DAFNE MANSAPIT- SHIMIZU, Director MICHELE B. SANTOS, Deputy Director Sigundo Direktot

AFFIDAVIT

I hereby acknowledge that all insurance funds collected MUST be deposited into a PREMIUM FUND TRUST ACCOUNT (PFTA) and held in a fiduciary capacity and that the ONLY disbursements from said PFTA shall be to pay insurance premiums and commissions earned.

The following is as of the previous D	ecember 31st:
Cash in PFTA	\$
Insurance premiums receivable	\$
Total	\$
Less: Insurance premiums pay	able \$
Adequacy (Deficiency) in PFTA	\$
_	Authorized Signor of the Company Company Name/Agent/Broker
Subscribed and sworn before me this	day of, 20
(seal)	Notary Public
Apsc/040419	