurred	Loss + ALAE	Projected									
37		Loss + ALAE	Development	Ultimate									
38	Accident Year	@ 3/31/00	Factor	@ 3/31/00									
39	-1	0	1.000	0									
40	-2	0	1.000	0									
41	-3	0	1.000	0									
42	-4	0	1.000	0									
43													
44													
45													

3-90.81

Supp. 3-15-04

	I	J	K	L	M	N	O
1	Group Name:	Name		BI Liab			Exhibit 4B
2	Group NAIC #:	#		PD Liab		XXX	
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
7				Part 1 - Countrywide		Part 2 - New Jersey	
8				Insurance Expense Exhibit		Statutory Page 14	
9				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
10		<u>Calendar Year -1</u>					
11	Item 1	Direct Written Premium		\$0		\$0	
12	Item 2	Direct Earned Premium		0		0	
13	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
14	Item 4	Direct General Expense		0	0.00%	0	0.00%
15	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
16	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
17	Item 6b	Allowable Capped Expense		--	--	0	24.40%
18	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
19	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
20	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
21	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
22	Item 10	LAD Fees Paid		--	--	0	0.00%
23							
24				Part 1 - Countrywide		Part 2 - New Jersey	
25				Insurance Expense Exhibit		Statutory Page 14	
26				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
27		<u>Calendar Year -2</u>					
28	Item 1	Direct Written Premium		\$0		\$0	
29	Item 2	Direct Earned Premium		0		0	
30	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
31	Item 4	Direct General Expense		0	0.00%	0	0.00%
32	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
33	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
34	Item 6b	Allowable Capped Expense		--	--	0	24.40%
35	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
36	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
37	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
38	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
39	Item 10	LAD Fees Paid		--	--	0	0.00%
40							
41				Part 1 - Countrywide		Part 2 - New Jersey	
42				Insurance Expense Exhibit		Statutory Page 14	
43				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
44		<u>Calendar Year -3</u>					
45	Item 1	Direct Written Premium		\$0		\$0	
46	Item 2	Direct Earned Premium		0		0	
47	Item 3	Direct Other Acquisition Expense		0	0.00%	0	0.00%
48	Item 4	Direct General Expense		0	0.00%	0	0.00%
49	Item 5	Direct Commission & Brokerage		0	0.00%	0	0.00%
50	Item 6a	Expenses subject to Capping (Items 3-5)		--	--	0	0.00%
51	Item 6b	Allowable Capped Expense		--	--	0	24.40%
52	Item 6	Additional Allowable Efficiency Expense		--	--	0	24.40%
53	Item 7	Direct Taxes, Licenses & Fees		0	0.00%	0	0.00%
54	Item 8	Direct Prepaid Expenses		0	0.00%	0	0.00%
55	Item 9	Net Catastrophe Reinsurance		0	0.00%	0	0.00%
56	Item 10	LAD Fees Paid		--	--	0	0.00%
57							

	I	J	K	L	M	N	O
1	Group Name:	Name		BI Liab			Exhibit 4B
2	Group NAIC #:	#		PD Liab		XXX	
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
58				Part 1 - Countrywide		Part 2 - New Jersey	
59				Insurance Expense Exhibit		Statutory Page 14	
60				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
61		<u>Calendar Year -4</u>					
62	Item 1	Direct Written Premium	\$0			\$0	
63	Item 2	Direct Earned Premium	0			0	
64	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
65	Item 4	Direct General Expense	0	0.00%		0	0.00%
66	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
67	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
68	Item 6b	Allowable Capped Expense	--	--		0	24.40%
69	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
70	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
71	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
72	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
73	Item 10	LAD Fees Paid	--	--		0	0.00%
74							
75				Part 1 - Countrywide		Part 2 - New Jersey	
76				Insurance Expense Exhibit		Statutory Page 14	
77				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
78		<u>Calendar Year -5</u>					
79	Item 1	Direct Written Premium	\$0			\$0	
80	Item 2	Direct Earned Premium	0			0	
81	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
82	Item 4	Direct General Expense	0	0.00%		0	0.00%
83	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
84	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
85	Item 6b	Allowable Capped Expense	--	--		0	24.40%
86	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
87	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
88	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
89	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
90	Item 10	LAD Fees Paid	--	--		0	0.00%
91							
92				Part 1 - Countrywide		Part 2 - New Jersey	
93				Insurance Expense Exhibit		Statutory Page 14	
94				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
95		<u>Calendar Year -6</u>					
96	Item 1	Direct Written Premium	\$0			\$0	
97	Item 2	Direct Earned Premium	0			0	
98	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
99	Item 4	Direct General Expense	0	0.00%		0	0.00%
100	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
101	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
102	Item 6b	Allowable Capped Expense	--	--		0	24.40%
103	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
104	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
105	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
106	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
107	Item 10	LAD Fees Paid	--	--		0	0.00%
108	6252003						

	I	J	K	L	M	N	O
1	Group Name:	Name		BI Liab			Exhibit 4B
2	Group NAIC #:	#		PD Liab		XXX	
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
109				Part 1 - Countrywide		Part 2 - New Jersey	
110				Insurance Expense Exhibit		Statutory Page 14	
111				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
112		<u>Calendar Year -Z</u>					
113	Item 1	Direct Written Premium	\$0			\$0	
114	Item 2	Direct Earned Premium	0			0	
115	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
116	Item 4	Direct General Expense	0	0.00%		0	0.00%
117	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
118	Item 6a	Expenses subject to Capping (Items 3-5)	---	---		0	0.00%
119	Item 6b	Allowable Capped Expense	---	---		0	24.40%
120	Item 6	Additional Allowable Efficiency Expense	---	---		0	24.40%
121	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
122	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
123	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
124	Item 10	LAD Fees Paid	---	---		0	0.00%

	K	L	M	N	O	P	Q	R	S	T
1	Group Name:	Name			BI Liab					Exhibit 5B
2	Group NAIC #:	#			PD Liab	XXX				Part 1
3	Company Name:	Name			PIP					
4	Company NAIC #:	#			Phys Dam					
5	Year Filed:	0			TOTAL					
6										
7										
8	Part 1		-7	-6	-5	-4	-3	-2	-1	
9	Item 1	Agents Balances	0	0	0	0	0	0	0	0
10	Item 2	Unearned Premium Reserve	0	0	0	0	0	0	0	0
11	Item 3	Agents Balance Ratio [Item 1 / Item 2]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
12	Item 4	Direct Prepaid Expenses - NJ (Exhibit 4)	0	0	0	0	0	0	0	0
13	Item 5	Direct Net Written Premium - NJ (Exhibit 4)	0	0	0	0	0	0	0	0
14	Item 6	Prepaid Expense Ratio [Item 4 / Item 5]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
15	Item 7a	Direct Unearned Premium Reserve - Beginning (Exhibit 1)	0	0	0	0	0	0	0	0
16	Item 7b	Direct Unearned Premium Reserve - Ending (Exhibit 1)	0	0	0	0	0	0	0	0
17	Item 7	Average Unearned Premium Reserve [(Item 7a + Item 7b) / 2]	0	0	0	0	0	0	0	0
18	Item 8	Investable Unearned Premium [Item 7 * (1 - Item 3 - Item 6)]	0	0	0	0	0	0	0	0
19	Item 9a	Direct Unpaid Loss - Beginning (Exhibit 1)	0	0	0	0	0	0	0	0
20	Item 9b	Direct Unpaid Loss - Ending (Exhibit 1)	0	0	0	0	0	0	0	0
21	Item 9	Average Loss Reserve [(Item 9a + Item 9b) / 2]	0	0	0	0	0	0	0	0
22	Item 10a	Direct Unpaid ALAE - Beginning (Exhibit 1)	0	0	0	0	0	0	0	0
23	Item 10b	Direct Unpaid ALAE - Ending (Exhibit 1)	0	0	0	0	0	0	0	0
24	Item 10	Average ALAE Reserve [(Item 10a + Item 10b) / 2]	0	0	0	0	0	0	0	0
25	Item 11	ULAE Factor (Exhibit 2)	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
26	Item 12	Average Loss + LAE Reserve [(Item 9 + Item 10) * Item 11]	0	0	0	0	0	0	0	0
27	Item 13	Total Reserve [Item 8 + Item 12]	0	0	0	0	0	0	0	0
28	Item 14	Pre-Tax Rate of Return (Part 2C, Item 8, 3-Yr Total)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
29	Item 15	Actual Investment Income Earned [Item 13 * Item 14]	0	0	0	0	0	0	0	0

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	V	W	X	Y	Z	AA	AB	AC	AD	AE
1	Group Name:		Name					BI Liab		Exhibit 7B
2	Group NAIC #:		#					PD Liab	XXX	Sheet 1
3	Company Name:		Name					PIP		
4	Company NAIC #:		#					Phys Dam		
5	Year Filed:		0					TOTAL		
6										
7										
8	Calendar Year									
9			0	-1	-2	-3	-4	-5	-6	-7
10	Item 1 Excess Profit Paid		0	0	0	0	0	0	0	0
11										
12										
13	Carryforward Used		Calendar Year Excess Profit Paid							
14	for Accident Year		0	-1	-2	-3	-4	-5	-6	-7
15	Item 2.1 -1		0	0	0	0	0	0	0	0
16	Item 2.2 -2		0	0	0	0	0	0	0	0
17	Item 2.3 -3		0	0	0	0	0	0	0	0
18	Item 2.4 -4	XXX		0	0	0	0	0	0	0
19	Item 2.5 -5	XXX	XXX		0	0	0	0	0	0
20	Item 2.6 -6	XXX	XXX	XXX		0	0	0	0	0
21	Item 2.7 -7	XXX	XXX	XXX	XXX		0	0	0	0
22	Item 2.8 -8	XXX	XXX	XXX	XXX	XXX		0	0	0
23	Item 2.9 -9	XXX	XXX	XXX	XXX	XXX	XXX		0	0
24	Item 2.10 -10	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
25	Item 2.11 -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26	Item 2.12 -12	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
27	Item 2.13 -13	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28	Item 2.14 -14	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
29	Item 2.15 -15	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Item 2.16 -16	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31	Item 2.17 -17	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32	Item 2.18 -18	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33	Item 2.19 -19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34										
35	Item 2 Total Carryforward Used		0	0	0	0	0	0	0	0
36										
37	Item 3 Carryforward Unused		0	0	0	0	0	0	0	0

	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO	
1	Group Name:		Name					BI Liab		Exhibit 7B	
2	Group NAIC #:		#					PD Liab		XXX Sheet 2	
3	Company Name:		Name					PIP			
4	Company NAIC #:		#					Phys Dam			
5	Year Filed:		0					TOTAL			
6											
7											
8	Calendar Year										
9	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total	
10	0	0	0	0	0	0	0	0	0	0	
11											
12											
13	Calendar Year Excess Profit Paid										
14	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total	
15	0	0	0	0	0	0	0	0	0	0	
16	0	0	0	0	0	0	0	0	0	0	
17	0	0	0	0	0	0	0	0	0	0	
18	0	0	0	0	0	0	0	0	0	0	
19	0	0	0	0	0	0	0	0	0	0	
20	0	0	0	0	0	0	0	0	0	0	
21	0	0	0	0	0	0	0	0	0	0	
22	0	0	0	0	0	0	0	0	0	0	
23	0	0	0	0	0	0	0	0	0	0	
24	0	0	0	0	0	0	0	0	0	0	
25	0	0	0	0	0	0	0	0	0	0	
26	XXX	0	0	0	0	0	0	0	0	0	
27	XXX	XXX	0	0	0	0	0	0	0	0	
28	XXX	XXX	XXX	0	0	0	0	0	0	0	
29	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
30	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
31	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
32	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
34											
35	0	0	0	0	0	0	0	0	0	0	
36											
37	0	0	0	0	0	0	0	0	0	0	

	L	M	N	O	P	Q	R	S	T	U	
1	Group Name:	Name								BI Liab	Exhibit 9B
2	Group NAIC #:	#								PD Liab	XXX
3	Company Name:	Name								PIP	
4	Company NAIC #:	#								Phys Dam	
5	Year Filed:	0								TOTAL	
6											
7			-7	-6	-5	-4	-3	-2	-1	Total	
8	Item 1	Direct Calendar Year Written Premium [Exhibit 1B, Col (1), Item 3]	0	0	0	0	0	0	0	0	0
9	Item 2	Direct Calendar Year Earned Premium [Exhibit 1B, Col (2), Item 3]	0	0	0	0	0	0	0	0	0
10	Item 3	UCJF Assessment [Exhibit 1B, Col (2), Item 4]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
11	Item 4	Dividends excluding Refund of Excess Profit [Exhibit 1B, Col (3), Item 5b]	0	0	0	0	0	0	0	0	0
12	Item 5	Net AIRE [Exhibit 6, Part 7, Col (3)]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13	Item 6	Direct CY Net Earned Premium [Item 2 - Item 3 - Item 4 + Item 5]	0	0	0	0	0	0	0	0	0
14											
15	Item 7	Direct Accident Year Ultimate Loss & ALAE [Exhibit 3B, Part 3, Col (3)]	0	0	0	0	0	0	0	0	0
16	Item 8	ULAE Ratio [Exhibit 2B, Part 3, Col (23)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Item 9	Direct Accident Year Ultimate Loss & LAE [Item 7 * Item 8]	0	0	0	0	0	0	0	0	0
18	Item 10	Direct Accident Year Ultimate Loss & LAE Ratio [Item 9 / Item 6]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
19											
20	Item 11	Direct Commission & Brokerage [Exhibit 4B, Col (3), Item 5]	0	0	0	0	0	0	0	0	0
21	Item 12	Direct Other Acquisition Expense [Exhibit 4B, Col (3), Item 3]	0	0	0	0	0	0	0	0	0
22	Item 13	Direct General Expense [Exhibit 4B, Col (3), Item 4]	0	0	0	0	0	0	0	0	0
23	Item 14	Additional Allowable Expense [Exhibit 4B, Col (3), Item 6]	0	0	0	0	0	0	0	0	0
24	Item 15	Direct Taxes, Licenses & Fees [Exhibit 4B, Col (3), Item 7]	0	0	0	0	0	0	0	0	0
25	Item 16	Net Catastrophe Reinsurance [Exhibit 4B, Col (3), Item 9]	0	0	0	0	0	0	0	0	0
26	Item 17	LAD Fees Paid [Exhibit 4B, Col (3), Item 10]	0	0	0	0	0	0	0	0	0
27	Item 18	Total Expenses [Sum (Item 11 - Item 17)]	0	0	0	0	0	0	0	0	0
28											
29	Item 19	Underwriting Income [Item 6 - Item 9 - Item 18]	0	0	0	0	0	0	0	0	0
30	Item 20	Allowance for Pre-Tax Profit & Contingencies [Item 2 * 5.38% Pre-Tax]	0	0	0	0	0	0	0	0	0
31	Item 21	Actual Investment Income Earned [Exhibit 5B, Part 1, Item 15]	0	0	0	0	0	0	0	0	0
32	Item 22	Actuarial Gain [Item 19 - Item 20 + Item 21]	0	0	0	0	0	0	0	0	0
33											
34	Item 23	Total Development Adjustment [Input Sheet]	--	--	--	--	--	--	--	--	0
35	Item 24	Total Actuarial Gain [Item 22 - Item 23]	--	--	--	--	--	--	--	--	0
36											
37	Item 25	Additional Non-Excessive Profit Allowance [Item 2 * 3.85% Pre-Tax]	--	--	--	--	--	--	--	--	0
38	Item 26	Holding Company Non-Excessive Subsidization [Item 2 * 0.5%]	--	--	--	--	--	--	--	--	0
39	Item 27	Gross Excess Profit / (Loss) [Item 24 - Item 25 - Item 26]	--	--	--	--	--	--	--	--	0
40											
41	Item 28	Carryforward of Refund of Excess Profit [Exhibit 7B, Item 2]	0	0	0	0	0	0	0	0	0

	AC	AD	AE	AF *	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab							Section C
3	Company Name:	Name				PIP	XXX						
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
8	Exhibit 1												
9	Source: Annual Statement - NJ Page 14, Line 19.1												
10	Note: List data in Exclusions (Items 2a-2f) only if the data is included in Item 1.												
11	Direct Written Premium												
12	Col (1) Item 1	Total			-1	-2	-3	-4	-5	-6	-7	-8	-9
13	Col (1) Item 2a	Motorcycles			0	0	0	0	0	0	0	0	0
14	Col (1) Item 2b	Off-Road Vehicles			0	0	0	0	0	0	0	0	0
15	Col (1) Item 2c	Motor Homes			0	0	0	0	0	0	0	0	0
16	Col (1) Item 2d	Antique Autos			0	0	0	0	0	0	0	0	0
17	Col (1) Item 2e	Excess Liability			0	0	0	0	0	0	0	0	0
18	Col (1) Item 2f	Finance & Service Charges			0	0	0	0	0	0	0	0	0
19	Col (1) Item 4	UCJF Assessments			0	0	0	0	0	0	0	0	0
20													
21	Direct Earned Premium												
22	Col (2) Item 1	Total			0	0	0	0	0	0	0	0	0
23	Col (2) Item 2a	Motorcycles			0	0	0	0	0	0	0	0	0
24	Col (2) Item 2b	Off-Road Vehicles			0	0	0	0	0	0	0	0	0
25	Col (2) Item 2c	Motor Homes			0	0	0	0	0	0	0	0	0
26	Col (2) Item 2d	Antique Autos			0	0	0	0	0	0	0	0	0
27	Col (2) Item 2e	Excess Liability			0	0	0	0	0	0	0	0	0
28	Col (2) Item 2f	Finance & Service Charges			0	0	0	0	0	0	0	0	0
29	Col (2) Item 4	UCJF Assessments			0	0	0	0	0	0	0	0	0
30													
31	Paid Dividends (Incl. Excess Profit Refunds)												
32	Col (3A) Item 1	Total			0	0	0	0	0	0	0	0	0
33	Col (3A) Item 2a	Motorcycles			0	0	0	0	0	0	0	0	0
34	Col (3A) Item 2b	Off-Road Vehicles			0	0	0	0	0	0	0	0	0
35	Col (3A) Item 2c	Motor Homes			0	0	0	0	0	0	0	0	0
36	Col (3A) Item 2d	Antique Autos			0	0	0	0	0	0	0	0	0
37	Col (3A) Item 2e	Excess Liability			0	0	0	0	0	0	0	0	0
38													
39	Declared, but Unpaid Dividends (Incl. Excess Profit Refunds)												
40	Col (3B) Item 1	Total			0	0	0	0	0	0	0	0	0
41	Col (3B) Item 2a	Motorcycles			0	0	0	0	0	0	0	0	0
42	Col (3B) Item 2b	Off-Road Vehicles			0	0	0	0	0	0	0	0	0
43	Col (3B) Item 2c	Motor Homes			0	0	0	0	0	0	0	0	0
44	Col (3B) Item 2d	Antique Autos			0	0	0	0	0	0	0	0	0
45	Col (3B) Item 2e	Excess Liability			0	0	0	0	0	0	0	0	0
46													
47	Direct Unearned Premium Reserves												
48	Col (4) Item 1	Total			0	0	0	0	0	0	0	0	0
49	Col (4) Item 2a	Motorcycles			0	0	0	0	0	0	0	0	0
50	Col (4) Item 2b	Off-Road Vehicles			0	0	0	0	0	0	0	0	0
51	Col (4) Item 2c	Motor Homes			0	0	0	0	0	0	0	0	0
52	Col (4) Item 2d	Antique Autos			0	0	0	0	0	0	0	0	0
53	Col (4) Item 2e	Excess Liability			0	0	0	0	0	0	0	0	0
54													

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	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:		Name			BI Liab							Input Sheet
2	Group NAIC #:		#			PD Liab							Section C
3	Company Name:		Name			PIP	XXX						
4	Company NAIC #:		#			Phys Dam							
5	Year Filed:		0			TOTAL							
6													
7													
55	Direct Paid Loss												
56	Col (5)	Item 1	Total		0	0	0	0	0	0	0	0	0
57	Col (5)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
58	Col (5)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
59	Col (5)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
60	Col (5)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
61	Col (5)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
62	Col (5)	Item 4	Excess Medical Benefits		0	0	0	0	0	0	0	0	0
63													
64	Direct Incurred Loss (Case + Bulk/BNR)												
65	Col (6)	Item 1	Total		0	0	0	0	0	0	0	0	0
66	Col (6)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
67	Col (6)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
68	Col (6)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
69	Col (6)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
70	Col (6)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
71	Col (6)	Item 4	Excess Medical Benefits		0	0	0	0	0	0	0	0	0
72													
73	Direct Unpaid Loss (Case + Bulk/BNR)												
74	Col (7)	Item 1	Total		0	0	0	0	0	0	0	0	0
75	Col (7)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
76	Col (7)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
77	Col (7)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
78	Col (7)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
79	Col (7)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
80	Col (7)	Item 4	Excess Medical Benefits		0	0	0	0	0	0	0	0	0
81													
82	Direct Paid Defense & Cost Containment (ALAE)												
83	Col (8)	Item 1	Total		0	0	0	0	0	0	0	0	0
84	Col (8)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
85	Col (8)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
86	Col (8)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
87	Col (8)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
88	Col (8)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
89													
90	Direct Incurred ALAE (Case + Bulk/BNR)												
91	Col (9)	Item 1	Total		0	0	0	0	0	0	0	0	0
92	Col (9)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
93	Col (9)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
94	Col (9)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
95	Col (9)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
96	Col (9)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
97													
98	Direct Unpaid ALAE (Case + Bulk/BNR)												
99	Col (10)	Item 1	Total		0	0	0	0	0	0	0	0	0
100	Col (10)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
101	Col (10)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
102	Col (10)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
103	Col (10)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
104	Col (10)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
105													
106													

	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab							Section C
3	Company Name:	Name				PIP	XXX						
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
107	Exhibit 2 - Part 1												
108	Allocation of Page 14 data (from Exh 1) by Accident Year												
109													
110													
111	Incremental Direct Paid Loss												
112	Col (1) AY -1, Paid in the CY	0	XXX		XXX		XXX		XXX		XXX		XXX
113	Col (1) AY -2, Paid in the CY	0	0	XXX		XXX		XXX		XXX		XXX	XXX
114	Col (1) AY -3, Paid in the CY	0	0	0	XXX		XXX		XXX		XXX		XXX
115	Col (1) AY -4, Paid in the CY	0	0	0	0	0	XXX		XXX		XXX		XXX
116	Col (1) AY -5, Paid in the CY	0	0	0	0	0	0	0	XXX		XXX		XXX
117	Col (1) AY -6, Paid in the CY	0	0	0	0	0	0	0	0	0	XXX		XXX
118	Col (1) AY -7, Paid in the CY	0	0	0	0	0	0	0	0	0	0	XXX	XXX
119	Col (1) AY -8, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0	XXX
120	Col (1) AY -9, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0	0
121	Col (1) AY -10 & prior, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0	0
122	Total	0	0	0	0	0	0	0	0	0	0	0	0
123	Exhibit 1, Col (5)	0	0	0	0	0	0	0	0	0	0	0	0
124	Direct Unpaid Case Loss												
125	Col (3A) AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX		XXX		XXX		XXX
126	Col (3A) AY -2, Unpaid at the end of CY	0	0	XXX		XXX		XXX		XXX		XXX	XXX
127	Col (3A) AY -3, Unpaid at the end of CY	0	0	0	XXX		XXX		XXX		XXX		XXX
128	Col (3A) AY -4, Unpaid at the end of CY	0	0	0	0	0	XXX		XXX		XXX		XXX
129	Col (3A) AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX		XXX		XXX
130	Col (3A) AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX		XXX
131	Col (3A) AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	XXX	XXX
132	Col (3A) AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	XXX
133	Col (3A) AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
134	Col (3A) AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
135	Total	0	0	0	0	0	0	0	0	0	0	0	0
136													
137	Direct Unpaid Bulk/BNR Loss												
138	Col (3B) AY -1, Unpaid at the end of CY	0	XXX		XXX		XXX		XXX		XXX		XXX
139	Col (3B) AY -2, Unpaid at the end of CY	0	0	XXX		XXX		XXX		XXX		XXX	XXX
140	Col (3B) AY -3, Unpaid at the end of CY	0	0	0	XXX		XXX		XXX		XXX		XXX
141	Col (3B) AY -4, Unpaid at the end of CY	0	0	0	0	0	XXX		XXX		XXX		XXX
142	Col (3B) AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX		XXX		XXX
143	Col (3B) AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX		XXX
144	Col (3B) AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	XXX	XXX
145	Col (3B) AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	XXX
146	Col (3B) AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
147	Col (3B) AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
148	Total	0	0	0	0	0	0	0	0	0	0	0	0
149													
150	Total Col (3A) + Col (3B)	0	0	0	0	0	0	0	0	0	0	0	0
151	Exhibit 1, Col (7)	0	0	0	0	0	0	0	0	0	0	0	0
152													

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	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:		Name			BI Liab							Input Sheet
2	Group NAIC #:		#			PD Liab							Section C
3	Company Name:		Name			PIP	XXX						
4	Company NAIC #:		#			Phys Dam							
5	Year Filed:		0			TOTAL							
6													
7													
197	Exhibit 2 - Part 2												
198	Allocation of Calendar Quarter 1, by Accident Year												
199													
200	Incremental Direct Paid Loss												
201	Col (10)	AY 0, Paid in the CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
202	Col (10)	AY -1, Paid in the CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
203	Col (10)	AY -2, Paid in the CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
204	Col (10)	AY -3, Paid in the CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
205	Col (10)	AY -4, Paid in the CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
206	Col (10)	AY -5, Paid in the CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
207	Col (10)	AY -6, Paid in the CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
208	Col (10)	AY -7, Paid in the CQ		0	0	0	0	0	0	0	0	XXX	XXX
209	Col (10)	AY -8, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
210	Col (10)	AY -9, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
211	Col (10)	AY -10 & prior, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
212		Total		0	0	0	0	0	0	0	0	0	0
213													
214	Direct Unpaid Case Loss												
215	Col (12A)	AY 0, Unpaid at the end of CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
216	Col (12A)	AY -1, Unpaid at the end of CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
217	Col (12A)	AY -2, Unpaid at the end of CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
218	Col (12A)	AY -3, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
219	Col (12A)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
220	Col (12A)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
221	Col (12A)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
222	Col (12A)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
223	Col (12A)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
224	Col (12A)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
225	Col (12A)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
226		Total		0	0	0	0	0	0	0	0	0	0
227													
228	Direct Unpaid Bulk/BNR Loss												
229	Col (12B)	AY 0, Unpaid at the end of CQ		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
230	Col (12B)	AY -1, Unpaid at the end of CQ		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
231	Col (12B)	AY -2, Unpaid at the end of CQ		0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
232	Col (12B)	AY -3, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
233	Col (12B)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
234	Col (12B)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
235	Col (12B)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
236	Col (12B)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
237	Col (12B)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
238	Col (12B)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
239	Col (12B)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
240		Total		0	0	0	0	0	0	0	0	0	0
241													

	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:	Name				BI Liab							input Sheet
2	Group NAIC #:	#				PD Liab							Section C
3	Company Name:	Name				PIP	XXX						
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
242	Incremental Direct Paid ALAE												
243	Col (14)	AY 0, Paid in the CQ		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
244	Col (14)	AY -1, Paid in the CQ		0			XXX	XXX	XXX	XXX	XXX	XXX	XXX
245	Col (14)	AY -2, Paid in the CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
246	Col (14)	AY -3, Paid in the CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
247	Col (14)	AY -4, Paid in the CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
248	Col (14)	AY -5, Paid in the CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
249	Col (14)	AY -6, Paid in the CQ		0	0	0	0	0	0	0	0	XXX	XXX
250	Col (14)	AY -7, Paid in the CQ		0	0	0	0	0	0	0	0	0	XXX
251	Col (14)	AY -8, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
252	Col (14)	AY -9, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
253	Col (14)	AY -10 & prior, Paid in the CQ		0	0	0	0	0	0	0	0	0	0
254		Total		0	0	0	0	0	0	0	0	0	0
255													
256	Direct Unpaid Case ALAE												
257	Col (16A)	AY 0, Unpaid at the end of CQ		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
258	Col (16A)	AY -1, Unpaid at the end of CQ		0	0		XXX	XXX	XXX	XXX	XXX	XXX	XXX
259	Col (16A)	AY -2, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
260	Col (16A)	AY -3, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
261	Col (16A)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
262	Col (16A)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
263	Col (16A)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
264	Col (16A)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	XXX
265	Col (16A)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
266	Col (16A)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
267	Col (16A)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
268		Total		0	0	0	0	0	0	0	0	0	0
269													
270	Direct Unpaid Bulk/BNR ALAE												
271	Col (16B)	AY 0, Unpaid at the end of CQ		0	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
272	Col (16B)	AY -1, Unpaid at the end of CQ		0	0		XXX	XXX	XXX	XXX	XXX	XXX	XXX
273	Col (16B)	AY -2, Unpaid at the end of CQ		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
274	Col (16B)	AY -3, Unpaid at the end of CQ		0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
275	Col (16B)	AY -4, Unpaid at the end of CQ		0	0	0	0	0	0	XXX	XXX	XXX	XXX
276	Col (16B)	AY -5, Unpaid at the end of CQ		0	0	0	0	0	0	0	XXX	XXX	XXX
277	Col (16B)	AY -6, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	XXX	XXX
278	Col (16B)	AY -7, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	XXX
279	Col (16B)	AY -8, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
280	Col (16B)	AY -9, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
281	Col (16B)	AY -10 & prior, Unpaid at the end of CQ		0	0	0	0	0	0	0	0	0	0
282		Total		0	0	0	0	0	0	0	0	0	0
283													
284													
285	Exhibit 2 - Part 3												
286	Not Applicable												
287													
288	Col (19)	Direct incurred Loss - CW		XXX	-1	XXX	-2	XXX	-3	XXX	-4	XXX	-5
289	Col (20)	Direct incurred ALAE - CW		XXX		XXX		XXX		XXX		XXX	
290	Col (22)	Direct incurred ULAE - CW		XXX		XXX		XXX		XXX		XXX	
291													
292													
293	Exhibit 3												
294	Item 23	Tail Factor (99 months-ultimate)		1	000	Provide Documentation if greater than 1.000							
295		Development Adjustment (insurer's option)		0	Provide Documentation if greater than 0								
296													
297													

	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:		Name			BI Liab							Input Sheet
2	Group NAIC #:		#			PD Liab							Section C
3	Company Name:		Name			PIP	XXX						
4	Company NAIC #:		#			Phys Dam							
5	Year Filed:		0			TOTAL							
6													
7													
297	Exhibit 4												
	Calendar Year												
298	Not Applicable												
					-1	-2	-3	-4	-5	-6	-7	-8	-9
300	Col (1)	Item 1	Direct Written Premium - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
301	Col (1)	Item 2	Direct Earned Premium - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
302	Col (1)	Item 3	Direct Other Acquisition Expense - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
303	Col (1)	Item 4	Direct General Expense - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
304	Col (1)	Item 5	Direct Commission & Brokerage - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
305	Col (1)	Item 7	Direct Taxes, Licenses & Fees - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
306	Col (1)	Item 9	Net Catastrophe Reinsurance Exp. - CW		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
307	Source: Annual Statement - NJ Page 14, Line 19.1												
308	Col (3)	Item 5	Direct Commission & Brokerage - NJ		0	0	0	0	0	0	0	XXX	XXX
310	Col (3)	Item 7	Direct Taxes, Licenses & Fees - NJ		0	0	0	0	0	0	0	XXX	XXX
311	Col (3)	Item 9	Net Catastrophe Reinsurance Exp. - NJ		0	0	0	0	0	0	0	XXX	XXX
312	Col (3)	Item 10	LAD Fees Paid - NJ		0	0	0	0	0	0	0	XXX	XXX
313													
314													
315													
316													
317													
318													
319													
320	Exhibit 5												
	Purchase Year												
321	Not Applicable												
					-1	-2	-3	-4	-5	-6	-7	-8	-9
323	Part 1	Item 1	Agents Balances		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
324	Part 1	Item 2	Unearned Premium Reserve		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
325													
326	Part 2A	Item 1	Interest, Dividend & Real Estate Income		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
327	Part 2A	Item 2.1	Investment Expense Incurred		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
328	Part 2A	Item 2.2	Depreciation on Real Estate		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
329	Part 2A	Item 2.3	Unaffiliated Preferred Stock		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
330	Part 2A	Item 2.4	Affiliated Preferred Stock		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
331	Part 2A	Item 2.5	Unaffiliated Common Stock		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
332	Part 2A	Item 2.6	Affiliated Common Stock		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
333	Part 2A	Item 2.7	Other Invested Assets		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
334	Part 2A	Item 2.8	Real Estate for Co's Own Occupancy		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
335													
336	Part 2B	Item 4.1	Bonds Acquired		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
337	Part 2B	Item 4.2	Mortgage Loans on Real Estate		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
338	Part 2B	Item 4.3	Real Estate Acquired		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
339	Part 2B	Item 4.4	Collateral Loans		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
340	Part 2B	Item 4.5	Cash on Hand and on Deposit		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
341	Part 2B	Item 4.6	Short-Term Investments		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
342	Part 2B	Item 4.7	Derivative Instruments		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
343													
344													

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	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:		Name			BI Liab							Input Sheet
2	Group NAIC #:		#			PD Liab							Section C
3	Company Name:		Name			PIP	XXX						
4	Company NAIC #:		#			Phys Dam							
5	Year Filed:		0			TOTAL							
6													
7													
345	Exhibit B												
346	Not Applicable												
347					0000 (Estimated)	-1	-2	-3	-4	-5	-6	-7	
348	Cumulative AIRE Allocation Received												
349	Part 1	AY -1, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
350	Part 1	AY -2, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
351	Part 1	AY -3, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
352	Part 1	AY -4, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
353	Part 1	AY -5, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
354	Part 1	AY -6, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
355	Part 1	AY -7, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
356	Part 1	AY -8, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
357	Cumulative AIRE Investment Income Received												
358	Part 1	AY -1, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
359	Part 1	AY -2, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
360	Part 1	AY -3, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
361	Part 1	AY -4, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
362	Part 1	AY -5, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
363	Part 1	AY -6, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
364	Part 1	AY -7, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
365	Part 1	AY -8, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
366	Part 1	AY -8, Received through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
367	Cumulative AIRE Assessment Paid												
368	Part 3	AY -1, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
369	Part 3	AY -2, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
370	Part 3	AY -3, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
371	Part 3	AY -4, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
372	Part 3	AY -5, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
373	Part 3	AY -6, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
374	Part 3	AY -7, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
375	Part 3	AY -8, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
376	Part 3	AY -8, Paid through CY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
377													
378													

	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab							Section C
3	Company Name:	Name				PIP	XXX						
4	Company NAIC #:	#				Phys Dam							
5	Year Filed:	0				TOTAL							
6													
7													
378	Exhibit 7												
380	All data on Exhibit 7 is for New Jersey business only.												
381													
382	Calendar Year Excess Profit Paid												
383	Excess Profit Refund Paid												
384	Item 1												
385													
386	Excess Profit Carryforward Used												
387	Item 2.1	in AY -1											
388	Item 2.2	in AY -2											
389	Item 2.3	in AY -3											
390	Item 2.4	in AY -4	XXX										
391	Item 2.5	in AY -5	XXX	XXX									
392	Item 2.6	in AY -6	XXX	XXX	XXX								
393	Item 2.7	in AY -7	XXX	XXX	XXX	XXX							
394	Item 2.8	in AY -8	XXX	XXX	XXX	XXX	XXX						
395	Item 2.9	in AY -9	XXX	XXX	XXX	XXX	XXX	XXX					
396	Item 2.10	in AY -10	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
397	Item 2.11	in AY -11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
398													
399													
400	Calendar Year Excess Profit Paid												
401	Excess Profit Refund Paid												
402	Item 1												
403													
404	Excess Profit Carryforward Used												
405	Item 2.1	in AY -1											
406	Item 2.2	in AY -2											
407	Item 2.3	in AY -3											
408	Item 2.4	in AY -4											
409	Item 2.5	in AY -5											
410	Item 2.6	in AY -6											
411	Item 2.7	in AY -7											
412	Item 2.8	in AY -8											
413	Item 2.9	in AY -9											
414	Item 2.10	in AY -10											
415	Item 2.11	in AY -11											
416	Item 2.12	in AY -12											
417	Item 2.13	in AY -13											
418	Item 2.14	in AY -14	XXX										
419	Item 2.15	in AY -15	XXX	XXX									
420	Item 2.16	in AY -16	XXX	XXX	XXX								
421	Item 2.17	in AY -17	XXX	XXX	XXX	XXX							
422	Item 2.18	in AY -18	XXX	XXX	XXX	XXX	XXX						
423	Item 2.19	in AY -19	XXX	XXX	XXX	XXX	XXX	XXX					
424													

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	W	X	Y	Z	AA	AB	AC	AD	AE	AF
1	Group Name:	Name				BI Liab				Exhibit 1C
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP	XXX			
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Calendar Year -1			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
8				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
9				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
10				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
11	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
12	Item 2	Total Exclusions		0	0	0	0	0	0	0
13	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
14	Item 4	UCJF Assessments & Excess Medical Benefits		0	0	XXX	XXX	0	0	0
15										
16	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
17	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
18										
19										
20					Col (8)	Col (9)	Col (10)			
21					Direct	Direct	Direct			
22					Paid	Incurred	Unpaid			
23					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
24	Item 1	Source: Statutory Page 14		0	0	0	0			
25	Item 2	Total Exclusions		0	0	0	0			
26	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
27										
28										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
29	Group Name:	Name				BI Liab				Exhibit 1C
30	Group NAIC #:	#				PD Liab				Sheet 2
31	Company Name:	Name				PIP	XXX			
32	Company NAIC #:	#				Phys Dam				
33	Year Filed:	0				TOTAL				
34										
35	Calendar Year -2									
36			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
37			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
38			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
39	Item 1	Source: Statutory Page 14	Premium	Premium	Business	Premium	Losses	Losses	Losses	
40	Item 2	Total Exclusions	0	0	0	0	0	0	0	
41	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	
42	Item 2	UCJF Assessments & Excess Medical Benefits	0	0	XXX	XXX	0	0	0	
43										
44	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	
45	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	
46										
47										
48				Col (8)	Col (9)	Col (10)				
49				Direct	Direct	Direct				
50				Paid	Incurred	Unpaid				
51				ALAE	ALAE	ALAE				
52	Item 1	Source: Statutory Page 14	0	0	0	0				
53	Item 2	Total Exclusions	0	0	0	0				
54	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
55										
56										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
57	Group Name:	Name				BI Liab				Exhibit 1C Sheet 3
58	Group NAIC #:	#				PD Liab				
59	Company Name:	Name				PIP	XXX			
60	Company NAIC #:	#				Phys Dam				
61	Year Filed:	0				TOTAL				
62										
63	Calendar Year -3		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
64			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
65			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
66			Premium	Premium	Business	Premium	Losses	Losses	Losses	
67	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	
68	Item 2	Total Exclusions	0	0	0	0	0	0	0	
69	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	
70	Item 4	UCJF Assessments & Excess Medical Benefits	0	0	XXX	XXX	0	0	0	
71										
72	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	
73	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	
74										
75										
76				Col (8)	Col (9)	Col (10)				
77				Direct	Direct	Direct				
78				Paid	Incurred	Unpaid				
79				ALAE	ALAE	ALAE				
80	Item 1	Source: Statutory Page 14		0	0	0				
81	Item 2	Total Exclusions		0	0	0				
82	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
83										
84										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
85	Group Name: Name					BI Liab				Exhibit 1C
86	Group NAIC #: #					PD Liab				Sheet 4
87	Company Name: Name					PIP	XXX			
88	Company NAIC #: #					Phys Dam				
89	Year Filed: 0					TOTAL				
90										
91	Calendar Year -4			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
92				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
93				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
94				Premium	Premium	Business	Premium	Losses	Losses	Losses
95	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
96	Item 2	Total Exclusions		0	0	0	0	0	0	0
97	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
98	Item 4	UCJF Assessments & Excess Medical Benefits		0	0	XXX	XXX	0	0	0
99										
100	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
101	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
102										
103										
104					Col (8)	Col (9)	Col (10)			
105					Direct	Direct	Direct			
106					Paid	Incurred	Unpaid			
107					ALAE	ALAE	ALAE			
108	Item 1	Source: Statutory Page 14		0	0	0	0			
109	Item 2	Total Exclusions		0	0	0	0			
110	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
111										
112										

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	W	X	Y	Z	AA	AB	AC	AD	AE	AF
113	Group Name:		Name			BI Liab				Exhibit 1C
114	Group NAIC #:		#			PD Liab				Sheet 5
115	Company Name:		Name			PIP	XXX			
116	Company NAIC #:		#			Phys Dam				
117	Year Filed:		0			TOTAL				
118										
119	Calendar Year -5			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
120				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
121				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
122				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
123	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
124	Item 2	Total Exclusions		0	0	0	0	0	0	0
125	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
126	Item 4	UCJF Assessments & Excess Medical Benefits		0	0	XXX	XXX	0	0	0
127										
128	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
129	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
130										
131										
132				Col (8)	Col (9)	Col (10)				
133				Direct	Direct	Direct				
134				Paid	Incurred	Unpaid				
135				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
136	Item 1	Source: Statutory Page 14		0	0	0				
137	Item 2	Total Exclusions		0	0	0				
138	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
139										
140										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
141	Group Name:	Name				BI Liab				Exhibit 1C
142	Group NAIC #:	#				PD Liab				Sheet 6
143	Company Name:	Name				PIP	XXX			
144	Company NAIC #:	#				Phys Dam				
145	Year Filed:	0				TOTAL				
146										
147	Calendar Year -6			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
148				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
149				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
150				Premium	Premium	Business	Premium	Losses	Losses	Losses
151	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
152	Item 2	Total Exclusions		0	0	0	0	0	0	0
153	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
154	Item 4	UCJF Assessments & Excess Medical Benefits		0	0	XXX	XXX	0	0	0
155										
156	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
157	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
158										
159										
160					Col (8)	Col (9)	Col (10)			
161					Direct	Direct	Direct			
162					Paid	Incurred	Unpaid			
163					ALAE	ALAE	ALAE			
164	Item 1	Source: Statutory Page 14		0	0	0	0			
165	Item 2	Total Exclusions		0	0	0	0			
166	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
167										
168										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
169	Group Name: Name					BI Liab				Exhibit 1C
170	Group NAIC #: #					PD Liab				Sheet 7
171	Company Name: Name					PIP	XXX			
172	Company NAIC #: #					Phys Dam				
173	Year Filed: 0					TOTAL				
174										
175	Calendar Year -7			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
176				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
177				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
178				Premium	Premium	Business	Premium	Losses	Losses	Losses
179	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
180	Item 2	Total Exclusions		0	0	0	0	0	0	0
181	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
182	Item 4	UCJF Assessments & Excess Medical Benefits		0	0	XXX	XXX	0	0	0
183										
184	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
185	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
186										
187										
188					Col (8)	Col (9)	Col (10)			
189					Direct	Direct	Direct			
190					Paid	Incurred	Unpaid			
191					ALAE	ALAE	ALAE			
192	Item 1	Source: Statutory Page 14		0	0	0	0			
193	Item 2	Total Exclusions		0	0	0	0			
194	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
195										
196										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
197	Group Name:	Name				BI Liab				Exhibit 1C
198	Group NAIC #:	#				PD Liab				Sheet 8
199	Company Name:	Name				PIP	XXX			
200	Company NAIC #:	#				Phys Dam				
201	Year Filed:	0				TOTAL				
202										
203	Calendar Year -8		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
204			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
205			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
206			Premium	Premium	Business	Premium	Losses	Losses	Losses	
207	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
208	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
209	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
210	Item 4	UCJF Assessments & Excess Medical Benefits	0	0	XXX	XXX	0	0	0	0
211										
212	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
213	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
214										
215										
216				Col (8)	Col (9)	Col (10)				
217				Direct	Direct	Direct				
218				Paid	Incurred	Unpaid				
219				ALAE	ALAE	ALAE				
220	Item 1	Source: Statutory Page 14	0	0	0	0				
221	Item 2	Total Exclusions	0	0	0	0				
222	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
223										
224										

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	W	X	Y	Z	AA	AB	AC	AD	AE	AF
225	Group Name:	Name				BI Liab				Exhibit 1C
226	Group NAIC #:	#				PD Liab				Sheet 9
227	Company Name:	Name				PIP	XXX			
228	Company NAIC #:	#				Phys Dam				
229	Year Filed:	0				TOTAL				
230										
231	Calendar Year -9		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
232			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
233			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
234			Premium	Premium	Business	Premium	Losses	Losses	Losses	
235	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
236	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
237	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
238	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
239										
240	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
241	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
242										
243										
244				Col (8)	Col (9)	Col (10)				
245				Direct	Direct	Direct				
246				Paid	Incurred	Unpaid				
247				ALAE	ALAE	ALAE				
248	Item 1	Source: Statutory Page 14		0	0	0				
249	Item 2	Total Exclusions		0	0	0				
250	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
251										
252										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
1	Group Name:	Name				BI Liab				Exhibit 2C
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP	XXX			
4	Company NAIC #:	#				Phys Dam				
5	Year Filed:	0				TOTAL				
6										
7	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
8	Calendar Year -1	Incremental Paid Loss	Cumulative Paid Loss	Case Unpaid Loss	Case Incurred Loss	Incremental Paid ALAE	Cumulative Paid ALAE	Case Unpaid ALAE	Case Incurred ALAE	Case Incurred Loss+ALAE
9		@ 12/31-01	@ 12/31-01	@ 12/31-01	@ 12/31-01	@ 12/31-01	@ 12/31-01	Col (3), Item 5b]	@ 12/31-01	@ 12/31-01
10	Accident Year									
11	-1	0	0	0	0	0	0	0	0	0
12	-2	0	0	0	0	0	0	0	0	0
13	-3	0	0	0	0	0	0	0	0	0
14	-4	0	0	0	0	0	0	0	0	0
15	-5	0	0	0	0	0	0	0	0	0
16	-6	0	0	0	0	0	0	0	0	0
17	-7	0	0	0	0	0	0	0	0	0
18	-8	0	0	0	0	0	0	0	0	0
19	-9	0	0	0	0	0	0	0	0	0
20	-10 & prior	0	0	0	0	0	0	0	0	0
21	Total	0	0	0	0	0	0	0	0	0
22										
23	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
24	Calendar Qtr 0-1	Incremental Paid Loss	Cumulative Paid Loss	Case Unpaid Loss	Case Incurred Loss	Incremental Paid ALAE	Cumulative Paid ALAE	Case Unpaid ALAE	Case Incurred ALAE	Case Incurred Loss+ALAE
25		@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00	@ 3/31/00
26	Accident Year									
27	0	0	0	0	0	0	0	0	0	0
28	-1	0	0	0	0	0	0	0	0	0
29	-2	0	0	0	0	0	0	0	0	0
30	-3	0	0	0	0	0	0	0	0	0
31	-4	0	0	0	0	0	0	0	0	0
32	-5	0	0	0	0	0	0	0	0	0
33	-6	0	0	0	0	0	0	0	0	0
34	-7	0	0	0	0	0	0	0	0	0
35	-8	0	0	0	0	0	0	0	0	0
36	-9	0	0	0	0	0	0	0	0	0
37	-10 & prior	0	0	0	0	0	0	0	0	0
38	Total	0	0	0	0	0	0	0	0	0
39										
40	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
41	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
42	-1	0	0	0	0	0.000				
43	-2	0	0	0	0	0.000				
44	-3	0	0	0	0	0.000				
45	Average					0.000				
46	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
47										
48										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
49	Group Name:	Name				BI Liab				Exhibit 2C
50	Group NAIC #:	#				FD Liab				Sheet 2
51	Company Name:	Name				PIP	XXX			
52	Company NAIC #:	#				Phys Dam				
53	Year Filed:	0				TOTAL				
54										
55	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
56	Calendar Year -2	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
57		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
58	Accident Year	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02	@ 12/31-02
59	-2	0	0	0	0	0	0	0	0	0
60	-3	0	0	0	0	0	0	0	0	0
61	-4	0	0	0	0	0	0	0	0	0
62	-5	0	0	0	0	0	0	0	0	0
63	-6	0	0	0	0	0	0	0	0	0
64	-7	0	0	0	0	0	0	0	0	0
65	-8	0	0	0	0	0	0	0	0	0
66	-9	0	0	0	0	0	0	0	0	0
67	-10 & prior	0	0	0	0	0	0	0	0	0
68	Total	0	0	0	0	0	0	0	0	0
69										
70	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
71	Calendar Qtr -1-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
72		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
73	Accident Year	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01	@ 3/31-01
74	-1	0	0	0	0	0	0	0	0	0
75	-2	0	0	0	0	0	0	0	0	0
76	-3	0	0	0	0	0	0	0	0	0
77	-4	0	0	0	0	0	0	0	0	0
78	-5	0	0	0	0	0	0	0	0	0
79	-6	0	0	0	0	0	0	0	0	0
80	-7	0	0	0	0	0	0	0	0	0
81	-8	0	0	0	0	0	0	0	0	0
82	-9	0	0	0	0	0	0	0	0	0
83	-10 & prior	0	0	0	0	0	0	0	0	0
84	Total	0	0	0	0	0	0	0	0	0
85										
88	Part 3	Col (19)	Col (20)	Col (21)	Col (21)	Col (22)				
87	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Inc. Loss+ALAE	Incurred ULAE				
88	-2	0	0	0	0	0.000				
89	-3	0	0	0	0	0.000				
90	-4	0	0	0	0	0.000				
91	Average					0.000				
92	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
93										
94										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
95	Group Name:	Name				BI Liab				Exhibit 2C
96	Group NAIC #:	#				PD Liab				Sheet 3
97	Company Name:	Name				PIP	XXX			
98	Company NAIC #:	#				Phys Dam				
99	Year Filed:	0				TOTAL				
100										
101	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
102	Calendar Year -3	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
103		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
104	<u>Accident Year</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>	<u>@ 12/31/03</u>
105	-3	0	0	0	0	0	0	0	0	0
106	-4	0	0	0	0	0	0	0	0	0
107	-5	0	0	0	0	0	0	0	0	0
108	-6	0	0	0	0	0	0	0	0	0
109	-7	0	0	0	0	0	0	0	0	0
110	-8	0	0	0	0	0	0	0	0	0
111	-9	0	0	0	0	0	0	0	0	0
112	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
113	Total	0	0	0	0	0	0	0	0	0
114										
115	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
116	Calendar Qtr -2-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
117		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
118	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
119	-2	0	0	0	0	0	0	0	0	0
120	-3	0	0	0	0	0	0	0	0	0
121	-4	0	0	0	0	0	0	0	0	0
122	-5	0	0	0	0	0	0	0	0	0
123	-6	0	0	0	0	0	0	0	0	0
124	-7	0	0	0	0	0	0	0	0	0
125	-8	0	0	0	0	0	0	0	0	0
126	-9	0	0	0	0	0	0	0	0	0
127	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
128	Total	0	0	0	0	0	0	0	0	0
129										
130	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
131	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
132	-3	0	0	0	0	0.000				
133	-4	0	0	0	0	0.000				
134	-5	0	0	0	0	0.000				
135	Average					0.000				
136	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
137										
138										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
139	Group Name:	Name				BI Liab				Exhibit 2C
140	Group NAIC #:	#				PD Liab				Sheet 4
141	Company Name:	Name				PIP	XXX			
142	Company NAIC #:	#				Phys Dam				
143	Year Filed:	0				TOTAL				
144										
145	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
146	Calendar Year -4	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
147		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
148	<u>Accident Year</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>	<u>@ 12/31/04</u>
149	-4	0	0	0	0	0	0	0	0	0
150	-5	0	0	0	0	0	0	0	0	0
151	-6	0	0	0	0	0	0	0	0	0
152	-7	0	0	0	0	0	0	0	0	0
153	-8	0	0	0	0	0	0	0	0	0
154	-9	0	0	0	0	0	0	0	0	0
155	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
156	Total	0	0	0	0	0	0	0	0	0
157										
158	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
159	Calendar Qtr -3-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
160		Paid Loss	Paid Loss	Unpaid ALAE	Incurred ALAE	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
161	<u>Accident Year</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>	<u>@ 3/31/03</u>
162	-3	0	0	0	0	0	0	0	0	0
163	-4	0	0	0	0	0	0	0	0	0
164	-5	0	0	0	0	0	0	0	0	0
165	-6	0	0	0	0	0	0	0	0	0
166	-7	0	0	0	0	0	0	0	0	0
167	-8	0	0	0	0	0	0	0	0	0
168	-9	0	0	0	0	0	0	0	0	0
169	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
170	Total	0	0	0	0	0	0	0	0	0
171										
172	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
173	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
174	-4	0	0	0	0	0.000				
175	-5	0	0	0	0	0.000				
176	-6	0	0	0	0	0.000				
177	Average					0.000				
178	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
179										
180										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
181	Group Name:	Name				BI Liab				Exhibit 2C
182	Group NAIC #:	#				PD Liab				Sheet 5
183	Company Name:	Name				PIP	XXX			
184	Company NAIC #:	#				Phys Dam				
185	Year Filed:	0				TOTAL				
186										
187	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
188	Calendar Year -5	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
189		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
190	<u>Accident Year</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>	<u>@ 12/31/05</u>
191	-5	0	0	0	0	0	0	0	0	0
192	-6	0	0	0	0	0	0	0	0	0
193	-7	0	0	0	0	0	0	0	0	0
194	-8	0	0	0	0	0	0	0	0	0
195	-9	0	0	0	0	0	0	0	0	0
196	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
197	Total	0	0	0	0	0	0	0	0	0
198										
199	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
200	Calendar Qtr -4-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
201		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
202	<u>Accident Year</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>	<u>@ 3/31/04</u>
203	-4	0	0	0	0	0	0	0	0	0
204	-5	0	0	0	0	0	0	0	0	0
205	-6	0	0	0	0	0	0	0	0	0
206	-7	0	0	0	0	0	0	0	0	0
207	-8	0	0	0	0	0	0	0	0	0
208	-9	0	0	0	0	0	0	0	0	0
209	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
210	Total	0	0	0	0	0	0	0	0	0
211										
212	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
213	<u>Calendar Year</u>	<u>Incurred Loss</u>	<u>Incurred ALAE</u>	<u>Inc. Loss+ALAE</u>	<u>Incurred ULAE</u>	<u>ULAE Ratio</u>				
214	-5	0	0	0	0	0.000				
215	-6	0	0	0	0	0.000				
216	-7	0	0	0	0	0.000				
217	Average					0.000				
218	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
219										
220										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
221	Group Name:	Name				BI Liab				Exhibit 2C
222	Group NAIC #:	#				PD Liab				Sheet 6
223	Company Name:	Name				PIP	XXX			
224	Company NAIC #:	#				Phys Dam				
225	Year Filed:	0				TOTAL				
226										
227	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
228	Calendar Year -6	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
229		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
230	<u>Accident Year</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>	<u>@ 12/31-06</u>
231	-6	0	0	0	0	0	0	0	0	0
232	-7	0	0	0	0	0	0	0	0	0
233	-8	0	0	0	0	0	0	0	0	0
234	-9	0	0	0	0	0	0	0	0	0
235	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
236	Total	0	0	0	0	0	0	0	0	0
237										
238	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
239	Calendar Qtr -5-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
240		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
241	<u>Accident Year</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>	<u>@ 3/31-05</u>
242	-5	0	0	0	0	0	0	0	0	0
243	-6	0	0	0	0	0	0	0	0	0
244	-7	0	0	0	0	0	0	0	0	0
245	-8	0	0	0	0	0	0	0	0	0
246	-9	0	0	0	0	0	0	0	0	0
247	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
248	Total	0	0	0	0	0	0	0	0	0
249										
250	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
251	<u>Calendar Year</u>	<u>Incurred Loss</u>	<u>Incurred ALAE</u>	<u>Inc. Loss+ALAE</u>	<u>Incurred ULAE</u>	<u>ULAE Ratio</u>				
252	-6	0	0	0	0	0.000				
253	-7	0	0	0	0	0.000				
254	-8	0	0	0	0	0.000				
255	Average					0.000				
256	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
257										
258										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
259	Group Name:	Name				BI Liab				Exhibit 2C
260	Group NAIC #:	#				PD Liab				Sheet 7
261	Company Name:	Name				PIP	XXX			
262	Company NAIC #:	#				Phys Dam				
263	Year Filed:	0				TOTAL				
264										
265	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
266	Calendar Year -7	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
267		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
268	<u>Accident Year</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>
269	-7	0	0	0	0	0	0	0	0	0
270	-8	0	0	0	0	0	0	0	0	0
271	-9	0	0	0	0	0	0	0	0	0
272	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
273	Total	0	0	0	0	0	0	0	0	0
274										
275	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
276	Calendar Qtr -6-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
277		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
278	<u>Accident Year</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>
279	-6	0	0	0	0	0	0	0	0	0
280	-7	0	0	0	0	0	0	0	0	0
281	-8	0	0	0	0	0	0	0	0	0
282	-9	0	0	0	0	0	0	0	0	0
283	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
284	Total	0	0	0	0	0	0	0	0	0
285										
286	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
287	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
288	-7	0	0	0	0	0.000				
289	-8	0	0	0	0	0.000				
290	-9	0	0	0	0	0.000				
291	Average					0.000				
292	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
293										
294										

3-90.113

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
295	Group Name:	Name				BI Liab				Exhibit 2C
296	Group NAIC #:	#				PD Liab				Sheet 8
297	Company Name:	Name				PIP	XXX			
298	Company NAIC #:	#				Phys Dam				
299	Year Filed:	0				TOTAL				
300										
301	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
302	Calendar Year -8	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
303		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
304	Accident Year	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08	@ 12/31-08
305	-8	0	0	0	0	0	0	0	0	0
306	-9	0	0	0	0	0	0	0	0	0
307	-10 & prior	0	0	0	0	0	0	0	0	0
308	Total	0	0	0	0	0	0	0	0	0
309										
310	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
311	Calendar Qtr -7-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
312		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
313	Accident Year	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07	@ 3/31-07
314	-7	0	0	0	0	0	0	0	0	0
315	-8	0	0	0	0	0	0	0	0	0
316	-9	0	0	0	0	0	0	0	0	0
317	-10 & prior	0	0	0	0	0	0	0	0	0
318	Total	0	0	0	0	0	0	0	0	0
319										
320										

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
321	Group Name:	Name				BI Liab	XXX			Exhibit 2C
322	Group NAIC #:	#				PD Liab				Sheet 9
323	Company Name:	Name				PIP				
324	Company NAIC #:	#				Phys Dam				
325	Year Filed:	0				TOTAL				
326										
327	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
328	Calendar Year -9	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
329		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
330	<u>Accident Year</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>	<u>@ 12/31-09</u>
331	-10 & prior	0	0	0	0	0	0	0	0	0
332	-10 & prior	0	0	0	0	0	0	0	0	0
333	Total	0	0	0	0	0	0	0	0	0
334										
335	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
336	Calendar Qtr -8-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
337		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
338	<u>Accident Year</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>	<u>@ 3/31-08</u>
339	-8	0	0	0	0	0	0	0	0	0
340	-8	0	0	0	0	0	0	0	0	0
341	-10 & prior	0	0	0	0	0	0	0	0	0
342	Total	0	0	0	0	0	0	0	0	0
343										
344										

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Supp. 3-15-04

	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL
1	Group Name:	Name				BI Liab						Exhibit 3C
2	Group NAIC #:	#				PD Liab						
3	Company Name:	Name				PIP	XXX					
4	Company NAIC #:	#				Phys Dam						
5	Year Filed:	0				TOTAL						
6												
7												
8	Part 1											
9	Cumulative											
10	Case Incurred											
11	Loss + ALAE											
12	as of	-9	-8	-7	-6	-5	-4	-3	-2	-1		
13	15 months	0	0	0	0	0	0	0	0	0		0
14	27 months	0	0	0	0	0	0	0	0	0		
15	39 months	0	0	0	0	0	0	0	0	0		
16	51 months	0	0	0	0	0	0	0	0	0		
17	63 months	0	0	0	0	0	0	0	0	0		
18	75 months	0	0	0	0	0	0	0	0	0		
19	87 months	0	0	0	0	0	0	0	0	0		
20	99 months	0	0	0	0	0	0	0	0	0		
21												
22	Part 2											
23	Development										Col (A)	Col (B)
24	Factors	-9	-8	-7	-6	-5	-4	-3	-2		Incremental	Development
25	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	LDF	Factors
26	27-39 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	15 mo. - ult.
27	39-51 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	27 mo. - ult.
28	51-63 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	39 mo. - ult.
29	63-75 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	51 mo. - ult.
30	75-87 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	63 mo. - ult.
31	87-99 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	75 mo. - ult.
32											1.000	87 mo. - ult.
33											Tail Factor:	1.000
34	Part 3											
35		Col (1)	Col (2)	Col (3)								
36		Case Incurred	Loss + ALAE	Projected								
37		Loss + ALAE	Development	Ultimate								
38	Accident Year	@ 3/31/00	Factor	Loss + ALAE	@ 3/31/00							
39	-1	0	1.000	0								
40	-2	0	1.000	0								
41	-3	0	1.000	0								
42	-4	0	1.000	0								
43	-5	0	1.000	0								
44	-6	0	1.000	0								
45	-7	0	1.000	0								

	Q	R	S	T	U	V	W
1	Group Name:	Name		BI Liab			Exhibit 4C
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP		XXX	
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
7							
8				Part 1 - Countrywide		Part 2 - New Jersey	
9				Insurance Expense Exhibit		Statutory Page 14	
10				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
11		<u>Calendar Year -1</u>					
12	Item 1	Direct Written Premium	\$0			\$0	
13	Item 2	Direct Earned Premium	0			0	
14	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
15	Item 4	Direct General Expense	0	0.00%		0	0.00%
16	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
17	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
18	Item 6b	Allowable Capped Expense	--	--		0	24.40%
19	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
20	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
21	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
22	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
23	Item 10	LAD Fees Paid	--	--		0	0.00%
24							
25				Part 1 - Countrywide		Part 2 - New Jersey	
26				Insurance Expense Exhibit		Statutory Page 14	
27				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
28		<u>Calendar Year -2</u>					
29	Item 1	Direct Written Premium	\$0			\$0	
30	Item 2	Direct Earned Premium	0			0	
31	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
32	Item 4	Direct General Expense	0	0.00%		0	0.00%
33	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
34	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
35	Item 6b	Allowable Capped Expense	--	--		0	24.40%
36	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
37	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
38	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
39	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
40	Item 10	LAD Fees Paid	--	--		0	0.00%
41							
42				Part 1 - Countrywide		Part 2 - New Jersey	
43				Insurance Expense Exhibit		Statutory Page 14	
44				<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
45		<u>Calendar Year -3</u>					
46	Item 1	Direct Written Premium	\$0			\$0	
47	Item 2	Direct Earned Premium	0			0	
48	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
49	Item 4	Direct General Expense	0	0.00%		0	0.00%
50	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
51	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
52	Item 6b	Allowable Capped Expense	--	--		0	24.40%
53	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
54	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
55	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
56	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
57	Item 10	LAD Fees Paid	--	--		0	0.00%

Q	R	S	T	U	V	W
1	Group Name:	Name	BI Liab			Exhibit 4C
2	Group NAIC #:	#	PD Liab			
3	Company Name:	Name	PIP		XXX	
4	Company NAIC #:	#	Phys Dam			
5	Year Filed:	0	TOTAL			
6						
58			Part 1 - Countrywide		Part 2 - New Jersey	
59			Insurance Expense Exhibit		Statutory Page 14	
60			<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
61		<u>Calendar Year -4</u>				
62	Item 1	Direct Written Premium	\$0		\$0	
63	Item 2	Direct Earned Premium	0		0	
64	Item 3	Direct Other Acquisition Expense	0	0.00%	0	0.00%
65	Item 4	Direct General Expense	0	0.00%	0	0.00%
66	Item 5	Direct Commission & Brokerage	0	0.00%	0	0.00%
67	Item 6a	Expenses subject to Capping (Items 3-5)	--	--	0	0.00%
68	Item 6b	Allowable Capped Expense	--	--	0	24.40%
69	Item 6	Additional Allowable Efficiency Expense	--	--	0	24.40%
70	Item 7	Direct Taxes, Licenses & Fees	0	0.00%	0	0.00%
71	Item 8	Direct Prepaid Expenses	0	0.00%	0	0.00%
72	Item 9	Net Catastrophe Reinsurance	0	0.00%	0	0.00%
73	Item 10	LAD Fees Paid	--	--	0	0.00%
74						
75			Part 1 - Countrywide		Part 2 - New Jersey	
76			Insurance Expense Exhibit		Statutory Page 14	
77			<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
78		<u>Calendar Year -5</u>				
79	Item 1	Direct Written Premium	\$0		\$0	
80	Item 2	Direct Earned Premium	0		0	
81	Item 3	Direct Other Acquisition Expense	0	0.00%	0	0.00%
82	Item 4	Direct General Expense	0	0.00%	0	0.00%
83	Item 5	Direct Commission & Brokerage	0	0.00%	0	0.00%
84	Item 6a	Expenses subject to Capping (Items 3-5)	--	--	0	0.00%
85	Item 6b	Allowable Capped Expense	--	--	0	24.40%
86	Item 6	Additional Allowable Efficiency Expense	--	--	0	24.40%
87	Item 7	Direct Taxes, Licenses & Fees	0	0.00%	0	0.00%
88	Item 8	Direct Prepaid Expenses	0	0.00%	0	0.00%
89	Item 9	Net Catastrophe Reinsurance	0	0.00%	0	0.00%
90	Item 10	LAD Fees Paid	--	--	0	0.00%
91						
92			Part 1 - Countrywide		Part 2 - New Jersey	
93			Insurance Expense Exhibit		Statutory Page 14	
94			<u>Col (1)</u>	<u>Col (2)</u>	<u>Col (3)</u>	<u>Col (4)</u>
95		<u>Calendar Year -6</u>				
96	Item 1	Direct Written Premium	\$0		\$0	
97	Item 2	Direct Earned Premium	0		0	
98	Item 3	Direct Other Acquisition Expense	0	0.00%	0	0.00%
99	Item 4	Direct General Expense	0	0.00%	0	0.00%
100	Item 5	Direct Commission & Brokerage	0	0.00%	0	0.00%
101	Item 6a	Expenses subject to Capping (Items 3-5)	--	--	0	0.00%
102	Item 6b	Allowable Capped Expense	--	--	0	24.40%
103	Item 6	Additional Allowable Efficiency Expense	--	--	0	24.40%
104	Item 7	Direct Taxes, Licenses & Fees	0	0.00%	0	0.00%
105	Item 8	Direct Prepaid Expenses	0	0.00%	0	0.00%
106	Item 9	Net Catastrophe Reinsurance	0	0.00%	0	0.00%
107	Item 10	LAD Fees Paid	--	--	0	0.00%
108	825003					

	Q	R	S	T	U	V	W
1	Group Name:	Name		BI Liab			Exhibit 4C
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP		XXX	
4	Company NAIC #:	#		Phys Dam			
5	Year Filed:	0		TOTAL			
6							
109			Part 1 - Countrywide			Part 2 - New Jersey	
110			Insurance Expense Exhibit			Statutory Page 14	
111			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
112		<u>Calendar Year -7</u>					
113	Item 1	Direct Written Premium	\$0			\$0	
114	Item 2	Direct Eamed Premium	0			0	
115	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
116	Item 4	Direct General Expense	0	0.00%		0	0.00%
117	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
118	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
119	Item 6b	Allowable Capped Expense	--	--		0	24.40%
120	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.40%
121	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
122	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
123	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
124	Item 10	LAD Fees Paid	--	--		0	0.00%

3-90.119

Supp. 3-15-04

	V	W	X	Y	Z	AA	AB	AC	AD
1	Group Name:	Name			BI Liab				Exhibit 5C
2	Group NAIC #:	#			PD Liab				Part 1
3	Company Name:	Name			PIP	XXX			
4	Company NAIC #:	#			Phys Dam				
5	Year Filed:	0			TOTAL				
6									
7									
8	Part 1		-7	-6	-5	-4	-3	-2	-1
9	Item 1	Agents Balances	0	0	0	0	0	0	0
10	Item 2	Unearned Premium Reserve	0	0	0	0	0	0	0
11	Item 3	Agents Balance Ratio [Item 1 / Item 2]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
12	Item 4	Direct Prepaid Expenses - NJ (Exhibit 4)	0	0	0	0	0	0	0
13	Item 5	Direct Net Written Premium - NJ (Exhibit 4)	0	0	0	0	0	0	0
14	Item 6	Prepaid Expense Ratio [Item 4 / Item 5]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
15	Item 7a	Direct Unearned Premium Reserve - Beginning (Exhibit 1)	0	0	0	0	0	0	0
16	Item 7b	Direct Unearned Premium Reserve - Ending (Exhibit 1)	0	0	0	0	0	0	0
17	Item 7	Average Unearned Premium Reserve [(Item 7a + Item 7b) / 2]	0	0	0	0	0	0	0
18	Item 8	Investable Unearned Premium [Item 7 * (1 - Item 3 - Item 6)]	0	0	0	0	0	0	0
19	Item 9a	Direct Unpaid Loss - Beginning (Exhibit 1)	0	0	0	0	0	0	0
20	Item 9b	Direct Unpaid Loss - Ending (Exhibit 1)	0	0	0	0	0	0	0
21	Item 9	Average Loss Reserve [(Item 9a + Item 9b) / 2]	0	0	0	0	0	0	0
22	Item 10a	Direct Unpaid ALAE - Beginning (Exhibit 1)	0	0	0	0	0	0	0
23	Item 10b	Direct Unpaid ALAE - Ending (Exhibit 1)	0	0	0	0	0	0	0
24	Item 10	Average ALAE Reserve [(Item 10a + Item 10b) / 2]	0	0	0	0	0	0	0
25	Item 11	ULAE Factor (Exhibit 2)	0.000	0.000	0.000	0.000	0.000	0.000	0.000
26	Item 12	Average Loss + LAE Reserve [(Item 9 + Item 10) * Item 11]	0	0	0	0	0	0	0
27	Item 13	Total Reserve [Item 8 + Item 12]	0	0	0	0	0	0	0
28	Item 14	Pre-Tax Rate of Return (Part 2C, Item 8, 3-Yr Total)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
29	Item 15	Actual Investment Income Earned [Item 13 * Item 14]	0	0	0	0	0	0	0

	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ
1	Group Name:		Name					BI Liab		Exhibit 7C
2	Group NAIC #:		#					PD Liab		Sheet 1
3	Company Name:		Name					PIP	XXX	
4	Company NAIC #:		#					Phys Dam		
5	Year Filed:		0					TOTAL		
6										
7										
8			Calendar Year							
9			0	-1	-2	-3	-4	-5	-6	-7
10	Item 1 Excess Profit Paid		0	0	0	0	0	0	0	0
11										
12										
13	Carryforward Used		Calendar Year Excess Profit Paid							
14	for Accident Year		0	-1	-2	-3	-4	-5	-6	-7
15	Item 2.1	-1	0	0	0	0	0	0	0	0
16	Item 2.2	-2	0	0	0	0	0	0	0	0
17	Item 2.3	-3	0	0	0	0	0	0	0	0
18	Item 2.4	-4	XXX	0	0	0	0	0	0	0
19	Item 2.5	-5	XXX	XXX	0	0	0	0	0	0
20	Item 2.6	-6	XXX	XXX	XXX	0	0	0	0	0
21	Item 2.7	-7	XXX	XXX	XXX	XXX	0	0	0	0
22	Item 2.8	-8	XXX	XXX	XXX	XXX	XXX	0	0	0
23	Item 2.9	-9	XXX	XXX	XXX	XXX	XXX	XXX	0	0
24	Item 2.10	-10	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
25	Item 2.11	-11	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26	Item 2.12	-12	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
27	Item 2.13	-13	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28	Item 2.14	-14	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
29	Item 2.15	-15	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Item 2.16	-16	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31	Item 2.17	-17	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32	Item 2.18	-18	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33	Item 2.19	-19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34										
35	Item 2 Total Carryforward Used		0	0	0	0	0	0	0	0
36										
37	Item 3 Carryforward Unused		0	0	0	0	0	0	0	0

	BA	BB	BC	BD	BE	BF	BG	BH	BI	BJ
1	Group Name:		Name					BI Liab		Exhibit 7C Sheet 2
2	Group NAIC #:		#					PD Liab		
3	Company Name:		Name					PIP	XXX	
4	Company NAIC #:		#					Phys Dam		
5	Year Filed:		0					TOTAL		
6										
7										
8	Calendar Year									
9	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
10	0	0	0	0	0	0	0	0	0	0
11										
12										
13	Calendar Year Excess Profit Paid									
14	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
15	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0
23	0	0	0	0	0	0	0	0	0	0
24	0	0	0	0	0	0	0	0	0	0
25	0	0	0	0	0	0	0	0	0	0
26	XXX	0	0	0	0	0	0	0	0	0
27	XXX	XXX	0	0	0	0	0	0	0	0
28	XXX	XXX	XXX	0	0	0	0	0	0	0
29	XXX	XXX	XXX	XXX	0	0	0	0	0	0
30	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
31	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
32	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
34										
35	0	0	0	0	0	0	0	0	0	0
36										
37	0	0	0	0	0	0	0	0	0	0

	W	X	Y	Z	AA	AB	AC	AD	AE	AF
1	Group Name:	Name					BI Liab			Exhibit 9C
2	Group NAIC #:	#					PD Liab			
3	Company Name:	Name					PIP	XXX		
4	Company NAIC #:	#					Phys Dam			
5	Year Filed:	0					TOTAL			
6										
7			-7	-6	-5	-4	-3	-2	-1	Total
8	Item 1	Direct Calendar Year Written Premium [Exhibit 1C, Col (1), Item 3]	0	0	0	0	0	0	0	0
9	Item 2	Direct Calendar Year Earned Premium [Exhibit 1C, Col (2), Item 3]	0	0	0	0	0	0	0	0
10	Item 3	UCJF Assessment [Exhibit 1C, Col (2), Item 4]	0	0	0	0	0	0	0	0
11	Item 4	Dividends excluding Refund of Excess Profit [Exhibit 1C, Col (3), Item 5b]	0	0	0	0	0	0	0	0
12	Item 5	Net AIRE [Exhibit 6, Part 7, Col (3)]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13	Item 6	Direct CY Net Earned Premium [Item 2 - Item 3 - Item 4 + Item 5]	0	0	0	0	0	0	0	0
14										
15	Item 7	Direct Accident Year Ultimate Loss & ALAE [Exhibit 3C, Part 3, Col (3)]	0	0	0	0	0	0	0	0
16	Item 8	ULAE Ratio [Exhibit 2C, Part 3, Col (23)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Item 9	Direct Accident Year Ultimate Loss & LAE [Item 7 * Item 8]	0	0	0	0	0	0	0	0
18	Item 10	Direct Accident Year Ultimate Loss & LAE Ratio [Item 9 / Item 6]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
19										
20	Item 11	Direct Commission & Brokerage [Exhibit 4C, Col (3), Item 5]	0	0	0	0	0	0	0	0
21	Item 12	Direct Other Acquisition Expense [Exhibit 4C, Col (3), Item 3]	0	0	0	0	0	0	0	0
22	Item 13	Direct General Expense [Exhibit 4C, Col (3), Item 4]	0	0	0	0	0	0	0	0
23	Item 14	Additional Allowable Expense [Exhibit 4C, Col (3), Item 6]	0	0	0	0	0	0	0	0
24	Item 15	Direct Taxes, Licenses & Fees [Exhibit 4C, Col (3), Item 7]	0	0	0	0	0	0	0	0
25	Item 16	Net Catastrophe Reinsurance [Exhibit 4C, Col (3), Item 9]	0	0	0	0	0	0	0	0
26	Item 17	LAD Fees Paid [Exhibit 4C, Col (3), Item 10]	0	0	0	0	0	0	0	0
27	Item 18	Total Expenses [Sum (Item 11 - Item 17)]	0	0	0	0	0	0	0	0
28										
29	Item 19	Underwriting Income [Item 6 - Item 9 - Item 18]	0	0	0	0	0	0	0	0
30	Item 20	Allowance for Pre-Tax Profit & Contingencies [Item 2 * 5.38% Pre-Tax]	0	0	0	0	0	0	0	0
31	Item 21	Actual Investment Income Earned [Exhibit 5C, Part 1, Item 15]	0	0	0	0	0	0	0	0
32	Item 22	Actuarial Gain [Item 19 - Item 20 + Item 21]	0	0	0	0	0	0	0	0
33										
34	Item 23	Total Development Adjustment [Input Sheet]	--	--	--	--	--	--	--	0
35	Item 24	Total Actuarial Gain [Item 22 - Item 23]	--	--	--	--	--	--	--	0
36										
37	Item 25	Additional Non-Excessive Profit Allowance [Item 2 * 3.85% Pre-Tax]	--	--	--	--	--	--	--	0
38	Item 26	Holding Company Non-Excessive Subsidization [Item 2 * 0.5%]	--	--	--	--	--	--	--	0
39	Item 27	Gross Excess Profit / (Loss) [Item 24 - Item 25 - Item 26]	--	--	--	--	--	--	--	0
40										
41	Item 28	Carryforward of Refund of Excess Profit [Exhibit 7C, Item 2]	0	0	0	0	0	0	0	0

3-90.123

	AG	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:		Name										Input Sheet
2	Group NAIC #:		#										Section D
3	Company Name:		Name										
4	Company NAIC #:		#										
5	Year Filed:		0										
6													
7													
8	Exhibit 1												
9	Source: Annual Statement - NJ Page 14, Line 21.1												
10	Note: List data in Exclusions (Items 2a-2f) only if the data is included in Item 1.												
11	Direct Written Premium												
12	Col (1)	Item 1	Total	0	0	0	0	0	0	0	0	0	0
13	Col (1)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0
14	Col (1)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0
15	Col (1)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0
16	Col (1)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0
17	Col (1)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0
18	Col (1)	Item 2f	Finance & Service Charges	0	0	0	0	0	0	0	0	0	0
19	Col (1)	Item 4	UCJF Assessments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
20	Direct Earned Premium												
22	Col (2)	Item 1	Total	0	0	0	0	0	0	0	0	0	0
23	Col (2)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0
24	Col (2)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0
25	Col (2)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0
26	Col (2)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0
27	Col (2)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0
28	Col (2)	Item 2f	Finance & Service Charges	0	0	0	0	0	0	0	0	0	0
29	Col (2)	Item 4	UCJF Assessments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Paid Dividends (incl. Excess Profit Refunds)												
32	Col (3A)	Item 1	Total	0	0	0	0	0	0	0	0	0	0
33	Col (3A)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0
34	Col (3A)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0
35	Col (3A)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0
36	Col (3A)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0
37	Col (3A)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0
38	Declared, but Unpaid Dividends (incl. Excess Profit Refunds)												
40	Col (3B)	Item 1	Total	0	0	0	0	0	0	0	0	0	0
41	Col (3B)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0
42	Col (3B)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0
43	Col (3B)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0
44	Col (3B)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0
45	Col (3B)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0
46	Direct Unearned Premium Reserves												
48	Col (4)	Item 1	Total	0	0	0	0	0	0	0	0	0	0
49	Col (4)	Item 2a	Motorcycles	0	0	0	0	0	0	0	0	0	0
50	Col (4)	Item 2b	Off-Road Vehicles	0	0	0	0	0	0	0	0	0	0
51	Col (4)	Item 2c	Motor Homes	0	0	0	0	0	0	0	0	0	0
52	Col (4)	Item 2d	Antique Autos	0	0	0	0	0	0	0	0	0	0
53	Col (4)	Item 2e	Excess Liability	0	0	0	0	0	0	0	0	0	0
54													

	AD	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:	Name				BI Liab							Input Sheet
2	Group NAIC #:	#				PD Liab							Section D
3	Company Name:	Name				PIP							
4	Company NAIC #:	#				Phys Dam	XXX						
5	Year Filled:	0				TOTAL							
6													
7													
55	Direct Paid Loss												
56	Col (5)	Item 1	Total		0	0	0	0	0	0	0	0	0
57	Col (5)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
58	Col (5)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
59	Col (5)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
60	Col (5)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
61	Col (5)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
62	Col (5)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
63													
64	Direct Incurred Loss (Case + Bulk/BNR)												
65	Col (6)	Item 1	Total		0	0	0	0	0	0	0	0	0
66	Col (6)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
67	Col (6)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
68	Col (6)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
69	Col (6)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
70	Col (6)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
71	Col (6)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
72													
73	Direct Unpaid Loss (Case + Bulk/BNR)												
74	Col (7)	Item 1	Total		0	0	0	0	0	0	0	0	0
75	Col (7)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
76	Col (7)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
77	Col (7)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
78	Col (7)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
79	Col (7)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
80	Col (7)	Item 4	Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
81													
82	Direct Paid Defense & Cost Containment (ALAE)												
83	Col (8)	Item 1	Total		0	0	0	0	0	0	0	0	0
84	Col (8)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
85	Col (8)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
86	Col (8)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
87	Col (8)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
88	Col (8)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
89													
90	Direct Incurred ALAE (Case + Bulk/BNR)												
91	Col (9)	Item 1	Total		0	0	0	0	0	0	0	0	0
92	Col (9)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
93	Col (9)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
94	Col (9)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
95	Col (9)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
96	Col (9)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
97													
98	Direct Unpaid ALAE (Case + Bulk/BNR)												
99	Col (10)	Item 1	Total		0	0	0	0	0	0	0	0	0
100	Col (10)	Item 2a	Motorcycles		0	0	0	0	0	0	0	0	0
101	Col (10)	Item 2b	Off-Road Vehicles		0	0	0	0	0	0	0	0	0
102	Col (10)	Item 2c	Motor Homes		0	0	0	0	0	0	0	0	0
103	Col (10)	Item 2d	Antique Autos		0	0	0	0	0	0	0	0	0
104	Col (10)	Item 2e	Excess Liability		0	0	0	0	0	0	0	0	0
105													
106													

	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC	
1	Group Name:		Name		BI Liab								Input Sheet	
2	Group NAIC #:		#		PD Liab								Section D	
3	Company Name:		Name		PIP									
4	Company NAIC #:		#		Phys Dam		XXX							
5	Year Filed:		0		TOTAL									
6														
7														
107	Exhibit 2 - Part 1													
108	Allocation of Page 14 data (from Exh 1) by Accident Year													
109														
110	Calendar Year Paid Loss													
111						-1	-2	-3	-4	-5	-6	-7	-8	-9
111	Col (1)	AY -1, Paid in the CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
112	Col (1)	AY -2, Paid in the CY	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
113	Col (1)	AY -3, Paid in the CY	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
114	Col (1)	AY -4, Paid in the CY	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
115	Col (1)	AY -5, Paid in the CY	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
116	Col (1)	AY -6, Paid in the CY	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
117	Col (1)	AY -7, Paid in the CY	0	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX
118	Col (1)	AY -8, Paid in the CY	0	0	0	0	0	0	0	0	0	XXX	0	XXX
119	Col (1)	AY -9, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0	0
120	Col (1)	AY -10 & prior, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0	0
121	Total		0	0	0	0	0	0	0	0	0	0	0	0
122	Exhibit 1, Col (5)		0	0	0	0	0	0	0	0	0	0	0	0
123														
124	Direct Unpaid Case Loss													
125	Col (3A)	AY -1, Unpaid at the end of CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
126	Col (3A)	AY -2, Unpaid at the end of CY	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
127	Col (3A)	AY -3, Unpaid at the end of CY	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
128	Col (3A)	AY -4, Unpaid at the end of CY	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
129	Col (3A)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
130	Col (3A)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
131	Col (3A)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX
132	Col (3A)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0	XXX
133	Col (3A)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
134	Col (3A)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
135	Total		0	0	0	0	0	0	0	0	0	0	0	0
136														
137	Direct Unpaid Bulk/BNR Loss													
138	Col (3B)	AY -1, Unpaid at the end of CY	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
139	Col (3B)	AY -2, Unpaid at the end of CY	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
140	Col (3B)	AY -3, Unpaid at the end of CY	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
141	Col (3B)	AY -4, Unpaid at the end of CY	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
142	Col (3B)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
143	Col (3B)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX
144	Col (3B)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	XXX	XXX	XXX	XXX
145	Col (3B)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0	XXX
146	Col (3B)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
147	Col (3B)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0	0
148	Total		0	0	0	0	0	0	0	0	0	0	0	0
149														
150	Total Col (3A) + Col (3B)		0	0	0	0	0	0	0	0	0	0	0	0
151	Exhibit 1, Col (7)		0	0	0	0	0	0	0	0	0	0	0	0
152														

	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:		Name		BI Liab								Input Sheet
2	Group NAIC #:		#		PD Liab								Section D
3	Company Name:		Name		PIP								
4	Company NAIC #:		#		Phys Dam		XXX						
5	Year Filed:		0		TOTAL								
6													
7													
153	Incremental Direct Paid ALAE												
154	Col (5)	AY -1, Paid in the CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
155	Col (5)	AY -2, Paid in the CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
156	Col (5)	AY -3, Paid in the CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
157	Col (5)	AY -4, Paid in the CY	0	0	0	0	0	0	0	XXX	0	XXX	0
158	Col (5)	AY -5, Paid in the CY	0	0	0	0	0	0	0	0	0	XXX	0
159	Col (5)	AY -6, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
160	Col (5)	AY -7, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
161	Col (5)	AY -8, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
162	Col (5)	AY -9, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
163	Col (5)	AY -10 & prior, Paid in the CY	0	0	0	0	0	0	0	0	0	0	0
164	Total		0	0	0	0	0	0	0	0	0	0	0
165	Exhibit 1, Col (8)		0	0	0	0	0	0	0	0	0	0	0
166													
167	Direct Unpaid Case ALAE												
168	Col (7A)	AY -1, Unpaid at the end of CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
169	Col (7A)	AY -2, Unpaid at the end of CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
170	Col (7A)	AY -3, Unpaid at the end of CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
171	Col (7A)	AY -4, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	0	XXX	0
172	Col (7A)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0
173	Col (7A)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
174	Col (7A)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
175	Col (7A)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
176	Col (7A)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
177	Col (7A)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
178	Total		0	0	0	0	0	0	0	0	0	0	0
179													
180	Direct Unpaid Bulk/BNR ALAE												
181	Col (7B)	AY -1, Unpaid at the end of CY	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
182	Col (7B)	AY -2, Unpaid at the end of CY	0	0	0	XXX	0	XXX	0	XXX	0	XXX	0
183	Col (7B)	AY -3, Unpaid at the end of CY	0	0	0	0	0	XXX	0	XXX	0	XXX	0
184	Col (7B)	AY -4, Unpaid at the end of CY	0	0	0	0	0	0	0	XXX	0	XXX	0
185	Col (7B)	AY -5, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	XXX	0
186	Col (7B)	AY -6, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
187	Col (7B)	AY -7, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
188	Col (7B)	AY -8, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
189	Col (7B)	AY -9, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
190	Col (7B)	AY -10 & prior, Unpaid at the end of CY	0	0	0	0	0	0	0	0	0	0	0
191	Total		0	0	0	0	0	0	0	0	0	0	0
192													
193	Total Col (7A) + Col (7B)		0	0	0	0	0	0	0	0	0	0	0
194	Exhibit 1, Col (10)		0	0	0	0	0	0	0	0	0	0	0
195													
196													

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	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC	
1	Group Name:	Name				BI Liab							Input Sheet	
2	Group NAIC #:	#				PD Liab							Section D	
3	Company Name:	Name				PIP								
4	Company NAIC #:	#				Phys Dam	XXX							
5	Year Filed:	0				TOTAL								
6														
7														
197	Exhibit 2 - Part 2													
198	Allocation of Calendar Quarter 1, by Accident Year													
199						First Quarter Paid Loss								
200						1Q-0	1Q-1	1Q-2	1Q-3	1Q-4	1Q-5	1Q-6	1Q-7	1Q-8
201	Col (10)	AY 0, Paid in the CQ				0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
202	Col (10)	AY -1, Paid in the CQ				0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
203	Col (10)	AY -2, Paid in the CQ				0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
204	Col (10)	AY -3, Paid in the CQ				0	0	0	0	XXX	XXX	XXX	XXX	XXX
205	Col (10)	AY -4, Paid in the CQ				0	0	0	0	0	XXX	XXX	XXX	XXX
206	Col (10)	AY -5, Paid in the CQ				0	0	0	0	0	0	XXX	XXX	XXX
207	Col (10)	AY -6, Paid in the CQ				0	0	0	0	0	0	0	XXX	XXX
208	Col (10)	AY -7, Paid in the CQ				0	0	0	0	0	0	0	0	XXX
209	Col (10)	AY -8, Paid in the CQ				0	0	0	0	0	0	0	0	0
210	Col (10)	AY -9, Paid in the CQ				0	0	0	0	0	0	0	0	0
211	Col (10)	AY -10 & prior, Paid in the CQ				0	0	0	0	0	0	0	0	0
212		Total				0	0	0	0	0	0	0	0	0
213														
214	Direct Unpaid Case Loss													
215	Col (12A)	AY 0, Unpaid at the end of CQ				0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
216	Col (12A)	AY -1, Unpaid at the end of CQ				0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
217	Col (12A)	AY -2, Unpaid at the end of CQ				0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
218	Col (12A)	AY -3, Unpaid at the end of CQ				0	0	0	0	XXX	XXX	XXX	XXX	XXX
219	Col (12A)	AY -4, Unpaid at the end of CQ				0	0	0	0	0	XXX	XXX	XXX	XXX
220	Col (12A)	AY -5, Unpaid at the end of CQ				0	0	0	0	0	0	XXX	XXX	XXX
221	Col (12A)	AY -6, Unpaid at the end of CQ				0	0	0	0	0	0	0	XXX	XXX
222	Col (12A)	AY -7, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	XXX
223	Col (12A)	AY -8, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
224	Col (12A)	AY -9, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
225	Col (12A)	AY -10 & prior, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
226		Total				0	0	0	0	0	0	0	0	0
227														
228	Direct Unpaid Bulk/IBNR Loss													
229	Col (12B)	AY 0, Unpaid at the end of CQ				0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
230	Col (12B)	AY -1, Unpaid at the end of CQ				0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX
231	Col (12B)	AY -2, Unpaid at the end of CQ				0	0	0	XXX	XXX	XXX	XXX	XXX	XXX
232	Col (12B)	AY -3, Unpaid at the end of CQ				0	0	0	0	XXX	XXX	XXX	XXX	XXX
233	Col (12B)	AY -4, Unpaid at the end of CQ				0	0	0	0	0	XXX	XXX	XXX	XXX
234	Col (12B)	AY -5, Unpaid at the end of CQ				0	0	0	0	0	0	XXX	XXX	XXX
235	Col (12B)	AY -6, Unpaid at the end of CQ				0	0	0	0	0	0	0	XXX	XXX
236	Col (12B)	AY -7, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	XXX
237	Col (12B)	AY -8, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
238	Col (12B)	AY -9, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
239	Col (12B)	AY -10 & prior, Unpaid at the end of CQ				0	0	0	0	0	0	0	0	0
240		Total				0	0	0	0	0	0	0	0	0
241														

	AO	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:		Name										Input Sheet
2	Group NAIC #:		#										Section D
3	Company Name:		Name										
4	Company NAIC #:		#										
5	Year Filed:		0										
6													
7													
242	Incremental Direct Paid ALAE												
243	Col (14)	AY 0, Paid in the CQ	0	XXX		XXX		XXX		XXX		XXX	XXX
244	Col (14)	AY -1, Paid in the CQ	0		0	XXX		XXX		XXX		XXX	XXX
245	Col (14)	AY -2, Paid in the CQ	0		0		0	XXX		XXX		XXX	XXX
246	Col (14)	AY -3, Paid in the CQ	0		0		0		0	XXX		XXX	XXX
247	Col (14)	AY -4, Paid in the CQ	0		0		0		0		0	XXX	XXX
248	Col (14)	AY -5, Paid in the CQ	0		0		0		0		0		XXX
249	Col (14)	AY -6, Paid in the CQ	0		0		0		0				XXX
250	Col (14)	AY -7, Paid in the CQ	0		0		0		0			0	XXX
251	Col (14)	AY -8, Paid in the CQ	0		0		0		0			0	0
252	Col (14)	AY -9, Paid in the CQ	0		0		0		0			0	0
253	Col (14)	AY -10 & prior, Paid in the CQ	0		0		0		0			0	0
254	Total		0		0		0		0		0	0	0
255													
256	Direct Unpaid Case ALAE												
257	Col (16A)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX	XXX
258	Col (16A)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX	XXX
259	Col (16A)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX	XXX
260	Col (16A)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX	XXX
261	Col (16A)	AY -4, Unpaid at the end of CQ	0		0		0		0		0	XXX	XXX
262	Col (16A)	AY -5, Unpaid at the end of CQ	0		0		0		0		0		XXX
263	Col (16A)	AY -6, Unpaid at the end of CQ	0		0		0		0		0		XXX
264	Col (16A)	AY -7, Unpaid at the end of CQ	0		0		0		0		0	0	XXX
265	Col (16A)	AY -8, Unpaid at the end of CQ	0		0		0		0		0	0	0
266	Col (16A)	AY -9, Unpaid at the end of CQ	0		0		0		0		0	0	0
267	Col (16A)	AY -10 & prior, Unpaid at the end of CQ	0		0		0		0		0	0	0
268	Total		0		0		0		0		0	0	0
269													
270	Direct Unpaid Bulk/IBNR ALAE												
271	Col (16B)	AY 0, Unpaid at the end of CQ	0	XXX		XXX		XXX		XXX		XXX	XXX
272	Col (16B)	AY -1, Unpaid at the end of CQ	0		0	XXX		XXX		XXX		XXX	XXX
273	Col (16B)	AY -2, Unpaid at the end of CQ	0		0		0	XXX		XXX		XXX	XXX
274	Col (16B)	AY -3, Unpaid at the end of CQ	0		0		0		0	XXX		XXX	XXX
275	Col (16B)	AY -4, Unpaid at the end of CQ	0		0		0		0		0	XXX	XXX
276	Col (16B)	AY -5, Unpaid at the end of CQ	0		0		0		0		0		XXX
277	Col (16B)	AY -6, Unpaid at the end of CQ	0		0		0		0		0		XXX
278	Col (16B)	AY -7, Unpaid at the end of CQ	0		0		0		0		0	0	XXX
279	Col (16B)	AY -8, Unpaid at the end of CQ	0		0		0		0		0	0	0
280	Col (16B)	AY -9, Unpaid at the end of CQ	0		0		0		0		0	0	0
281	Col (16B)	AY -10 & prior, Unpaid at the end of CQ	0		0		0		0		0	0	0
282	Total		0		0		0		0		0	0	0
283													
284													
285	Exhibit 2 - Part 3												
286	Source: Countrywide Insurance Expense Exhibit (IEE),												
287	Part 3, Line 21.1												
288	Col (19)	Direct Incurred Loss - CW	-1	-2	-3	-4	-5	-6	-7	-8	-9	-9	-9
289	Col (20)	Direct Incurred ALAE - CW	0	0	0	0	0	0	0	0	0	0	0
290	Col (22)	Direct Incurred ULAE - CW	0	0	0	0	0	0	0	0	0	0	0
291													
292													
293	Exhibit 3		Tail Factor (99 months-ultimate)		XXX	Not Applicable							
294	Item 23		Development Adjustment (insurer's option)		0	Provide Documentation if greater than 0							
295													
296													

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	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:		Name		BI Liab								Input Sheet
2	Group NAIC #:		#		PD Liab								Section D
3	Company Name:		Name		PIP								
4	Company NAIC #:		#		Phys Dam		XXX						
5	Year Filled:		0		TOTAL								
6													
7													
297	Exhibit 4												
298	Source: Countrywide Insurance Expense Exhibit (IEE).												
299	Part 3, Line 21.1 (except Item 9)												
300	Col (1)	Item 1	Direct Written Premium - CW	0	0	0	0	0	0	0	0	XXX	XXX
301	Col (1)	Item 2	Direct Earned Premium - CW	0	0	0	0	0	0	0	0	XXX	XXX
302	Col (1)	Item 3	Direct Other Acquisition Expense - CW	0	0	0	0	0	0	0	0	XXX	XXX
303	Col (1)	Item 4	Direct General Expense - CW	0	0	0	0	0	0	0	0	XXX	XXX
304	Col (1)	Item 5	Direct Commission & Brokerage - CW	0	0	0	0	0	0	0	0	XXX	XXX
305	Col (1)	Item 7	Direct Taxes, Licenses & Fees - CW	0	0	0	0	0	0	0	0	XXX	XXX
306	Col (1)	Item 9	Net Catastrophe Reinsurance Exp. - CW	0	0	0	0	0	0	0	0	XXX	XXX
307													
308	Source: Annual Statement - Page 14 for NJ, Line 21.1												
309	Col (3)	Item 5	Direct Commission & Brokerage - NJ	0	0	0	0	0	0	0	0	XXX	XXX
310	Col (3)	Item 7	Direct Taxes, Licenses & Fees - NJ	0	0	0	0	0	0	0	0	XXX	XXX
311	Col (3)	Item 9	Net Catastrophe Reinsurance Exp. - NJ	0	0	0	0	0	0	0	0	XXX	XXX
312	Col (3)	Item 10	LAD Fees Paid - NJ	0	0	0	0	0	0	0	0	XXX	XXX
313													
314													
315													
316													
317													
318													
319													
320	Exhibit 5												
321	Not Applicable												
322	Purchase Year												
323	Part 1	Item 1	Agents Balances	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
324	Part 1	Item 2	Unearned Premium Reserve	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
325													
326	Part 2A	Item 1	Interest, Dividend & Real Estate Income	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
327	Part 2A	Item 2.1	Investment Expense Incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
328	Part 2A	Item 2.2	Depreciation on Real Estate	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
329	Part 2A	Item 2.3	Unaffiliated Preferred Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
330	Part 2A	Item 2.4	Affiliated Preferred Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
331	Part 2A	Item 2.5	Unaffiliated Common Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
332	Part 2A	Item 2.6	Affiliated Common Stock	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
333	Part 2A	Item 2.7	Other Invested Assets	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
334	Part 2A	Item 2.8	Real Estate for Co's Own Occupancy	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
335													
336	Part 2B	Item 4.1	Bonds Acquired	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
337	Part 2B	Item 4.2	Mortgage Loans on Real Estate	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
338	Part 2B	Item 4.3	Real Estate Acquired	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
339	Part 2B	Item 4.4	Collateral Loans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
340	Part 2B	Item 4.5	Cash on Hand and on Deposit	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
341	Part 2B	Item 4.6	Short-Term Investments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
342	Part 2B	Item 4.7	Derivative Instruments	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
343													
344													

	AG	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC
1	Group Name:		Name			BI Liab							Input Sheet
2	Group NAIC #:		#			PD Liab							Section D
3	Company Name:		Name			PIP							
4	Company NAIC #:		#			Phys Dam	XXX						
5	Year Filed:		0			TOTAL							
6													
7													
345	Exhibit 6												
346	Not Applicable												
347						Calendar Year ending 3/31							
348						0000 (Estimated)	-1	-2	-3	-4	-5	-6	-7
349	Cumulative AIRE Allocation Received												
349	Part 1	AY -1, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
350	Part 1	AY -2, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
351	Part 1	AY -3, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
352	Part 1	AY -4, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
353	Part 1	AY -5, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
354	Part 1	AY -6, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
355	Part 1	AY -7, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
356	Part 1	AY -8, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
357													
358	Cumulative AIRE Investment Income Received												
359	Part 1	AY -1, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
360	Part 1	AY -2, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
361	Part 1	AY -3, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
362	Part 1	AY -4, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
363	Part 1	AY -5, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
364	Part 1	AY -6, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
365	Part 1	AY -7, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
366	Part 1	AY -8, Received through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
367													
368	Cumulative AIRE Assessment Paid												
369	Part 3	AY -1, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
370	Part 3	AY -2, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
371	Part 3	AY -3, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
372	Part 3	AY -4, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
373	Part 3	AY -5, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
374	Part 3	AY -6, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
375	Part 3	AY -7, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
376	Part 3	AY -8, Paid through CY			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
377													
378													

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
1	Group Name:	Name				BI Liab				Exhibit 1D
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam	XXX			
5	Year Filed:	0				TOTAL				
6										
7	Calendar Year -1		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
8			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
9			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
10			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
11	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
12	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
13	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
14	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
15										
16	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
17	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
18										
19										
20				Col (8)	Col (9)	Col (10)				
21				Direct	Direct	Direct				
22				Paid	Incurred	Unpaid				
23				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
24	Item 1	Source: Statutory Page 14	0	0	0	0				
25	Item 2	Total Exclusions	0	0	0	0				
26	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
27										
28										

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	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
29	Group Name:	Name				BI Liab				Exhibit 1D
30	Group NAIC #:	#				PD Liab				Sheet 2
31	Company Name:	Name				PIP				
32	Company NAIC #:	#				Phys Dam	XXX			
33	Year Filed:	0				TOTAL				
34										
35	Calendar Year -2		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
36			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
37			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
38			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
39	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
40	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
41	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
42	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43										
44	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
45	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
46										
47										
48				Col (8)	Col (9)	Col (10)				
49				Direct	Direct	Direct				
50				Paid	Incurred	Unpaid				
51				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
52	Item 1	Source: Statutory Page 14		0	0	0				
53	Item 2	Total Exclusions		0	0	0				
54	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
55										
56										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
57	Group Name:	Name				BI Liab				Exhibit 1D
58	Group NAIC #:	#				PD Liab				Sheet 3
59	Company Name:	Name				PIP				
60	Company NAIC #:	#				Phys Dam	XXX			
61	Year Filed:	0				TOTAL				
62										
63	Calendar Year -3		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
64			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	Direct
65			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
66			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
67	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
68	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
69	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
70	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
71										
72	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
73	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
74										
75										
76				Col (8)	Col (9)	Col (10)				
77				Direct	Direct	Direct				
78				Paid	Incurred	Unpaid				
79				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
80	Item 1	Source: Statutory Page 14	0	0	0	0				
81	Item 2	Total Exclusions	0	0	0	0				
82	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0				
83										
84										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
85	Group Name:	Name				BI Liab				Exhibit 1D
86	Group NAIC #:	#				PD Liab				Sheet 4
87	Company Name:	Name				PIP				
88	Company NAIC #:	#				Phys Dam	XXX			
89	Year Filed:	0				TOTAL				
90										
91	Calendar Year -4		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
92			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
93			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
94			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
95	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
96	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
97	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
98	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
99										
100	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
101	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
102										
103										
104				Col (8)	Col (9)	Col (10)				
105				Direct	Direct	Direct				
106				Paid	Incurred	Unpaid				
107				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
108	Item 1	Source: Statutory Page 14		0	0	0				
109	Item 2	Total Exclusions		0	0	0				
110	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
111										
112										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
113	Group Name:	Name				BI Liab				Exhibit 1D
114	Group NAIC #:	#				PD Liab				Sheet 5
115	Company Name:	Name				PIP				
116	Company NAIC #:	#				Phys Dam	XXX			
117	Year Filed:	0				TOTAL				
118										
119	Calendar Year -5		Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	
120			Direct	Direct	Dividends	Direct	Direct	Direct	Direct	
121			Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid	
122			<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>	
123	Item 1	Source: Statutory Page 14	0	0	0	0	0	0	0	0
124	Item 2	Total Exclusions	0	0	0	0	0	0	0	0
125	Item 3	Excess Profit Data (Item 1 - Item 2)	0	0	0	0	0	0	0	0
126	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
127										
128	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
129	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
130										
131										
132				Col (8)	Col (9)	Col (10)				
133				Direct	Direct	Direct				
134				Paid	Incurred	Unpaid				
135				<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>				
136	Item 1	Source: Statutory Page 14		0	0	0				
137	Item 2	Total Exclusions		0	0	0				
138	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0				
139										
140										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
141	Group Name:		Name			BI Liab				Exhibit 1D
142	Group NAIC #:		#			PD Liab				Sheet 6
143	Company Name:		Name			PIP				
144	Company NAIC #:		#			Phys Dam	XXX			
145	Year Filed:		0			TOTAL				
146										
147	Calendar Year -6			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
148				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
149				Written	Eamed	on Direct	Unearned	Paid	Incurred	Unpaid
150				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
151	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
152	Item 2	Total Exclusions		0	0	0	0	0	0	0
153	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
154	Item 4	UCJF Assessments & Excess Medical Benefits		XXX	XXX	XXX	XXX	XXX	XXX	XXX
155										
156	Item 5a	Refund of Excess Profit, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
157	Item 5b	All Other Dividends, included in Col (3)		XXX	XXX	0	XXX	XXX	XXX	XXX
158										
159										
160					Col (8)	Col (9)	Col (10)			
161					Direct	Direct	Direct			
162					Paid	Incurred	Unpaid			
163					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
164	Item 1	Source: Statutory Page 14		0	0	0	0			
165	Item 2	Total Exclusions		0	0	0	0			
166	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
167										
168										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
169	Group Name:	Name				BI Liab				Exhibit 1D
170	Group NAIC #:	#				PD Liab				Sheet 7
171	Company Name:	Name				PIP				
172	Company NAIC #:	#				Phys Dam	XXX			
173	Year Filed:	0				TOTAL				
174										
175	Calendar Year -7			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
176				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
177				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
178				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
179	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
180	Item 2	Total Exclusions		0	0	0	0	0	0	0
181	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
182	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
183										
184	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
185	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
186										
187										
188					Col (8)	Col (9)	Col (10)			
189					Direct	Direct	Direct			
190					Paid	Incurred	Unpaid			
191					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
192	Item 1	Source: Statutory Page 14		0	0	0	0			
193	Item 2	Total Exclusions		0	0	0	0			
194	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
195										
196										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
197	Group Name:	Name				BI Liab				Exhibit 1D
198	Group NAIC #:	#				PD Liab				Sheet 8
199	Company Name:	Name				PIP				
200	Company NAIC #:	#				Phys Dam	XXX			
201	Year Filed:	0				TOTAL				
202										
203	Calendar Year -8			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
204				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
205				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
206				<u>Premium</u>	<u>Premium</u>	<u>Business</u>	<u>Premium</u>	<u>Losses</u>	<u>Losses</u>	<u>Losses</u>
207	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
208	Item 2	Total Exclusions		0	0	0	0	0	0	0
209	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
210	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
211										
212	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
213	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
214										
215										
216					Col (8)	Col (9)	Col (10)			
217					Direct	Direct	Direct			
218					Paid	Incurred	Unpaid			
219					<u>ALAE</u>	<u>ALAE</u>	<u>ALAE</u>			
220	Item 1	Source: Statutory Page 14		0	0	0	0			
221	Item 2	Total Exclusions		0	0	0	0			
222	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
223										
224										

	AH	AI	AJ *	AK	AL	AM	AN	AO	AP	AQ
225	Group Name:		Name			BI Liab				Exhibit 1D
226	Group NAIC #:		#			PD Liab				Sheet 9
227	Company Name:		Name			PIP				
228	Company NAIC #:		#			Phys Dam	XXX			
229	Year Filed:		0			TOTAL				
230										
231	Calendar Year -9			Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)
232				Direct	Direct	Dividends	Direct	Direct	Direct	Direct
233				Written	Earned	on Direct	Unearned	Paid	Incurred	Unpaid
234				Premium	Premium	Business	Premium	Losses	Losses	Losses
235	Item 1	Source: Statutory Page 14		0	0	0	0	0	0	0
236	Item 2	Total Exclusions		0	0	0	0	0	0	0
237	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0	0	0	0
238	Item 4	UCJF Assessments & Excess Medical Benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
239										
240	Item 5a	Refund of Excess Profit, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
241	Item 5b	All Other Dividends, included in Col (3)	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX
242										
243										
244					Col (8)	Col (9)	Col (10)			
245					Direct	Direct	Direct			
246					Paid	Incurred	Unpaid			
247					ALAE	ALAE	ALAE			
248	Item 1	Source: Statutory Page 14		0	0	0	0			
249	Item 2	Total Exclusions		0	0	0	0			
250	Item 3	Excess Profit Data (Item 1 - Item 2)		0	0	0	0			
251										
252										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
1	Group Name:	Name				BI Liab				Exhibit 2D
2	Group NAIC #:	#				PD Liab				Sheet 1
3	Company Name:	Name				PIP				
4	Company NAIC #:	#				Phys Dam	XXX			
5	Year Filed:	0				TOTAL				
6										
7	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
8	Calendar Year -1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
9		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
10	<u>Accident Year</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>	<u>@ 12/31/-01</u>
11	-1	0	0	0	0	0	0	0	0	0
12	-2	0	0	0	0	0	0	0	0	0
13	-3	0	0	0	0	0	0	0	0	0
14	-4	0	0	0	0	0	0	0	0	0
15	-5	0	0	0	0	0	0	0	0	0
16	-6	0	0	0	0	0	0	0	0	0
17	-7	0	0	0	0	0	0	0	0	0
18	-8	0	0	0	0	0	0	0	0	0
19	-9	0	0	0	0	0	0	0	0	0
20	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
21	Total	0	0	0	0	0	0	0	0	0
22										
23	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
24	Calendar Qtr 0-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
25		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
26	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>
27	0	0	0	0	0	0	0	0	0	0
28	-1	0	0	0	0	0	0	0	0	0
29	-2	0	0	0	0	0	0	0	0	0
30	-3	0	0	0	0	0	0	0	0	0
31	-4	0	0	0	0	0	0	0	0	0
32	-5	0	0	0	0	0	0	0	0	0
33	-6	0	0	0	0	0	0	0	0	0
34	-7	0	0	0	0	0	0	0	0	0
35	-8	0	0	0	0	0	0	0	0	0
36	-9	0	0	0	0	0	0	0	0	0
37	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
38	Total	0	0	0	0	0	0	0	0	0
39										
40	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
41	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
42	-1	0	0	0	0	0.000				
43	-2	0	0	0	0	0.000				
44	-3	0	0	0	0	0.000				
45	Average					0.000				
46	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
47										
48										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
49	Group Name:	Name				BI Liab				Exhibit 2D
50	Group NAIC #:	#				PD Liab				Sheet 2
51	Company Name:	Name				PIP				
52	Company NAIC #:	#				Phys Dam	XXX			
53	Year Filed:	0				TOTAL				
54										
55	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
56	Calendar Year -2	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
57		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
58	<u>Accident Year</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>	<u>@ 12/31-02</u>
59	-2	0	0	0	0	0	0	0	0	0
60	-3	0	0	0	0	0	0	0	0	0
61	-4	0	0	0	0	0	0	0	0	0
62	-5	0	0	0	0	0	0	0	0	0
63	-6	0	0	0	0	0	0	0	0	0
64	-7	0	0	0	0	0	0	0	0	0
65	-8	0	0	0	0	0	0	0	0	0
66	-9	0	0	0	0	0	0	0	0	0
67	-10 & prior	0	0	0	0	0	0	0	0	0
68	Total	0	0	0	0	0	0	0	0	0
69										
70	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
71	Calendar Qtr -1-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
72		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
73	<u>Accident Year</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>	<u>@ 3/31-01</u>
74	-1	0	0	0	0	0	0	0	0	0
75	-2	0	0	0	0	0	0	0	0	0
76	-3	0	0	0	0	0	0	0	0	0
77	-4	0	0	0	0	0	0	0	0	0
78	-5	0	0	0	0	0	0	0	0	0
79	-6	0	0	0	0	0	0	0	0	0
80	-7	0	0	0	0	0	0	0	0	0
81	-8	0	0	0	0	0	0	0	0	0
82	-9	0	0	0	0	0	0	0	0	0
83	-10 & prior	0	0	0	0	0	0	0	0	0
84	Total	0	0	0	0	0	0	0	0	0
85										
86	Part 3	Col (19)	Col (20)	Col (21)	Col (21)	Col (22)				
87	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Inc. Loss+ALAE	Incurred ULAE				
88	-2	0	0	0	0	0.000				
89	-3	0	0	0	0	0.000				
90	-4	0	0	0	0	0.000				
91	Average					0.000				
92	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
93										
94										

3-90.143

Supp. 3-15-04

95	Group Name:	Name				BI Liab					Exhibit 2D
96	Group NAIC #:	#				PD Liab					Sheet 3
97	Company Name:	Name				PIP					
98	Company NAIC #:	#				Phys Dam	XXX				
99	Year Filed:	0				TOTAL					
100											
101	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)	
102	Calendar Year -3	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred	
103		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE	
104	<u>Accident Year</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	<u>@ 12/31-03</u>	
105	-3	0	0	0	0	0	0	0	0	0	
106	-4	0	0	0	0	0	0	0	0	0	
107	-5	0	0	0	0	0	0	0	0	0	
108	-6	0	0	0	0	0	0	0	0	0	
109	-7	0	0	0	0	0	0	0	0	0	
110	-8	0	0	0	0	0	0	0	0	0	
111	-9	0	0	0	0	0	0	0	0	0	
112	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
113	<u>Total</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
114											
115	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)	
116	Calendar Qtr -2-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred	
117		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE	
118	<u>Accident Year</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	<u>@ 3/31/00</u>	
119	-2	0	0	0	0	0	0	0	0	0	
120	-3	0	0	0	0	0	0	0	0	0	
121	-4	0	0	0	0	0	0	0	0	0	
122	-5	0	0	0	0	0	0	0	0	0	
123	-6	0	0	0	0	0	0	0	0	0	
124	-7	0	0	0	0	0	0	0	0	0	
125	-8	0	0	0	0	0	0	0	0	0	
126	-9	0	0	0	0	0	0	0	0	0	
127	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
128	<u>Total</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
129											
130	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)					
131	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio					
132	-3	0	0	0	0	0.000					
133	-4	0	0	0	0	0.000					
134	-5	0	0	0	0	0.000					
135	Average					0.000					
136	ULAE Factor	Min. 1.05	Max. 1.30			0.000					
137											
138											

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ		
139	Group Name:	Name				BI Liab					Exhibit 2D	
140	Group NAIC #:	#				PD Liab					Sheet 4	
141	Company Name:	Name				PIP						
142	Company NAIC #:	#				Phys Dam	XXX					
143	Year Filed:	0				TOTAL						
144												
145	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)		
146	Calendar Year -4	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred		
147		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE		
148	<u>Accident Year</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>	<u>@ 12/31/-04</u>		
149	-4	0	0	0	0	0	0	0	0	0		
150	-5	0	0	0	0	0	0	0	0	0		
151	-6	0	0	0	0	0	0	0	0	0		
152	-7	0	0	0	0	0	0	0	0	0		
153	-8	0	0	0	0	0	0	0	0	0		
154	-9	0	0	0	0	0	0	0	0	0		
155	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
156	Total	0	0	0	0	0	0	0	0	0		
157												
158	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)		
159	Calendar Qtr -3-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred		
160		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE		
161	<u>Accident Year</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>	<u>@ 3/31/-03</u>		
162	-3	0	0	0	0	0	0	0	0	0		
163	-4	0	0	0	0	0	0	0	0	0		
164	-5	0	0	0	0	0	0	0	0	0		
165	-6	0	0	0	0	0	0	0	0	0		
166	-7	0	0	0	0	0	0	0	0	0		
167	-8	0	0	0	0	0	0	0	0	0		
168	-9	0	0	0	0	0	0	0	0	0		
169	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
170	Total	0	0	0	0	0	0	0	0	0		
171												
172	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)						
173	<u>Calendar Year</u>	<u>Incurred Loss</u>	<u>Incurred ALAE</u>	<u>Inc. Loss+ALAE</u>	<u>Incurred ULAE</u>	<u>ULAE Ratio</u>						
174	-4	0	0	0	0	0.000						
175	-5	0	0	0	0	0.000						
176	-6	0	0	0	0	0.000						
177	Average					0.000						
178	ULAE Factor	Min. 1.05	Max. 1.30			0.000						
179												
180												

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
181	Group Name:	Name				BI Liab				Exhibit 2D
182	Group NAIC #:	#				PD Liab				Sheet 5
183	Company Name:	Name				PIP				
184	Company NAIC #:	#				Phys Dam	XXX			
185	Year Filed:	0				TOTAL				
186										
187	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
188	Calendar Year -5	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
189		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
190	Accident Year	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05	@ 12/31-05
191	-5	0	0	0	0	0	0	0	0	0
192	-6	0	0	0	0	0	0	0	0	0
193	-7	0	0	0	0	0	0	0	0	0
194	-8	0	0	0	0	0	0	0	0	0
195	-9	0	0	0	0	0	0	0	0	0
196	-10 & prior	0	0	0	0	0	0	0	0	0
197	Total	0	0	0	0	0	0	0	0	0
198										
199	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
200	Calendar Qtr -4-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
201		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
202	Accident Year	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04	@ 3/31-04
203	-4	0	0	0	0	0	0	0	0	0
204	-5	0	0	0	0	0	0	0	0	0
205	-6	0	0	0	0	0	0	0	0	0
206	-7	0	0	0	0	0	0	0	0	0
207	-8	0	0	0	0	0	0	0	0	0
208	-9	0	0	0	0	0	0	0	0	0
209	-10 & prior	0	0	0	0	0	0	0	0	0
210	Total	0	0	0	0	0	0	0	0	0
211										
212	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
213	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
214	-5	0	0	0	0	0.000				
215	-6	0	0	0	0	0.000				
216	-7	0	0	0	0	0.000				
217	Average					0.000				
218	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
219										
220										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
221	Group Name:	Name				BI Liab				Exhibit 2D
222	Group NAIC #:	#				PD Liab				Sheet 6
223	Company Name:	Name				PIP				
224	Company NAIC #:	#				Phys Dam	XXX			
225	Year Filed:	0				TOTAL				
226										
227	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
228	Calendar Year -6	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
229		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
230	Accident Year	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06	@ 12/31-06
231	-6	0	0	0	0	0	0	0	0	0
232	-7	0	0	0	0	0	0	0	0	0
233	-8	0	0	0	0	0	0	0	0	0
234	-9	0	0	0	0	0	0	0	0	0
235	-10 & prior	0	0	0	0	0	0	0	0	0
236	Total	0	0	0	0	0	0	0	0	0
237										
238	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
239	Calendar Qtr -5-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
240		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
241	Accident Year	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05	@ 3/31-05
242	-5	0	0	0	0	0	0	0	0	0
243	-6	0	0	0	0	0	0	0	0	0
244	-7	0	0	0	0	0	0	0	0	0
245	-8	0	0	0	0	0	0	0	0	0
246	-9	0	0	0	0	0	0	0	0	0
247	-10 & prior	0	0	0	0	0	0	0	0	0
248	Total	0	0	0	0	0	0	0	0	0
249										
250	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
251	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
252	-6	0	0	0	0	0.000				
253	-7	0	0	0	0	0.000				
254	-8	0	0	0	0	0.000				
255	Average					0.000				
256	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
257										
258										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
259	Group Name:	Name				BI Liab				Exhibit 2D
260	Group NAIC #:	#				PD Liab				Sheet 7
261	Company Name:	Name				PIP				
262	Company NAIC #:	#				Phys Dam	XXX			
263	Year Filed:	0				TOTAL				
264										
265	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
266	Calendar Year -7	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
267		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
268	<u>Accident Year</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>	<u>@ 12/31-07</u>
269	-7	0	0	0	0	0	0	0	0	0
270	-8	0	0	0	0	0	0	0	0	0
271	-9	0	0	0	0	0	0	0	0	0
272	-10 & prior	0	0	0	0	0	0	0	0	0
273	Total	0	0	0	0	0	0	0	0	0
274										
275	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
276	Calendar Qtr -6-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case
277		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
278	<u>Accident Year</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>	<u>@ 3/31-06</u>
279	-6	0	0	0	0	0	0	0	0	0
280	-7	0	0	0	0	0	0	0	0	0
281	-8	0	0	0	0	0	0	0	0	0
282	-9	0	0	0	0	0	0	0	0	0
283	-10 & prior	0	0	0	0	0	0	0	0	0
284	Total	0	0	0	0	0	0	0	0	0
285										
286	Part 3	Col (19)	Col (20)	Col (21)	Col (22)	Col (23)				
287	Calendar Year	Incurred Loss	Incurred ALAE	Inc. Loss+ALAE	Incurred ULAE	ULAE Ratio				
288	-7	0	0	0	0	0.000				
289	-8	0	0	0	0	0.000				
290	-9	0	0	0	0	0.000				
291	Average					0.000				
292	ULAE Factor	Min. 1.05	Max. 1.30			0.000				
293										
294										

	AH	AI	*AJ	AK	AL	AM	AN	AO	AP	AQ
295	Group Name:	Name				BI Liab				Exhibit 2D
296	Group NAIC #:	#				PD Liab				Sheet 8
297	Company Name:	Name				PIP				
298	Company NAIC #:	#				Phys Dam	XXX			
299	Year Filed:	0				TOTAL				
300										
301	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
302	Calendar Year -8	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
303		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
304	<u>Accident Year</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>	<u>@ 12/31-08</u>
305	-8	0	0	0	0	0	0	0	0	0
306	-9	0	0	0	0	0	0	0	0	0
307	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
308	Total	0	0	0	0	0	0	0	0	0
309										
310	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
311	Calendar Qtr -7-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
312		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
313	<u>Accident Year</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>	<u>@ 3/31-07</u>
314	-7	0	0	0	0	0	0	0	0	0
315	-8	0	0	0	0	0	0	0	0	0
316										
317	<u>-10 & prior</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
318	Total	0	0	0	0	0	0	0	0	0
319										
320										

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ
321	Group Name:	Name				BI Liab	XXX			Exhibit 2D
322	Group NAIC #:	#				PD Liab				Sheet 9
323	Company Name:	Name				PIP				
324	Company NAIC #:	#				Phys Dam				
325	Year Filed:	0				TOTAL				
326										
327	Part 1	Col (1)	Col (2)	Col (3)	Col (4)	Col (5)	Col (6)	Col (7)	Col (8)	Col (9)
328	Calendar Year -9	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
329		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
330	<u>Accident Year</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>	<u>@ 12/31/-09</u>
331	-10 & prior	0	0	0	0	0	0	0	0	0
332	-10 & prior	0	0	0	0	0	0	0	0	0
333	Total	0	0	0	0	0	0	0	0	0
334										
335	Part 2	Col (10)	Col (11)	Col (12)	Col (13)	Col (14)	Col (15)	Col (16)	Col (17)	Col (18)
336	Calendar Qtr -8-1	Incremental	Cumulative	Case	Case	Incremental	Cumulative	Case	Case	Case Incurred
337		Paid Loss	Paid Loss	Unpaid Loss	Incurred Loss	Paid ALAE	Paid ALAE	Unpaid ALAE	Incurred ALAE	Loss+ALAE
338	<u>Accident Year</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>	<u>@ 3/31/-08</u>
339	-8	0	0	0	0	0	0	0	0	0
340	-8	0	0	0	0	0	0	0	0	0
341	-10 & prior	0	0	0	0	0	0	0	0	0
342	Total	0	0	0	0	0	0	0	0	0
343										
344										

	AN	AO	AP	AQ	AR	AS	AT	AU	AV	AW	AX	AY		
1	Group Name:	Name				BI Liab						Exhibit 3D		
2	Group NAIC #:	#				PD Liab								
3	Company Name:	Name				PIP								
4	Company NAIC #:	#				Phys Dam	XXX							
5	Year Filed:	0				TOTAL								
6														
7														
8	Part 1													
9	Cumulative													
10	Case Incurred													
11	Loss + ALAE													
12	as of	-9	-8	-7	-6	-5	-4	-3	-2	-1				
13	15 months	0	0	0	0	0	0	0	0	0		0		
14	27 months	0	0	0	0	0	0	0	0	0				
15	39 months	0	0	0	0	0	0	0	0	0				
16	51 months	0	0	0	0	0	0	0	0	0				
17														
18														
19														
20														
21														
22	Part 2													
23	Development	Accident Year										Col (A)	Col (B)	
24	Factors	-9	-8	-7	-6	-5	-4	-3	-2			Incremental	Development	Cumulative
25	15-27 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000		LDF	Factors	LDF
26	27-39 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000			1.000	15 mo. - ult.	1.000
27	39-51 months	1.000	1.000	1.000	1.000	1.000	1.000	1.000				1.000	27 mo. - ult.	1.000
28														
29														
30														
31														
32														
33														
34	Part 3													
35		Col (1)	Col (2)										Col (3)	
36		Case Incurred	Loss + ALAE										Projected	
37		Loss + ALAE	Development										Ultimate	
38	Accident Year	@ 3/31/00	Factor										@ 3/31/00	
39	-1	0	1.000										0	
40	-2	0	1.000										0	
41	-3	0	1.000										0	
42	-4	0	1.000										0	
43														
44														
45														

	Y	Z	AA	AB	AC	AD	AE
1	Group Name:	Name		BI Liab			Exhibit 4D
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam		XXX	
5	Year Filed:	0		TOTAL			
6							
7			Part 1 - Countrywide		Part 2 - New Jersey		
8			Insurance Expense Exhibit		Statutory Page 14		
9			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
10		<u>Calendar Year -1</u>					
11	Item 1	Direct Written Premium	\$0			\$0	
12	Item 2	Direct Earned Premium	0			0	
13	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
14	Item 4	Direct General Expense	0	0.00%		0	0.00%
15	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
16	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
17	Item 6b	Allowable Capped Expense	--	--		0	24.60%
18	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
19	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
20	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
21	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
22	Item 10	LAD Fees Paid	--	--		0	0.00%
23							
24			Part 1 - Countrywide		Part 2 - New Jersey		
25			Insurance Expense Exhibit		Statutory Page 14		
26			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
27		<u>Calendar Year -2</u>					
28	Item 1	Direct Written Premium	\$0			\$0	
29	Item 2	Direct Earned Premium	0			0	
30	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
31	Item 4	Direct General Expense	0	0.00%		0	0.00%
32	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
33	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
34	Item 6b	Allowable Capped Expense	--	--		0	24.60%
35	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
36	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
37	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
38	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
39	Item 10	LAD Fees Paid	--	--		0	0.00%
40							
41			Part 1 - Countrywide		Part 2 - New Jersey		
42			Insurance Expense Exhibit		Statutory Page 14		
43			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
44		<u>Calendar Year -3</u>					
45	Item 1	Direct Written Premium	\$0			\$0	
46	Item 2	Direct Earned Premium	0			0	
47	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
48	Item 4	Direct General Expense	0	0.00%		0	0.00%
49	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
50	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
51	Item 6b	Allowable Capped Expense	--	--		0	24.60%
52	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
53	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
54	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
55	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
56	Item 10	LAD Fees Paid	--	--		0	0.00%
57							

	Y	Z	AA	AB	AC	AD	AE
1	Group Name:	Name		BI Liab			Exhibit 4D
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PJP			
4	Company NAIC #:	#		Phys Dam	XXX		
5	Year Filed:	0		TOTAL			
6							
58			Part 1 - Countrywide			Part 2 - New Jersey	
59			Insurance Expense Exhibit			Statutory Page 14	
60			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
61		<u>Calendar Year -4</u>					
62	Item 1	Direct Written Premium	\$0			\$0	
63	Item 2	Direct Earned Premium	0			0	
64	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
65	Item 4	Direct General Expense	0	0.00%		0	0.00%
66	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
67	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
68	Item 6b	Allowable Capped Expense	--	--		0	24.60%
69	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
70	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
71	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
72	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
73	Item 10	LAD Fees Paid	--	--		0	0.00%
74							
75			Part 1 - Countrywide			Part 2 - New Jersey	
76			Insurance Expense Exhibit			Statutory Page 14	
77			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
78		<u>Calendar Year -5</u>					
79	Item 1	Direct Written Premium	\$0			\$0	
80	Item 2	Direct Earned Premium	0			0	
81	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
82	Item 4	Direct General Expense	0	0.00%		0	0.00%
83	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
84	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
85	Item 6b	Allowable Capped Expense	--	--		0	24.60%
86	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
87	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
88	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
89	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
90	Item 10	LAD Fees Paid	--	--		0	0.00%
91							
92			Part 1 - Countrywide			Part 2 - New Jersey	
93			Insurance Expense Exhibit			Statutory Page 14	
94			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
95		<u>Calendar Year -6</u>					
96	Item 1	Direct Written Premium	\$0			\$0	
97	Item 2	Direct Earned Premium	0			0	
98	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
99	Item 4	Direct General Expense	0	0.00%		0	0.00%
100	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
101	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
102	Item 6b	Allowable Capped Expense	--	--		0	24.60%
103	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
104	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
105	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
106	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
107	Item 10	LAD Fees Paid	--	--		0	0.00%
108							

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	Y	Z	AA	AB	AC	AD	AE
1	Group Name:	Name		BI Liab			Exhibit 4D
2	Group NAIC #:	#		PD Liab			
3	Company Name:	Name		PIP			
4	Company NAIC #:	#		Phys Dam		XXX	
5	Year Filed:	0		TOTAL			
6							
109			Part 1 - Countrywide		Part 2 - New Jersey		
110			Insurance Expense Exhibit		Statutory Page 14		
111			<u>Col (1)</u>	<u>Col (2)</u>		<u>Col (3)</u>	<u>Col (4)</u>
112		<u>Calendar Year -7</u>					
113	Item 1	Direct Written Premium	\$0			\$0	
114	Item 2	Direct Earned Premium	0			0	
115	Item 3	Direct Other Acquisition Expense	0	0.00%		0	0.00%
116	Item 4	Direct General Expense	0	0.00%		0	0.00%
117	Item 5	Direct Commission & Brokerage	0	0.00%		0	0.00%
118	Item 6a	Expenses subject to Capping (Items 3-5)	--	--		0	0.00%
119	Item 6b	Allowable Capped Expense	--	--		0	24.60%
120	Item 6	Additional Allowable Efficiency Expense	--	--		0	24.60%
121	Item 7	Direct Taxes, Licenses & Fees	0	0.00%		0	0.00%
122	Item 8	Direct Prepaid Expenses	0	0.00%		0	0.00%
123	Item 9	Net Catastrophe Reinsurance	0	0.00%		0	0.00%
124	Item 10	LAD Fees Paid	--	--		0	0.00%
125							

	AG	AH	AI	AJ	AK	AL	AM	AN	AO
1	Group Name:	Name			BI Liab				Exhibit 5D
2	Group NAIC #:	#			PD Liab				Part 1
3	Company Name:	Name			PIP				
4	Company NAIC #:	#			Phys Dam	XXX			
5	Year Filed:	0			TOTAL				
6									
7									
8	Part 1		-7	-6	-5	-4	-3	-2	-1
9	Item 1	Agents Balances	0	0	0	0	0	0	0
10	Item 2	Unearned Premium Reserve	0	0	0	0	0	0	0
11	Item 3	Agents Balance Ratio [Item 1 / Item 2]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
12	Item 4	Direct Prepaid Expenses - NJ (Exhibit 4)	0	0	0	0	0	0	0
13	Item 5	Direct Net Written Premium - NJ (Exhibit 4)	0	0	0	0	0	0	0
14	Item 6	Prepaid Expense Ratio [Item 4 / Item 5]	0.000	0.000	0.000	0.000	0.000	0.000	0.000
15	Item 7a	Direct Unearned Premium Reserve - Beginning (Exhibit 1)	0	0	0	0	0	0	0
16	Item 7b	Direct Unearned Premium Reserve - Ending (Exhibit 1)	0	0	0	0	0	0	0
17	Item 7	Average Unearned Premium Reserve [(Item 7a + Item 7b) / 2]	0	0	0	0	0	0	0
18	Item 8	Investable Unearned Premium [Item 7 * (1 - Item 3 - Item 6)]	0	0	0	0	0	0	0
19	Item 9a	Direct Unpaid Loss - Beginning (Exhibit 1)	0	0	0	0	0	0	0
20	Item 9b	Direct Unpaid Loss - Ending (Exhibit 1)	0	0	0	0	0	0	0
21	Item 9	Average Loss Reserve [(Item 9a + Item 9b) / 2]	0	0	0	0	0	0	0
22	Item 10a	Direct Unpaid ALAE - Beginning (Exhibit 1)	0	0	0	0	0	0	0
23	Item 10b	Direct Unpaid ALAE - Ending (Exhibit 1)	0	0	0	0	0	0	0
24	Item 10	Average ALAE Reserve [(Item 10a + Item 10b) / 2]	0	0	0	0	0	0	0
25	Item 11	ULAE Factor (Exhibit 2)	0.000	0.000	0.000	0.000	0.000	0.000	0.000
26	Item 12	Average Loss + LAE Reserve [(Item 9 + Item 10) * Item 11]	0	0	0	0	0	0	0
27	Item 13	Total Reserve [Item 8 + Item 12]	0	0	0	0	0	0	0
28	Item 14	Pre-Tax Rate of Return (Part 2C, Item 8, 3-Yr Total)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
29	Item 15	Actual Investment Income Earned [Item 13 * Item 14]	0	0	0	0	0	0	0

	BL	BM	BN	BO	BP	BQ	BR	BS	BT	BU	
1	Group Name:		Name					BI Liab		Exhibit 7D	
2	Group NAIC #:		#					PD Liab		Sheet 1	
3	Company Name:		Name					PIP			
4	Company NAIC #:		#					Phys Dam	XXX		
5	Year Filed:		0					TOTAL			
6											
7											
8				Calendar Year							
9				0	-1	-2	-3	-4	-5	-6	-7
10	Item 1 Excess Profit Paid			0	0	0	0	0	0	0	0
11											
12											
13	Carryforward Used			Calendar Year Excess Profit Paid							
14	for Accident Year			0	-1	-2	-3	-4	-5	-6	-7
15	Item 2.1 -1			0	0	0	0	0	0	0	0
16	Item 2.2 -2			0	0	0	0	0	0	0	0
17	Item 2.3 -3			0	0	0	0	0	0	0	0
18	Item 2.4 -4		XXX	0	0	0	0	0	0	0	0
19	Item 2.5 -5		XXX	XXX	0	0	0	0	0	0	0
20	Item 2.6 -6		XXX	XXX	XXX	0	0	0	0	0	0
21	Item 2.7 -7		XXX	XXX	XXX	XXX	0	0	0	0	0
22	Item 2.8 -8		XXX	XXX	XXX	XXX	XXX	0	0	0	0
23	Item 2.9 -9		XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
24	Item 2.10 -10		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
25	Item 2.11 -11		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26	Item 2.12 -12		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
27	Item 2.13 -13		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28	Item 2.14 -14		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
29	Item 2.15 -15		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Item 2.16 -16		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31	Item 2.17 -17		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32	Item 2.18 -18		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33	Item 2.19 -19		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34											
35	Item 2 Total Carryforward Used			0	0	0	0	0	0	0	0
36											
37	Item 3 Carryforward Unused			0	0	0	0	0	0	0	0

	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE
1	Group Name:		Name					BI Liab	Exhibit 7D	
2	Group NAIC #:		#					PD Liab	Sheet 2	
3	Company Name:		Name					PIP		
4	Company NAIC #:		#					Phys Dam	XXX	
5	Year Filed:		0					TOTAL		
6										
7										
8	Calendar Year									
9	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
10	0	0	0	0	0	0	0	0	0	0
11										
12										
13	Calendar Year Excess Profit Paid									
14	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
15	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0
23	0	0	0	0	0	0	0	0	0	0
24	0	0	0	0	0	0	0	0	0	0
25	0	0	0	0	0	0	0	0	0	0
26	XXX	0	0	0	0	0	0	0	0	0
27	XXX	XXX	0	0	0	0	0	0	0	0
28	XXX	XXX	XXX	0	0	0	0	0	0	0
29	XXX	XXX	XXX	XXX	0	0	0	0	0	0
30	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
31	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
32	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
34										
35	0	0	0	0	0	0	0	0	0	0
36										
37	0	0	0	0	0	0	0	0	0	0

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AO
1	Group Name:	Name			BI Liab					Exhibit 9D
2	Group NAIC #:	#			PD Liab					
3	Company Name:	Name			PIP					
4	Company NAIC #:	#			Phys Dam	XXX				
5	Year Filed:	0			TOTAL					
6										
7			-7	-6	-5	-4	-3	-2	-1	Total
8	Item 1	Direct Calendar Year Written Premium [Exhibit 1D, Col (1), Item 3]	0	0	0	0	0	0	0	0
9	Item 2	Direct Calendar Year Earned Premium [Exhibit 1D, Col (2), Item 3]	0	0	0	0	0	0	0	0
10	Item 3	UCJF Assessment [Exhibit 1D, Col (2), Item 4]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
11	Item 4	Dividends excluding Refund of Excess Profit [Exhibit 1D, Col (3), Item 5b]	0	0	0	0	0	0	0	0
12	Item 5	Net AIRE [Exhibit 6, Part 7, Col (3)]	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13	Item 6	Direct CY Net Earned Premium [Item 2 - Item 3 - Item 4 + Item 5]	0	0	0	0	0	0	0	0
14										
15	Item 7	Direct Accident Year Ultimate Loss & ALAE [Exhibit 3D, Part 3, Col (3)]	0	0	0	0	0	0	0	0
16	Item 8	ULAE Ratio [Exhibit 2D, Part 3, Col (23)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Item 9	Direct Accident Year Ultimate Loss & LAE [Item 7 * Item 8]	0	0	0	0	0	0	0	0
18	Item 10	Direct Accident Year Ultimate Loss & LAE Ratio [Item 9 / Item 8]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
19										
20	Item 11	Direct Commission & Brokerage [Exhibit 4D, Col (3), Item 5]	0	0	0	0	0	0	0	0
21	Item 12	Direct Other Acquisition Expense [Exhibit 4D, Col (3), Item 3]	0	0	0	0	0	0	0	0
22	Item 13	Direct General Expense [Exhibit 4D, Col (3), Item 4]	0	0	0	0	0	0	0	0
23	Item 14	Additional Allowable Expense [Exhibit 4D, Col (3), Item 6]	0	0	0	0	0	0	0	0
24	Item 15	Direct Taxes, Licenses & Fees [Exhibit 4D, Col (3), Item 7]	0	0	0	0	0	0	0	0
25	Item 16	Net Catastrophe Reinsurance [Exhibit 4D, Col (3), Item 9]	0	0	0	0	0	0	0	0
26	Item 17	LAD Fees Paid [Exhibit 4D, Col (3), Item 10]	0	0	0	0	0	0	0	0
27	Item 18	Total Expenses [Sum (Item 11 - Item 17)]	0	0	0	0	0	0	0	0
28										
29	Item 19	Underwriting Income [Item 6 - Item 8 - Item 18]	0	0	0	0	0	0	0	0
30	Item 20	Allowance for Pre-Tax Profit & Contingencies [Item 2 * 5.38% Pre-Tax]	0	0	0	0	0	0	0	0
31	Item 21	Actual Investment Income Earned [Exhibit 5D, Part 1, Item 15]	0	0	0	0	0	0	0	0
32	Item 22	Actuarial Gain [Item 19 - Item 20 + Item 21]	0	0	0	0	0	0	0	0
33										
34	Item 23	Total Development Adjustment [Input Sheet]	--	--	--	--	--	--	--	0
35	Item 24	Total Actuarial Gain [Item 22 - Item 23]	--	--	--	--	--	--	--	0
36										
37	Item 25	Additional Non-Excessive Profit Allowance [Item 2 * 3.85% Pre-Tax]	--	--	--	--	--	--	--	0
38	Item 26	Holding Company Non-Excessive Subsidization [Item 2 * 0.5%]	--	--	--	--	--	--	--	0
39	Item 27	Gross Excess Profit / (Loss) [Item 24 - Item 25 - Item 26]	--	--	--	--	--	--	--	0
40										
41	Item 28	Carryforward of Refund of Excess Profit [Exhibit 7D, Item 2]	0	0	0	0	0	0	0	0

	A	B	C	D	E	F	G	H	I	J	
1	Group Name:		Name					BI Liab		Exhibit 8	
2	Group NAIC #:		#					PD Liab		Sheet 1	
3	Company Name:		Name					PIP			
4	Company NAIC #:		#					Phys Dam			
5	Year Filed:		0					TOTAL	XXX		
6											
7											
8				Calendar Year							
9				0	-1	-2	-3	-4	-5	-6	-7
10	Item 1 Extraordinary Loss Paid			0	0	0	0	0	0	0	0
11											
12											
13	Carryforward Used			Calendar Year Extraordinary Loss Paid							
14	for Accident Year			0	-1	-2	-3	-4	-5	-6	-7
15	Item 2.1 -1			0	0	0	0	0	0	0	0
16	Item 2.2 -2			0	0	0	0	0	0	0	0
17	Item 2.3 -3			0	0	0	0	0	0	0	0
18	Item 2.4 -4		XXX	0	0	0	0	0	0	0	0
19	Item 2.5 -5		XXX	XXX	0	0	0	0	0	0	0
20	Item 2.6 -6		XXX	XXX	XXX	0	0	0	0	0	0
21	Item 2.7 -7		XXX	XXX	XXX	XXX	0	0	0	0	0
22	Item 2.8 -8		XXX	XXX	XXX	XXX	XXX	0	0	0	0
23	Item 2.9 -9		XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
24	Item 2.10 -10		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
25	Item 2.11 -11		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26	Item 2.12 -12		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
27	Item 2.13 -13		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28	Item 2.14 -14		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
29	Item 2.15 -15		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30	Item 2.16 -16		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31	Item 2.17 -17		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32	Item 2.18 -18		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33	Item 2.19 -19		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34											
35	Item 2 Total Carryforward Used			0	0	0	0	0	0	0	0
36											
37	Item 3 Carryforward Unused			0	0	0	0	0	0	0	0

	K	L	M	N	O	P	Q	R	S	T	
1	Group Name:		Name					BI Liab		Exhibit 8	
2	Group NAIC #:		#					PD Liab		Sheet 2	
3	Company Name:		Name					PIP			
4	Company NAIC #:		#					Phys Dam			
5	Year Filed:		0					TOTAL		XXX	
6											
7											
8	Calendar Year										
9	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total	
10	0	0	0	0	0	0	0	0	0	0	
11											
12											
13	Calendar Year Extraordinary Loss Paid										
14	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total	
15	0	0	0	0	0	0	0	0	0	0	
16	0	0	0	0	0	0	0	0	0	0	
17	0	0	0	0	0	0	0	0	0	0	
18	0	0	0	0	0	0	0	0	0	0	
19	0	0	0	0	0	0	0	0	0	0	
20	0	0	0	0	0	0	0	0	0	0	
21	0	0	0	0	0	0	0	0	0	0	
22	0	0	0	0	0	0	0	0	0	0	
23	0	0	0	0	0	0	0	0	0	0	
24	0	0	0	0	0	0	0	0	0	0	
25	0	0	0	0	0	0	0	0	0	0	
26	XXX	0	0	0	0	0	0	0	0	0	
27	XXX	XXX	0	0	0	0	0	0	0	0	
28	XXX	XXX	XXX	0	0	0	0	0	0	0	
29	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
30	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
31	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
32	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
34											
35	0	0	0	0	0	0	0	0	0	0	
36											
37	0	0	0	0	0	0	0	0	0	0	

	A	B	C	D	E	F	G	H	I	J	
40	Group Name:		Name					BI Liab		Exhibit 8	
41	Group NAIC #:		#					PD Liab		Sheet 3	
42	Company Name:		Name					PIP			
43	Company NAIC #:		#					Phys Dam			
44	Year Filed:		0					TOTAL	XXX		
45											
46											
47				Calendar Year							
48				0	-1	-2	-3	-4	-5	-6	-7
49	Item 4 Reinvestment into NJ			0	0	0	0	0	0	0	0
50											
51											
52	Carryforward Used			Calendar Year Reinvestment							
53	for Accident Year			0	-1	-2	-3	-4	-5	-6	-7
54	Item 5.1 -1			0	0	0	0	0	0	0	0
55	Item 5.2 -2			0	0	0	0	0	0	0	0
56	Item 5.3 -3			0	0	0	0	0	0	0	0
57	Item 5.4 -4		XXX	0	0	0	0	0	0	0	0
58	Item 5.5 -5		XXX	XXX	0	0	0	0	0	0	0
59	Item 5.6 -6		XXX	XXX	XXX	0	0	0	0	0	0
60	Item 5.7 -7		XXX	XXX	XXX	XXX	0	0	0	0	0
61	Item 5.8 -8		XXX	XXX	XXX	XXX	XXX	0	0	0	0
62	Item 5.9 -9		XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
63	Item 5.10 -10		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
64	Item 5.11 -11		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
65	Item 5.12 -12		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
66	Item 5.13 -13		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
67	Item 5.14 -14		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
68	Item 5.15 -15		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
69	Item 5.16 -16		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
70	Item 5.17 -17		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
71	Item 5.18 -18		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
72	Item 5.19 -19		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
73											
74	Item 5 Total Carryforward Used			0	0	0	0	0	0	0	0
75											
76	Item 6 Carryforward Unused			0	0	0	0	0	0	0	0

	K	L	M	N	O	P	Q	R	S	T
40	Group Name: Name							BI Liab	Exhibit 8	
41	Group NAIC #: #							PD Liab	Sheet 4	
42	Company Name: Name							PIP		
43	Company NAIC #: #							Phys Dam		
44	Year Filed: 0							TOTAL	XXX	
45										
46										
47	Calendar Year									
48	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
49	0	0	0	0	0	0	0	0	0	0
50										
51										
52	Calendar Year Reinvestment									
53	-8	-9	-10	-11	-12	-13	-14	-15	-16	Total
54	0	0	0	0	0	0	0	0	0	0
55	0	0	0	0	0	0	0	0	0	0
56	0	0	0	0	0	0	0	0	0	0
57	0	0	0	0	0	0	0	0	0	0
58	0	0	0	0	0	0	0	0	0	0
59	0	0	0	0	0	0	0	0	0	0
60	0	0	0	0	0	0	0	0	0	0
61	0	0	0	0	0	0	0	0	0	0
62	0	0	0	0	0	0	0	0	0	0
63	0	0	0	0	0	0	0	0	0	0
64	0	0	0	0	0	0	0	0	0	0
65	XXX	0	0	0	0	0	0	0	0	0
66	XXX	XXX	0	0	0	0	0	0	0	0
67	XXX	XXX	XXX	0	0	0	0	0	0	0
68	XXX	XXX	XXX	XXX	0	0	0	0	0	0
69	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
70	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
71	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
72	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
73										
74	0	0	0	0	0	0	0	0	0	0
75										
76	0	0	0	0	0	0	0	0	0	0

	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB
1	Group Name:	Name					BI Liab			Exhibit 9
2	Group NAIC #:	#					PD Liab			
3	Company Name:	Name					PIP			
4	Company NAIC #:	#					Phys Dam			
5	Year Filed:	0					TOTAL	XXX		
6										
7			-7	-6	-5	-4	-3	-2	-1	Total
8	Item 1	Direct Calendar Year Written Premium [Exhibit 1, Col (1), Item 3]	0	0	0	0	0	0	0	0
9	Item 2	Direct Calendar Year Earned Premium [Exhibit 1, Col (2), Item 3]	0	0	0	0	0	0	0	0
10	Item 3	UCJF Assessment [Exhibit 1, Col (2), Item 4]	0	0	0	0	0	0	0	0
11	Item 4	Dividends excluding Refund of Excess Profit [Exhibit 1, Col (3), Item 5b]	0	0	0	0	0	0	0	0
12	Item 5	Net AIRE [Exhibit 6, Part 7, Col (3)]	0	0	0	0	0	0	0	0
13	Item 6	Direct CY Net Earned Premium [Item 2 - Item 3 - Item 4 + Item 5]	0	0	0	0	0	0	0	0
14										
15	Item 7	Direct Accident Year Ultimate Loss & ALAE [Exhibit 3, Part 3, Col (3)]	0	0	0	0	0	0	0	0
16	Item 8	ULAE Ratio [Exhibit 2, Part 3, Col (23)]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Item 9	Direct Accident Year Ultimate Loss & LAE [Item 7 * Item 6]	0	0	0	0	0	0	0	0
18	Item 10	Direct Accident Year Ultimate Loss & LAE Ratio [Item 9 / Item 6]	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
19										
20	Item 11	Direct Commission & Brokerage [Exhibit 4, Col (3), Item 5]	0	0	0	0	0	0	0	0
21	Item 12	Direct Other Acquisition Expense [Exhibit 4, Col (3), Item 3]	0	0	0	0	0	0	0	0
22	Item 13	Direct General Expense [Exhibit 4, Col (3), Item 4]	0	0	0	0	0	0	0	0
23	Item 14	Additional Allowable Expense [Exhibit 4, Col (3), Item 6]	0	0	0	0	0	0	0	0
24	Item 15	Direct Taxes, Licenses & Fees [Exhibit 4, Col (3), Item 7]	0	0	0	0	0	0	0	0
25	Item 16	Net Catastrophe Reinsurance [Exhibit 4, Col (3), Item 9]	0	0	0	0	0	0	0	0
26	Item 17	LAD Fees Paid [Exhibit 4, Col (3), Item 10]	0	0	0	0	0	0	0	0
27	Item 18	Total Expenses [Sum (Item 11 - Item 17)]	0	0	0	0	0	0	0	0
28										
29	Item 19	Underwriting Income [Item 6 - Item 9 - Item 18]	0	0	0	0	0	0	0	0
30	Item 20	Allowance for Pre-Tax Profit & Contingencies [Item 2 * 5.38% Pre-Tax]	0	0	0	0	0	0	0	0
31	Item 21	Actual Investment Income Earned [Exhibit 5, Part 1, Item 15]	0	0	0	0	0	0	0	0
32	Item 22	Actuarial Gain [Item 19 - Item 20 + Item 21]	0	0	0	0	0	0	0	0
33										
34	Item 23	Total Development Adjustment [Input Sheet]	--	--	--	--	--	--	--	0
35	Item 24	Total Actuarial Gain [Item 22 - Item 23]	--	--	--	--	--	--	--	0
36										
37	Item 25	Additional Non-Excessive Profit Allowance [Item 2 * 3.85% Pre-Tax]	--	--	--	--	--	--	--	0
38	Item 26	Holding Company Non-Excessive Subsidization [Item 2 * 0.5%]	--	--	--	--	--	--	--	0
39	Item 27	Gross Excess Profit / (Loss) [Item 24 - Item 25 - Item 26]	--	--	--	--	--	--	--	0
40										
41	Item 28	Carryforward of Refund of Excess Profit [Exhibit 7, Item 2]	0	0	0	0	0	0	0	0
42	Item 29	Carryforward of Extraordinary Loss (Exhibit 8, Item 2)	0	0	0	0	0	0	0	0
43	Item 30	Carryforward of Reinvestment into New Jersey (Exhibit 8, Item 5)	0	0	0	0	0	0	0	0
44										
45	Item 31	Amount to be Reinvested into New Jersey	--	--	--	--	--	--	--	0
46	Item 32	Net Excess Profit / (Loss) [Item 27 - Item 28 - Item 29 - Item 30 - Item 31]	--	--	--	--	--	--	--	0
47										
48	Item 33	Extraordinary Loss [Item 32 - Item 2 * -5%]	--	--	--	--	--	--	--	0

Amended by R.1991 d.17, effective January 7, 1991.
 See: 22 N.J.R. 2082(b), 23 N.J.R. 106(a).
 Amended by R.1992 d.254, effective June 15, 1992.

See: 24 N.J.R. 529(a), 24 N.J.R. 2264(a).
 Appendix deleted and replaced with new appendix.
 Amended by R.1994 d.24, effective January 3, 1994.

See: 25 N.J.R. 1829(a), 26 N.J.R. 241(a).
 Amended by R.1996 d.58, effective February 5, 1996.
 See: 27 N.J.R. 3682(a), 28 N.J.R. 855(a).
 Repeal and New Rule, R.1996 d.312, effective July 15, 1996.
 See: 28 N.J.R. 1616(a), 28 N.J.R. 3627(b).
 Administrative correction.
 See: 28 N.J.R. 3798(b).
 Amended by R.2002 d.386, effective December 2, 2002.
 See: 34 N.J.R. 1093(a), 34 N.J.R. 4053(a).
 Appendix deleted and replaced with new appendix.
 Amended by R.2004 d.97, effective March 15, 2004.
 See: 35 N.J.R. 3098(a), 36 N.J.R. 1426(a).
 Appendix deleted and replaced with new appendix.

SUBCHAPTER 20A. (RESERVED)

SUBCHAPTER 21. PERSONAL INJURY
 PROTECTION COVERAGE REDUCED PIP
 PREMIUM CHARGE FOR ADDITIONAL
 AUTOS IN ONE-DRIVER HOUSEHOLDS

11:3-21.1 Purpose

The purpose of this rule is to implement N.J.S.A. 39:6A-4.1, which provides for reduced personal injury protection premiums for additional automobiles in one-driver households.

11:3-21.2 Reduction of PIP premium

(a) In any instance where a named insured is the owner, the only designated operator of two or more automobiles insured by the same insurer under one or more policies, and the only licensed driver residing in the household, the full basic PIP rate shall be charged on one automobile, and a percentage discount shall be given on the PIP premium charge on each additional auto. For the three-year period commencing with the operative date of this rule, the premium reduction shall be at least 50 percent of the approved charge for the applicable territory of garaging for the additional automobile(s), exclusive of expense fees and policy constants or residual market equalization charges.

11:3-21.3 Automobiles eligible for premium reduction

(a) Except as provided in paragraph 1 below, the reduced premiums shall only apply to a private passenger automobile of a private passenger or station wagon type that is owned or hired by an individual or by husband and wife who are residents of the same household and is neither used as a public or livery conveyance for passengers nor rented to others with a driver; and a motor vehicle with a pick-up body, a delivery sedan, a van, or a panel truck or a camper type vehicle used for recreational purposes owned by an individual or by husband and wife who are residents of the same household, not customarily used in the occupation, profession or business of the insured other than farming or ranching. An automobile owned by a farm family copartnership or corporation which is principally garaged on a farm or ranch and otherwise meets the definitions contained in this section, shall be considered a private passenger automobile owned by two or more relatives resident in the same household.

1. The reduced premium shall not apply to automobiles for which the basic PIP premium charge is less than \$25.00, exclusive of expense fees and policy constants or residual market equalization charges, and which are of the following types:

- i. Automobiles 10 years or older and maintained primarily for use in exhibitions, parades and club activities, or
- ii. A self-propelled vehicle with a living area that is an integral part of the chassis or a pick-up with a permanently attached camper body.

(b) A reduced premium charge for PIP coverage as specified in (a) above shall apply to all policies which are in force, issued or renewed on or after the operative date of this rule.

1. With respect to in force policies, the insurer shall calculate the reduce premium charge in (a) above, and shall issue a refund check in this amount to the insured or apply a credit in this amount to the insured's renewal policy.

- i. In the event a policy is nonrenewed or otherwise terminated prior to renewal, the insurer shall calculate a return premium in accordance with the operative date of this rule and the effective termination date of the policy. The insurer shall issue a refund check in this amount to the insured.

11:3-21.4 Filing and statistical requirements

(a) Each automobile filer shall, within 60 days of the effective date of this rule, submit to the Commissioner for approval filings of rates and manual rules for implementing the reduced PIP premium charges for additional automobiles required by this rule.