



Dipåtamenton Kontribusion yan Adu'aña

DEPARTMENT OF

REVENUE AND TAXATION

GOVERNMENT OF GUAM *Gubetnamenton Guåhan*

Form I-8

STATEMENT OF COMMERCIAL AND INDUSTRIAL LIABILITY INSURANCE PREMIUMS WRITTEN IN GUAM

NAIC NO.:	EIN:
COMPANY NAME:	
FOR CALENDAR YEAR December 31, _____	
MAILING ADDRESS:	

	Total Premiums
1. Commercial and Industrial Liability Insurance as reported on Lines 17.1, 17.2 & 17.3, Direct Premiums Written in Guam, Statutory Page, Annual Statement	\$ _____
2. Commercial Auto Liability Insurance as reported on Line 19.4, Other Commercial Auto Liability, Direct Premiums Written in Guam, Statutory Page, Annual Statement	\$ _____
3. Total Premiums Written	\$ _____
4. Assessment	2%
5. Amount of assessment payable to the Treasurer of Guam	\$ _____

Under penalty of perjury, I declare that this statement has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement.

Contact Person

Signature of Officer

Date

Telephone Number

Name and Title (Type or Print)

Updated 01/22/2024