

Insurance Tax Section Arizona Department of Insurance and Financial Institutions 100 N. 15th Avenue, Suite 261 Phoenix, Arizona 85007-2630 Phone (602) 364-2713 Email taxunit@difi.az.gov https://difi.az.gov

UNAFFILIATED CREDIT LIFE & DISABILITY REINSURER ANNUAL FEES REPORT

FOR CALENDAR YEAR _____

FILING DUE DATE f7 \ YW_'h\ Y'cbY'h\ Uh'Udd`]YgŁ```

An and file this form by AUGUST 1st. Á
An and file this form by AUGUST 1st. Á
An and file this form by NOVEMBER 1st.

Do not file this form if you pay your fees via the NAIC OPT*ins* system

COMPANY INFORMATION								
Complete Name of Company					NAIC # Domicile		e State	FEIN
Mailing Address				City			State	ZIP Code
PREPARER INFORMATION								
Name of Preparer					Title			
Preparer's Mailing Address				City			State	ZIP Code
Toll-free Phone	Number	Fax Number	E-mail Address					
ANNUAL FEES DUE								
TOTAL DUE: <u>\$4,800.00</u> , consisting of the following:								
• Certificate of Authority Renewal Fee per ARS § 20-167(A)(2)(b): \$4,500.00								
Annual Statement Filing Fee per ARS § 20-167(A)(8): \$300.00								
PAYMENT INSTRUCTIONS								
EITHER:								
A. Pay using the NAIC OPTins system (and do not submit this form).								
Visit the NAIC Web site at https://www.optins.org/								
Contact the OPTins Help Desk at optinshelp@naic.org or (816) 783-8500								
Note: To use OPTins, you must establish an account and electronic funds transfer protocol with the NAIC, which can take up to two weeks.								
B. Pay by check or money order								
 Complete this form and mail it with your check or money order made payable to INSURANCE TAX UNIT. Include your NAIC number on your payment. 								
• <u>DO NOT</u> mail this form and payment with your annual statement. Send it separately to the INSURANCE TAX UNIT at the address shown at the top of the form.								
DEPARTMENT OF INSURANCE ACCOUNTING INFORMATION								
Year:	Company	/License Type: C	NAIC:		Period:	Trans ⁻	Туре: 01	
Pay Code 1:	Amount 1		Pay Co	ode 2:	Amount 2:			

We may summarily suspend your Arizona Certificate of Authority if you do not pay your Certificate of Authority Renewal Fee by the due date. ARS § 20-217(E).

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300.00

We may assess a penalty fee of up to \$25 per day if you pay fees late. ARS § 20-223(D).

4500.00

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