THE SURPLUS LINE ASSOCIATION
OF CALIFORNIA
315 MONTGOMERY STREET
SAN FRANCISCO 04104

January 1, 1969
No. 39

MEMORANDUM TO ALL MEMBERS:

1) New Monthly Statement
2) Additional Binder - "Monthly Breakdown"

1) New Monthly Statement. As we explained at the Annual Meetings, we have designed this attack in order to assist the members. On or about February 20, and each month thereafter, we shall send you such a statement for your monthly business. It will be completed for you in duplicate. You should sign and return the original with your check for the stamping fee, retaining the "Member's Copy" for your records. This new form replaces the S-105 form.

2) Additional Binder - "Monthly Breakdown." In order to assist the member with a breakdown for state tax reporting of 1969 and subsequent business, an additional "monthly breakdown" will be furnished with your usual breakdown if business has been reported. This has been designed to follow the order in which such breakdown is called for on the California reporting form. This breakdown will be attached to your monthly billing together with the usual breakdown.

Early in 1970 we shall endeavor to send you a monthly recap of your 1969 business as a further aid in your completing your state tax form.

Very truly yours,

[Signature]
A. L. Lathrop
Manager

ENC1
In accordance with Article XIII of the Constitution we verify that the following is a true and complete statement of our California surplus line business for the above month, subject to filing (including previous months if designated below):

<table>
<thead>
<tr>
<th>PREMIUM AMOUNT</th>
<th>STAMPING FEE AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Net Premium at 6/10%</td>
<td>$_________  $_________</td>
</tr>
<tr>
<td>2. Net Premium at 3/4%</td>
<td>$_________  $_________</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$_________  $_________</td>
</tr>
</tbody>
</table>

Stamping fees from prior months not paid $_________

Total due - pay this amount $_________

IMPORTANT - IF NO SURPLUS LINE BUSINESS WRITTEN DURING THE MONTH PLEASE CHECK □

Date ________________  Sign here ____________________________________________