

TEXAS PRIVATE PASSENGER AUTOMOBILE STATISTICAL PLAN ANNUAL AGGREGATE EXPERIENCE AND RECONCILIATION REPORT

Reporting Period
(YYYY) _____

COMPANY

NAIC Co. # _____
NAIC Group # _____
Phone # _____
FAX # _____
E-mail addr. _____

Name and
Address

Contact Name: _____

MEDIA

Media Count _____

File Count Total _____

☐ Diskette

☐ CD

☐ Labeled Tape

☐ Unlabeled Tape

Tape Block Size _____

REPORTS

REPORT NAME

RECORD COUNTS

Filenames (CD & Diskette only)

Annual Aggregate Experience Report

Annual Reconciliation Report

SPECIAL INSTRUCTIONS

TICO USE ONLY

Date Received: _____

Ship To: Texas Insurance Checking Office
Attn: Ed Guerrero

5508 W Hwy 290, STE. 100
Austin, TX 78735

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