3901-3-16

APPENDIX C

Form CR-F – PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	Rei	insurance On		9	10	11	12	13	14	15
Company Code or ID Number		Name of Reinsured	Domiciliary Jurisdiction	Assumed Premium	Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7	Contingent Commissions Payable	Assumed Premiums Receivable	Unearned Premium	Funds Held By or Deposited With Reinsured Companies	Letters of Credit Posted	Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	Amount of Assets Pledged or Collateral Held in Trust
														ن
														Q
	otals													

Form CR-F Adopted by EX Plenary 11-06-11 © 1994-2011 National Association of Insurance Commissioners

P/C

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Form CR-F – PART 2
Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	Reinsurance Recoverable On Reins									Reinsura	Reinsurance Payable		19
						7	8	9	10	11	12	13	14	15	16	17		
				Reinsurance														
				Contracts														
				Ceding													Net Amount	Funds Held
				75% or													Recoverable	by
Company				More of												Other	From	Company
Code or				Direct	Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Ceded	Amounts	Reinsurers	Under
ID		Name of	Domiciliary	Premiums	Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through	Balances	Due to	Cols. 15 –	Reinsurance
Number		Reinsurer	Jurisdiction	Written	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	14 Totals	Payable	Reinsurers	[16 + 17]	Treaties
9999999 To	9999999 Totals																	