
Name of Company

IV. BUSINESS DONE (Non-Life) January to March / June to September / July to September / October to December, 20__

(please encircle the applicable date)

Line of Business	Premiums on Direct Business (1)	Premiums Ceded * (2)	Premiums from Assumed Business (3)	Premiums Retroceded * (4)	Net Premiums (1+ 3 - 2 - 4) (5)	Premiums Earned (6)	Losses Incurred (7)
Fire							
Marine							
Aviation							
Motor Car							
Health							
Accident							
Engineering							
Other Casualty							
Suretyship							
T O T A L							

* - To and from Authorized and Unauthorized Companies

Authorized Signature
(Signature over printed name)