# COMMONWEALTH OF THE NORTHERN MARIANA ISALNDS SAIPAN, MARIANA ISLANDS

Volume 12 No. 11



November 15, 1990

# commonwealth

register

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## Commonwealth Register November 15, 1990 Volume 12 No. 11

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#### NOTICE OF THE ADOPTION OF THE AMENDMENTS TO THE ADMINISTRATIVE RULES AND REGULATIONS

The Board of Trustees of the Northern Mariana Islands Retirement Fund hereby notifies the general public that it has adopted the amendments to the Administrative Rules and Regulations as published in Commonwealth Register, Volume 11, No. 11, on November 15, 1989.

day of October, 1990.

MICHAEL A. WHITE

CHAIRMAN, Board of

Trustees, NMI Retirement Fund

TOMAS B. ALDAN ADMINISTRATOR

NMI Retirement Fund

#### NOTICIA POT I MA ADOPTA I AMENDAASION I REGULASION YAN AREKLAMENTO

I Board of Trustees, NMI Retirement Fund man nanae noticia para i publico na ma adopta i tinilaika gi regulasion i Administrative Rules and Regulations anai i ma publika gi Commonwealth Register, Volume 11, No. 11, gi Novembre 15, 1989.

Mafecha gi dia

October, 1990.

CHAIRMAN, Board of

Trustees, NMI Retirement Fund

TOMAS B. ALDAN ADMINISTRATOR NMI Retirement Fund

#### NORTHERN MARIANA ISLANDS RETIREMENT FUND RULES AND REGULATIONS

The Board of Trustees for the Northern Mariana Islands Retirement Fund promulgates these amendments to the rules and reulations pursuant to Public Law 6-17, as amended, 1 CMC Section 8316(f) of the Northern Mariana Islands Retirement Fund Act of 1988, and the Administrative Procedures Act, 1 CMC 9101, et. seq.

#### PART I - GENERAL PROVISIONS

Authority. Under and by virtue of the provisions of 1 CMC Section 8316, the Board of Trustees for the Northern Mariana Islands Retirement Fund hereby promulgates these amendments to the rules and regulations.

#### PART 2 - PURPOSE

2.1 To amend Part 4 of the rules and regulations to add a new Subsection (c) to recognize the part-time services of members who served in the Marianas District Legislature prior to April 1, 1975. The members of the legislature became full-time members of the legislature on April 1, 1975.

#### PART 4 - BENEFITS --

(c) For service as a member of the Mariana Islands District Legislature prior to April 1, 1975, each member shall be credited 60 calendar days per year for such service. A member who served from January 1, 1975 to March 31, 1975 shall receive a credit of 30 calendar days. A member who served on or after April 1, 1975, shall receive credit for full-time employment for service on or after April 1, 1975.

[The source for this determination is found under Article II, Section 1 and 2 of the Charter of the Mariana Islands District Legislature wherein it states as follows:

"The legislature shall convene twice a year in regular session on the first Monday of February and the first Monday in August...The Legislature shall be considered as being continuouly in session from the date convened, but no session of the Legislature shall exceed thirty (30) calendar days".]

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Duly adopted by the Board of Trustees on September 13, 1990.

M chael A. White

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Board of Trustees, NMIRF

#### NOTICE OF THE ADOPTION OF THE AMENDMENTS TO THE WORKER'S COMPENSATION COMMISSION RULES AND REGULATIONS

The Board of Trustees of the Northern Mariana Islands Retirement Fund hereby notifies the general public that it has adopted the Worker's Compensation Commission Propose Rules and Regulations as published in Commonwealth Register, Volume 12, No. 1, on January 15, 1990.

Dated this And day of October, 1990.

MICHAEL A. WHITE

CHAIRMAN, Board of

Trustees, NMI Retirement Fund

ADMINISTRATOR

NMI Retirement Fund

## NOTICIA POT I MA ADOPTA I AMENDAASION I REGULASION YAN AREKLAMENTO

I Board of Trustees, NMI Retirement Fund man nanae noticia para i publico na ma adopta i tinilaika gi regulasion i Worker's Compensation Commission Propose Rules yan Regulations anai ma publika gi Commonwealth Register, Volume 12, No. 1, gi Ineru 15, 1990.

Mafecha gi dia

October, 1990.

TCHAEL A WHITE

dHAIRMAN, Board of

Trustees, NMI Retirement Fund

TOMAS B. ALDAN
ADMINISTRATOR

NMI Retirement Fund

14 B

## Commonwealth of the Northern Mariana Islands **BOARD OF PROFESSIONAL LICENSING**

P.O. Box 2078 Saipan, MP 96950 Tel. No.: (670) 234-5897

#### ADOPTED RULES AND REGULATIONS

FOR

#### HARBOR PILOTS

After reviewing all the submitted comments, the Board of Professional Licensing hereby adopts the proposed Rules and Regulations for Harbor Pilots as published in the Commonwealth Register on July 15, 1990, subject to several changes. Rules and Regulations for Harbor Pilots are adopted pursuant to P.L. 1-8 and 4 CMC subsection 3105. They shall be binding on all persons and entities providing harbor piloting services in the Commonwealth of the Northern Mariana Islands.

In accordance with 1 CMC subsection 9105 (b), these rules and regulations shall take effect ten (10) days after publication of this notice in the Commonwealth Register.

Richard N. Cody, Chairman

Board of Professional Licensing

Date

#### REGULATIONS GOVERNING THE LICENSURE OF HARBOR PILOTS

#### PART I -- GENERAL PROVISIONS

- 1.1 <u>Authority</u>. These regulations are adopted pursuant to 4 CMC § 3101 et seq.
- 1.2 <u>Application</u>. These regulations shall apply to the pilotage districts of Rota, Saipan and Tinian as defined by the Commonwealth Ports Authority.

#### PART II -- DEFINITIONS

- 2.1 <u>The Board</u>. "The Board" shall mean the Commonwealth of the Northern Mariana Islands Board of Professional Licensing.
- 2.2 The CPA "The CPA" shall mean the Commonwealth Ports Authority.
- 2.3 <u>The CNMI</u> "The CNMI" shall mean the Commonwealth of the Northern Mariana Islands.
- 2.4 Pilot or Harbor Pilot. A person who directs the movements of a ship into and out of a pilotage district of the CNMI.
- 2.5 <u>Vessel Movement</u>. The movement of a ship from the outer limit of a pilotage district or anchorage to the dock, the anchorage to the dock and from the dock to the anchorage or from dock or anchorage to outer limit of pilotage district.
- 2.6 Resident. A person who maintains a place of abode within the CNMI.

#### PART III -- LICENSURE OF HARBOR PILOTS

- 3.1 A person may pilot a vessel where such vessel is required to have a pilot under regulations promulgated by the CPA only if the Board has issued the person a CNMI pilot's license and endorsed the license for the applicable pilotage district.
- 3.2 A person must obtain a separate license endorsement to pilot a vessel in each separate pilotage district defined by the CPA.
- 3.3 Prior to issuance of a pilot's license a person must pay a license fee of \$500.00 payable to the CNMI Treasurer.



## Commonwealth of the Northern Mariana Islands BOARD OF PROFESSIONAL LICENSING

P.O. Box 2078 Saipan, MP 96950 Tel. No.: (670) 234-5897

#### NUTISIAN PUPBLIKU

### I MANMA'ADAPTA SIHA NA AREKLAMENTO YAN REGULASION

#### PARA I

#### PILOTON PUETTO

Depues di ha ribisa todu i manmasatmiti na komento, i kuetpon Professional Licensing ginen este ha adapta i manmapropoponi na areklamento yan regulasion para i piloton puetto siha ni manmapupblika gi halom i Rehistran Commonwealth gi Huliu 15, 1990, ni mana'guaha unos kuanto siha na tinilaika. Este siha na areklamento yan regulasion para i piloton puetto manma'adapta sigon gi Lai Pupbliku Numiru 1-8 yan 4 CMC Papa' Seksiona 3105. Este siha na areklamento yan regulasion para u fanafekta todu petsona yan kotporasion ni manmanpribebeni setbision pilotu gi halom i Commonwealth i Sangkattan siha na Islas Mariana.

Komo konsiste yan i 1 CMC Papa' Seksiona 9105 (b), este siha na areklamento yan regulasion para u fanefektibu gi halom dies (10) dias despues di i fecha ni mapupblika este nutisia gi halom i Rehistran Commonwealth.

Richard N. Cody, Chairman

Board of Professional Licencing

#### PART IV -- QUALIFICATIONS FOR LICENSURE

- 4.1 A person is eligible to obtain a license as a harbor pilot and an endorsement for the applicable pilotage district if the person meets the following qualifications:
  - (a) Is over the age of 25 and under the age of 72;
  - (b) Is a U.S. Citizen or a resident of the CNMI;
  - (c) Is physically capable of performing the duties of a pilot as certified by a CNMI licensed physician;
  - (d) Is mentally fit and competent as certified by a CNMI licensed physician;
  - (e) Has normal color vision and vision which is correctable to 20/20 in both eyes as certified by a CNMI licensed optometrist;
  - (f) Has successfully completed all examinations required by the Board that are applicable to the pilotage district for which the applicant seeks licensure;
  - (g) Has successfully completed and satisfactorily documented proof of completion of the familiarization trips required by the Board;
  - (h) Satisfies at least one of the following:
    - (1) (a) holds a valid U.S. Coast Guard First Class Pilot license for vessels of unlimited tonnage for one or more of the pilotage districts of the CNMI, and must document, to the satisfaction of the Board, at least one year of experience as a harbor pilot working under the authority of his pilot license on any ports of the United States including at least 50 vessel movements, and
      - (i) possesses a valid U.S. Coast Guard license with a rating as Master Steam or Motor vessels of 1,600 gross tons including freight or towing vessels (but excluding fishing vessels), or
      - (ii) a U.S. Coast Guard master or mates license of unlimited tonnage of Steam or Motor vessels upon oceans (excluding

#### fishing vessels).

- (2) previously held a Trust Territory deck officers license for vessels over 1600 tons and can demonstrate to the satisfaction of the Board one year sea time as master or mate of steam or motor vessels of at least 300 gross tons and completes at least one year of apprenticeship under an apprenticeship program approved by the Board;
- (3) previously held a Trust Territory harbor pilot's license for vessels of at least 2,000 gross tons for the ports in the CNMI, and can document to the satisfaction of the Board, at least an average of 10 vessel movements per year in the immediately preceeding 5 years in the applicable pilotage district; or
- (4) satisfactorily completes an apprenticeship program approved by the
- (i) Speak, write and comprehend English to the satisfaction of the Board.
- 4.2 No person shall be licensed by the Board unless he or she has applied to the Board for a pilot license on the form provided by the Board and paid to the CNMI Treasurer the application fee of \$100.00. All application fees are nonrefundable.

#### PART V -- EXAMINATIONS

- 5.1 Each applicant shall be required to pass examinations:
  - (a) Applicants applying under the provisions of Part 4.1(h)(3) shall complete written examinations covering the International Rules of the Road, and the physical characteristics of the pilotage district for which the applicant seeks licensure; or
  - (b) Applicants applying under the provisions of part 4.1(h)(2) and (4) shall obtain a U.S. Coast Guard first class pilots license for the ports which the applicant seeks licensure. In the event that the applicant is not eligible for a U.S. Coast Guard first class license, the applicant shall have successfully passed the examination for a U.S. Coast Guard first class pilots license, or an examination developed by the Board which covers the subjects on which applicants for original first class

pilots licenses are examined by the U.S. Coast Guard.

- (c) Applicants applying with Coast Guard licenses under the provisions of part 4.1(h)(1) are exempt from the examination requirements.
- 5.2 All examinations may be taken by a qualified applicant who:
  - (a) Has had a license application on file with the Board for at least 30 working days prior to the examination;
  - (b) Has paid to the CNMI Treasurer a nonrefundable examination fee of \$25.00; and
  - (c) Has had a physical examination as further specified in Part 7 of these Regulations by a CNMI licensed physician not more than 45 days prior to the date of the application submitted to the Board and submitted to the Board the physician's Statement of Fitness. If a person is retaking any examination that he or she failed such physical examination shall have occurred not more than 180 days prior to the date of the Board's examination.
- 5.3 A passing grade for all required examinations administered by the Board shall equal 90%. For exams administered by the Coast Guard, the Board indorse the criterias adopted by the Coast Guard.
- 5.4 If an applicant fails any examination administered by the Board, he or she may retake the examination a maximum of 3 times within 12 months. The Board shall not require the applicant to reapply with the Board for each examination. The applicant shall pay the examination fee each time he or she takes an exam.

#### PART VI -- FAMILIARIZATION TRIPS

- 6.1 An applicant seeking an endorsement to pilot in the pilotage district of Saipan shall have completed 24 familiarization trips. An applicant seeking an endorsement to pilot in the pilotage districts of either Rota or Tinian shall have completed 16 familiarization trips.
  - (a) One familiarization trip shall consist of one vessel movement in the harbor included in the pilotage district without any accidents, collisions or similar incidents.
  - (b) At least 6 of the required familiarization trips shall be conducted between one hour after sunset and one hour before sunrise.
  - (c) At least 6 of the required familiarization trips shall be on self propelled vessels of at least 300

- gross tons or larger, or on a vessel with operational radar.
- (d) All familiarization trips shall be documented to the satisfaction of the Board.
- When at least two pilots have been licensed by the Board in particular (pilotage district, one-half of all required familiarization trips must be made under the supervision of a pilot licensed by the Board.
  - After every familiarization trip made under the (a) supervision of a licensed pilot the supervisory pilots shall fill out, on a form provided by the Board an evaluation of the applicant's performance.
  - (b) After completion of the required number familiarization trips the Board shall evaluate the applicant's performance in ship handling skills on the basis of the evaluation forms and other relevant information and decide whether the applicant should be licensed or whether additional familiarization trips should be required. The Board may require that a pilot additional familiarization trips if perform supervisory pilot's evaluations indicate that the applicant needs additional experience in ship handling.
- An applicant seeking an original pilots license (no prior pilots license from the Trust Territory or U.S. Coast Guard) for a pilotage district in the CNMI shall be required to demonstrate to the satisfaction of the board appropriate ship handling capabilities by successfully docking and undocking a number of vessels under the supervision of a CNMI licensed harbor pilot. minimum of 10 successful dockings and undockings on a self propelled vessels of 1,600 gross tons or more shall be performed. Not more than one half of these dockings and undockings shall be performed under the supervision of the same CNMI licensed harbor These dockings and undockings may be performed in pilot. conjunction with the familiarization trips required herein.

#### PART VII -- PHYSICAL REQUIREMENTS AND EXAMINATIONS

- The following applicants and pilots must have a physical examination by a CNMI licensed physician:
  - (a) all applicants;
  - (b) all licensed pilots on an annual basis; and
  - all licensed pilots 60 days prior to renewal. (C)

- The physical examination required of all applicants or pilots shall demonstrate that such person is in all respects physically fit to perform the duties of a pilot. The examination shall assure that the person's abilities as a pilot will not be impaired by eyesight, hearing or other bodily function and shall include examination of the pilot's eyes (including tests for color blindness, depth perception, night vision, disease, field of vision and reflexes); ears; heart; blood pressure; blood components; pulse; speech capabilities; history of diseases (including cancer, arthritis, arrhythmia, asthma, bronchitis. emphysema, ulcers, alcoholism and other illnesses) and any other medical information which the physician feels is relevant. Board reserves the right to impose mandatory testing for drug or alcohol use.
- 7.3 The applicant or the pilot shall file with the Board on the form supplied by the Board the examining physician's Statement of Fitness.
  - Within 60 days of the applicant filing the completed (a) application form with the Board and the physicians's Statement of Fitness.
  - Within 60 days of the date of a pilot's annual physical (b) examination or physical examination for renewal.
- If the physician's Statement of Fitness indicates that the applicant is not physically or mentally able to perform the duties of a pilot, the Board shall not issue the pilot a license.
- In the case of the annual physical exam, should the physician's Statement of Fitness indicate that the pilot is not capable of performing the duties of a pilot, the Board shall suspend such license until a further physical examination has been completed and indicates that the pilot is capable of performing his duties as a pilot.
- 7.6 In the case of the renewal of a pilot's license, should the pilot be temporarily physically incapacitated at the time his license is due to be renewed, the Board shall not renew such license until a further physical examination indicates that the pilot is capable of performing his duties as a pilot.

#### PART VIII -- LICENSE RENEWAL

Each pilot shall renew his or her pilot's license every three years from the date of issue. All licensed pilots seeking to renew his or her license shall complete the application form provided by the Board and file it at least sixty days prior to the expiration date of the license. Upon approval of the license renewal application the renewal fee shall be paid to the CNMI Treasurer in the amount of \$500.00.

- 8.2 In addition to filing the application, to renew a pilot's license the applicant for renewal must do the following during the periods prescribed:
  - (a) Have completed 30 vessel movements accomplished in the applicable pilotage district during the time since the license was issued, 10 of which shall have been completed during the immediately preceding 12 months from the date the application for renewal is filed with the Board;
  - (b) Pass a general physical examination within forty-five days prior to the renewal date. The physician shall submit to the Board a Statement of Fitness stating whether and under what conditions the pilot is capable of providing pilotage services; and
  - (c) Pass an examination testing the International Regulations for the Prevention of Collisions at Sea within 90 days prior to renewal. The renewal applicant may use the official publication containing the Regulations during this examination.
- 8.3 If the applicant for renewal fails to have the required number of trips in the pilotage district, the Board may require the applicant to complete additional familiarization trips under the supervision of a licensed pilot prior to renewing the pilot's license. During such time if the time for the pilot's license renewal has passed, such pilot shall not pilot a vessel without the supervision of a licensed pilot.
- 8.4 If a pilot fails to apply to renew his or her license and fails to complete the requirements contained in paragraph 8.2 prior to the date it expires the license shall lapse and be invalid and the pilot must reapply with the Board to obtain a new license.

### PART IX -- REPORTING REQUIREMENTS

- 9.1 In every case where a vessel piloted by a CNMI-licensed pilot shall go aground, collide with another vessel, or collide with a dock, or shall meet with any casualty, or be injured or damaged in any way, the pilot shall file a written report with the Board as soon as returning to shore and in any event no later than 7 days after the incident. The report shall advise the Board of all relevant facts relating to the incident.
- 9.2 Any pilot who shall fail, neglect, or refuse to make a written report to the Board for a period of ten days after the date the report is required to be filed, shall be subject to having his license suspended or revoked.

#### PART X -- REVOCATION/SUSPENSION AND TERMINATION OF LICENSE

- 10.1 The Board shall have power on its own motion, or in its discretion, upon the written request of any interested party, to investigate the performance of pilotage services subject to these regulations and issue a reprimand, or suspend, withhold, or revoke the license of any pilot, or any combination of the above, for misconduct, incompetency, inattention to duty, intoxication, drug use, or failure to perform his or her duties under these regulations, or violation of any of the rules or regulations provided by the Board for the government of pilots including training requirements or misrepresentation in the application The Board may require that a pilot satisfactorily complete a specific course of training or treatment prior to reinstatement of the pilot's license.
- The Board shall terminate the license of any pilot reaching the age of seventy-two.
- The Board shall have the right to revoke the license of any pilot convicted of a crime which in any way involves the use of illegal drugs or alcohol or use of alcohol or drugs while on duty, including missing an assignment due to alcohol or drug use.
- The Board shall have the right to revoke the license of any pilot who files false information with the Board.
- Any pilot whose license has been revoked must reapply with the Board to obtain a new license.

#### PART XI -- RADAR TRAINING

- 11.1 All pilots must complete a Coast Guard approved unlimited radar observation training course prior to issuance of the pilot license with the exception of persons applying for an original pilot license under the provisions of part 4.1(h)(3) who may be issued a provisional license pending the applicant obtaining the necessary training. Such a provisional license, if issued, will be valid for six months only and may not be renewed. No other application for an original license and no applications for a renewal will be considered by the board unless the applicant presents documentation, to the satisfaction of the Board, that the applicant has satisfactorily completed a Coast Guard approved unlimited radar observer course and holds a valid certification as radar observer. Furthermore, if a pilot, licensed under the authority of these regulations, conducts one vessel movement of a vessel required to have a pilot under regulations promulgated by the Commonwealth Ports Authority with an invalid radar observed certificate, notwithstanding the one and only exception listed pilot's then 🗄 that license is subject revocation/suspension proceedings under the authority of part 10.1 of these regulations.
- 11.2 To renew a pilot's license a pilot shall have completed an

unlimited refresher radar training program from an approved school prior to filing the application for renewal with the Board.

11.3 After a pilot completes an unlimited radar training program, he or she shall file a Statement of Training on a form required by the Board.

### PART XII -- VIOLATIONS

All persons who pilot a vessel in violation of these regulations shall be subject to criminal or civil penalties as provided by law, as well as, where applicable, suspension or revocation of a license issued by the Board.

#### PART XIII -- DRUG SCREENING

The Board reserves the right to require satisfactory completion of a drug screening test prior to issuance or renewal of a license. The Board also reserves the rights to require mandatory random drug screening.

#### FORMS NEEDED:

- 1. Initial application form;
- License renewal form;
- 3. Physician's Statement of Fitness.
- 4. Statement of Training

#### FEES:

- 1. Application fee \$100.00
- 2. Examination fee \$25.00
- 3. License fee \$500.00
- 4. License renewal fee \$500.00

#### **EXAMINATIONS NEEDED:**

- 1. International Regulations for the Prevention of Collisions at Sea -- to be administered by the Coast Guard with results certified to the Board
- 2. Draw the harbor -- to be created and administered by the Coast Guard
- 3. others?

#### **MISCELLANEOUS**

- 1. Need list of approved radar training programs
- 2. Need International Regulations for Prevention of Collisions at Sea booklets
- 3. Need to meet with Lt. Payton Colman regarding preparing and administering the examinations



# COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS OFFICE OF THE ATTORNEY GENERAL

2ND FLOOR - ADMINISTRATION BLDG., CAPITOL HILL SAIPAN, MP 96950

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DEPUTYATTORNEYGENERAL
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SOLICITORS DIVISION
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November 15, 1990 Commonwealth Register Volume 12 No. 11

#### PUBLIC NOTICE

Annual Report's Notice of Completion

The Second Annual Report of the Insurance Commissioner for the calendar year ending December 31, 1989 and Second Annual Report of the Director of Banking for the calendar year ending December 31, 1989 are submitted for publication in the Commonwealth Register.

BANKING SECTION

OFFICE OF THE DIRECTUR OF BANKING

DEPARTMENT OF COMMERCE AND LABOR
FIRST FLOOR, ADMINISTRATION BUILDING, CAPITOL HILL
SAIPAN, MP 96950

SECONO

ANNUAL REPORT

OF

THE DIRECTOR OF BANKING

FOR THE PERIOD ENDING DECEMBER 31, 1989

JOAGUIN S. TURRES Director of Banking

OCTOBER, 1990

BANKING SECTION
OFFICE OF THE DIRECTUR OF BANKING
DEPARTMENT OF COMMERCE AND LABOR
FIRST FLOOR, ADMINISTRATION BUILDING, CAPITOL HILL
SAIPAN, MP 96950

SECOND

ANNUAL REPORT

OF

THE DIRECTOR OF BANKING

FOR THE PERIOD ENDING DECEMBER 31, 1989

JOAQUIN S. TORRES Director of Banking

OCTOBER, 1990

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#### Recommended Legislation

- Adoption of the Federal Truth in Lending or the Uniform Consumer Credit Code for the regulations of finance companies and other industries extending consumer loans and credits for the protection of consumers. The Banking Law does not cover regulations for finance companies.
- Adoption of the Uniform Securities Law, also known as the Blue Sky Law, for the regulations of securities registration to be offered in the CNMI, and for licensing and registration of broker-dealers, agents and investment advisors.
- This office strongly urged the Legislature to pass the Banking Amendments presently pending in the House. It is also recommended that further review be made and additional control measures be included in order to safeguard public interest. One very important measure is the lending restrictions to insiders such as stockholders. officers and employees of the bank. This control does not appear in the present Banking Code.

#### Other Matters

On June 29, 1990, the U.S. Department of the Interior, Office of Territorial and International Affairs, approved \$9,000 under technical assistance to fund the training for two local bank examiners to attend the Federal Deposit Insurance Corporation (FDIC) Bank Examiner School I in Arlinoton, Virginia. The Banking and Insurance Section needs trained bank examiners to properly examine banks, finance companies and insurance companies for the protection of the consumers and depositors. Presently, CNMI has six (6) commercial banks, which two (2) are not members of the FDIC and public deposits are not insured. These two banks are strictly under the supervision of this office.

#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

### CONSOLIDATED FIGURES OF

#### RETAIL BANKS

### DECEMBER 31, 1989

#### IN THOUSANDS OMITTED (000)

| I.   | DEPOSIT        | <u>3</u> ;   |
|------|----------------|--|
|      | 1.             | Demand \$ 93,971                                       |
| •    | 2.             | Regular Savings  |
|      | 3.             | Time Certificates of Deposit 157,310                   |
|      |                | Total \$ 326.821                                       |
| II.  | <u>LOANS</u> : |  |
|      | 1.             | Consumer \$ 43,443                                     |
|      | 2.             | Commercial   |
|      | 3.             | Real Estate, Mortgage Installment and Home Improvement |
|      | 4              | Non-Local 400  |
|      | 5.             | Government   |
|      |                | Total \$ 107,110                                       |
| III. | Interest       | t paid on all deposit accounts \$ 14,102               |
| IV.  | Interes        | t paid by borrowers on loans \$ 14.159                 |

# COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CONSOLIDATED REPORT OF CONDITIONS OF ALL BANKS DOING BUSINESS IN THE CNMI AS OF DECEMBER 31, 1989

#### In Thousands Omitted (000)

|   | I TOTALS          |
|---|-------------------|
| ASSETS:   | 1                 |
| 1) Cash & cash items in process of collection     | 33,192            |
| 2) Securities:                                    |                   |
| a) U.S. Treasury                                  | 1                 |
| b) U.S. Goverrment Agencies                       | 1                 |
| c) Others   | 1 5,603           |
| 3) Balances with other banks                      | 2,678             |
| 4) Loans (Gross)                                  | 1                 |
| a) Government                                     | 3,821             |
| b) Consumer                                       | 43,443            |
| c) Real estate                                    | 1 2,012           |
| d) Commercial                                     | 57,434            |
| e) Non-Local                                      | 1 400             |
| 5) Premises & Equipment                           | 1,815             |
| 6) Other real estate owned                        | 1                 |
| 7) Due from banks:                                | 1                 |
| a) Head office or branches                        | 169,304           |
| b) Others   | 281               |
| B) Provisions for loan losses/unearned discount   | (1,321)           |
| 9) Other Assets                                   | 18,992            |
| TOTAL ASSETS                                      | 337,654           |
| Interest Received from Borrowers in 1989          | 14,159            |
| LIABILITIES AND CAPITAL:                          | <b>\$</b>         |
| 1) Deposits:                                      | }                 |
| a) Demand deposit - govt & govt agencies          | 12,183            |
| b) Other  | 81,788            |
| c) Regular savings - govt & govt agencies         | 1 1,947           |
| d) Other  | 73,593            |
| e) TCD - govt & govt agencies                     | 1 27,208          |
| f) Other  | 130,102           |
| 2) Due to other banks                             | *                 |
| a) Head office or branches                        | ł                 |
| b) Others   | 4                 |
| 3) Liabilities on acceptances executed & outstndg | ł                 |
| 4) Accrued interest payable & other liabilities   | 4,995             |
| 5) Capital stock                                  | 1,251             |
| 5) Capital surplus                                | 1 2,562           |
| 7) Undivided profits                              | ! 2 <b>, 0</b> 25 |
| 8) Convertible subordinated debt & FSLIC contrib. | }                 |
| TOTAL LIABILITIES & CAPITAL                       | 337,654           |
| Interest paid to depositors in 1989               | 14,102            |

#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CONSOLIDATED FIGURES OF RETAIL BANKS AS OF DECEMBER 31, 1987

|      | IN THOUSANDS (000) OMITTED                                | l<br>l 1986  | l 1987 l         | Increase or  <br>Decrease  <br>1986 vs. 1987 |
|------|---|--|------------------|--|
| I.   | DEPOSITS:   | :<br>{<br>}  | ;<br>;<br>;      | 1200 45- 1201                                |
|      | i. Demand   | l<br>  <u>23,264</u>                                   |                  | 27,147 )                                     |
|      | 2. Regular Savings  | !<br>! <u>17,434</u>                                   |                  | 110,991                                      |
|      | 3. Time Certificates of Deposit                           | ! <u>24,274</u>  | . 788, 994 I     | 764,720                                      |
|      | 4. Total  | ;<br><u>64,972                                    </u> | 967 <u>,83</u> 0 | 902 <b>.</b> 858                             |
| 11.  | LOANS:  | }<br>}   |                  |  |
|      | 1. Consumer   | 49,670   | ;<br>! 325,820   | 276,150                                      |
|      | 2. Commercial   | <br>  <u>52,200</u>                                    | ! 44,796         | (7,404)                                      |
|      | 3. Real Estate, Mortgage Installment and Home Improvement | ;<br>  | :<br>: 846,020 ! | 835,676 i                                    |
|      | 4. Non-Local  | i <u>-0-</u>   | !                | -@- ;  |
|      | 5. Government and agencies                                | (<br>  <u>2,358</u>                                    | <br>  5,319      | 2,961 i                                      |
|      | Total   | !<br>! <u>114,572</u>                                  | <br>  1,221,955  | 1,107,383                                    |
| III. | INTEREST PAID ON ALL DEPOSIT ACCOUNTS                     | !<br>! <u>8,079</u>                                    | <br>  1,661,214  | 1,653,136                                    |
| IV.  | INTEREST PAID BY BORROWERS ON LOANS                       | !<br>! <u> </u>  | <br>  1,036,434  | 1,027,231 {                                  |

#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CONSOLIDATED FIGURES OF RETAIL BANKS AS OF DECEMBER 31, 1988

|      | IN THOUSANDS (000) OMITTED                                | 1987          | ;<br>! 1988<br>!                      | Increase  <br>  (Decreased)  <br>  '87 vs '88 |
|------|---|---------------|---------------------------------------|---|
| I.   | DEPOSITS:   | ·             | <u> </u>                              |   |
|      | 1. Demand   | 47,117        | !<br>  55,391<br> -                   | 8.274   |
|      | 2. Regular Savings  | 41,353        | ;<br><u>  57,505</u><br>              | 1 16,152 1                                    |
|      | 3. Time Certificates of Deposit                           | <u>72,999</u> | ;<br>; 110,230                        | 37,231  |
|      | 4. Total  | 161,469       | ,<br><u>  223, 126  </u>              | 61.657  |
| II.  | LOANS:  | <br>          | · · · · · · · · · · · · · · · · · · · | !<br>!  |
|      | i. Consumer   | 32,027        | 1 38,870                              | 6,843   |
|      | 2. Commercial   | 34,685        | <br>  40,445                          | 5.760 1                                       |
|      | 3. Real Estate, Mortgage Installment and Home Improvement | 6,146         | ,<br>  6,508<br>                      | <u>  362  </u>                                |
|      | 4. Non-Local  | 41            | ! 730                                 | <u>, 689 (</u>                                |
|      | 5. Government and agencies                                | 5,319         | !<br>! 2,183                          | (3, 136) i                                    |
|      | Total   | 78,218        | !<br>! 88,736                         | 1 10.518 1                                    |
| III. | INTEREST PAID ON ALL DEPOSIT ACCOUNTS                     | <u>5,161</u>  | 1 10,114                              | 1 4.953 I                                     |
| IV.  | INTEREST PAID BY BORROWERS ON LOAMS                       | 5,962         | !<br>! 9,058                          | ! 3,096 I                                     |

# COMMONWEALTH OF THE MORTHERN MARIANA ISLANDS CONSOLIDATED FIGURES OF RETAIL BANKS AS OF DECEMBER 31, 1989

|      | IN THOUSANDS (000) OMITTED            | !<br>! 1988 !              | 1989           | (Decreased)            | Percentage of  <br> Increase/Decrease <br>  188 vs 189 |
|------|---------------------------------------|----------------------------|----------------|------------------------|--|
| I.   | DEPOSITS:                             | }                          |                | 1                      | 1  |
|      | 1. Demand                             | <br>  <u>55,391</u>  <br>  | 93,971         | 1 38,580               | ! 70% !  |
|      | 2. Regular Savings                    | 57,505 I                   | 75,540         | i 18,035               | 1 31%  |
|      | 3. Time Certificates of Deposit       | <br>  <u>110.230  </u><br> | 157,310        | <br>  47.080           |  |
|      | 4. Total                              | 223,126                    | *326,821       | 103,695                | 1 46%  |
| II.  | <u>LOANS</u> : 1. Consumer.           | !<br>! 38,870              | 43,443         | !<br>!<br>!<br>! 4,573 | , , , , , , , , , , , , , , , , , , ,                  |
|      | 2. Commercial                         | 40,445                     | 57,434         | ! 16,989<br>!          | ! 42% !  |
|      | 3. Real Estate, Mortgage Installment  | }                          |                | }                      | 1  |
|      | and Home Improvement                  | 6,568                      | 5,015          | (4,496)                | (69%)  |
|      | 4. Non-Local                          | 730                        | 400            | (330)                  | (45%) i  |
|      | 5. Government and agencies            | 2,183                      | 3,821          | 1,638                  | 1 75%  |
|      | Total                                 | i<br>  <u>88,736</u>       | <br>  *107,110 | 18,374                 | ; <u>21%</u> !   |
| III. | INTEREST PAID ON ALL DEPOSIT ACCOUNTS | 1 10,114                   | 14,102         | ;<br>  3,988           | <u>; 39% </u> !  |
| IV.  | INTEREST PAID BY BORROWERS ON LOAMS   | 9,058                      | l<br>l 14,159  | 1<br>  5,101           | ! 56% !  |

\*TOTAL LOAMS \$107,110 \*TOTAL DEPOSITS \$326,821 = 33%

#### DIRECTORY

#### 1989 FINANCIAL INSTITUTIONS

#### Retail Banks

1. Bank of Guam Saipan Branches P. O. Box 678 Saipan, MP 96950

Vice President/Manager: Mike W. Naholowaa
Telephone: 234-6522/6801
Business Location: Susupe and Garapan, Saipan
Rota
Insurance: FDIC (\$100,000)
Commencement: 1980

2. Bank of Hawaii P. O. Box 566 Saipan, MP 96950

> Branch Manager: Mr. Larry Sutton Telephone: 234-6673/74/6102 Business Location: Susupe, Saipan Insurance: FDIC (\$100,000) Commencement: 12/31/83

3. Bank of Saipan, Inc. P. D. Box 690 Saipan, MP 96950

> Vice President/Manager: Fred D. Greenley Telephone: 234-6908 Business Location: Garapan, Saipan Insurance: Non-insured Commencement: 1981

4. First Savings and Loan Association of America P. O. Box 324 Saipan, MP 96950

> Branch Manager: Edward B. Palacios Telephone: 234-6617/8561 Business Location: Susupe, Saipan Insurance: FSLIC (\$100,000) Commencement Date: 1984

5. Marine Merchant Bank and Trust Co., Ltd. P. O. Box 1867
Saipan. MP 96950

Manager: Mr. Joe Guerrero

Telephone: 234-7773

Business Location: San Jose, Saipan

Insurance: Non-insured Commencement: 1982

6. Union Bank
P. 0. Box 1053
Saipan, MP 96950

Vice President/Branch Manager: Ken Kato

Telephone: 234-6559/6209/6232

Business Location: San Jose, Saipan

Insurance: FDIC (\$100,000)

Commencement: 1975

#### Offshore Banks

1. First American Bank of Commerce, Ltd. P. O. Box 949
Saipan, MP 96950

Principal Location: Susupe, Saipan

Resident Agent: Douglas F. Cushnie, Esq.

Attorney-at-Law P. O. Box 949 Saipan, MP 96950

Telephone: 234-6843/6830

Commencement: 1986

2. First American Bank, Ltd. P. O. Box 222, CHRB Saipan, MP 96950

Telephone: 234-6547/8

Resident Agent: Charles K. Novo-Gradac, Esq.

WHITE, NOVO-GRADAC & THOMPSON

Attorneys-at-Law P. O. Box 222, CHRB Saipan, MP 96950

Principal Location: Susupe, Saipan (Joeten Center)

Commencement: 1982

#### 1989 LISTING

#### Foreign Currency Exchange

CNMI CURRENCY EXCHANGE, INC.
 P. O. Box 486
 Saipan, MP 96950
 Location: San Jose, Saipan

Location: San Jose, Salpan San Jose, Tinian

Telephone: 234-3318

Resident Agent: P. Michael Tenorio

License No.: FX(D)@13-89R Issued Date: 1/10/89

2. E.I.E. CORPORATION (HYATT REGENCY)

P. 0. Box 87

Saipan, MP 96950

Location: Garapan, Saipan

Telephone: 234-1234

Resident Agent: Milton Morinaga

License No.: FX(D)006-89R

Issued Date: 1/10/89

Foreign Currency Exchange Agent:

- 1. Petra Tharngan (FX(A)@15-89R)
- 2. Evangeline Javier (FX(A)020-89N)
- 3. John Moses (FX(A)@18-89N)
- 4. Benedict Otono (FX(A)@19-89N)
- 5. Melsihner Ramon (FX(A)016-89R)
- 6. Willingheart Subediang (FX(A)017-89R)

3. G.M.C. INTERNATIONAL SERVICES, INC.

Caller Box PPP 177

Saipan, MP 9695@

Location: San Jose, Saipan

Telephone: 234-5027

Resident Agent: Pedro M. Atalig

License No.: FX(D)@16-89R

Issued Date: 1/25/89

Foreign Currency Exchange Agent: 1. Renato Pangilinan (FX(A)025-89N)

- 4. HOTEL NIKKO SAIPAN, INC.
  P. O. Box 152, CHRB
  Saipan, MP 96950
  Location: San Roque, Saipan
  Telephone: 322-3311
  Resident Agent: Kim Batcheller
  License No.: FX(D)019-89R
  Issue Date: 3/16/89
  Foreign Currency Exchange Agent: None
- 5. ISLAND CURRENCY FOREIGN EXCHANGE
  P. O. Box 166
  Saipan, MP 96950
  Location: Chalan Kanca Dist. #2
  Rota
  Telephone: 234-7325
  Resident Agent: None
  License No.: FX(D)002-89R
  Date Issued: 12/16/88
  Foreign Currency Exchange Agents:
  - Pate Issued: 12/16/88

    Foreign Currency Exchange Agents: 1. Nelly A. Docuyanan (FX(A)001-89R)

    2. Venerio M. Marcia (FX(A)002-89R)
- 6. LBC MABUHAY (SAIPAN), INC.
  P. 0. Box 1910
  Saipan, MP 96950
  Location: Susupe
  Telephone: 234-9013
  Resident Agent: Ben Borja
  License No.: FX(D)009-89R
  Date Issued: 1/06/89
  Foreign Currency Exchange Agent: None
- 7. MICRO PACIFIC DEVELOPMENT, INC.
  (Saipan Grand Hotel)
  P. O. Box 369
  Saipan, MP 96950
  Location: Susupe
  Telephone: 234-6601/3
  Resident Agent: Ricardo Duenas
  License No.: FX(D)015-89R
  Date Issued: 1/24/89
  - Foreign Currency Exchange Agents: 1. Yasushi Ito (FX(A)023-89R)
    2. Hiro Hiro Hirano (FX(A)024-89R)

#### MICHIGAN INCORPORATED 8.

P. O. Box 2682 Saipan, MP 96950

Location: San Antonio Telephone: 234-9555 Resident Agent: None

License No.: FX(D)@05-89R

Date Issued: 1/11/89

Foreign Currency Exchange Agent: 1. Young Tai Cho (FX(A)009-89R)

#### 9, MICRONESIA (INT'L) JEWELRY, INC.

P. O. Box 1750 Saipan, MP 96950 Location: Garapan Telephone: 234-9531

Resident Agent: Julian S. Calvo

License No.: FX(D)017-89R Date Issued: 02/02/89

Foreign Currency Exchange Agents: 1. Lucy Ang Tan (FX(A)026-89R)

#### 10. NEW STAR CORPORATION

P. O. Box 1749 Saipan, MP. 96950

Location: Susupe, Saipan Telephone: 234-5296/7

Resident Agent: James H. Grizzard

License No.: FX(D)@1@-89R Date Issued: 1/10/89

Foreign Currency Exchange Agents: 1. Cho, Yong Jai (FX(A)011-89R)

#### PACIFIC MICRONESIA CORPORATION 11.

(Saipan Beach Hotel)

P. O. Box 1029 Saipan, MP 96950

Location: Garapan, Saipan Telephone: 234-6412/7064

Resident Agent: Peding C. Sanchez

License No.: FX(D)@04-89R)

Date Issued 12/16/88

11

- Foreign Currency Exchange Agents: 1. Dathleen Chiren (FX(A)007-89N)
  - 2. Nacya Kitta (FX(A)@06-89R)
  - 3. Masamichi, Iwasaki (FX(A)003-99R)
  - 4. Vivian Trinidad (FX(A)@05-89R)
  - 5. Joaquin C. Lizama (FX(A)004-89R)
  - 6. Annas Laigmetaw (FX(A)008-89N)

12. PHILIPPINE GOODS CURRENCY EXPEDITER

P. O. Box 165

Saipan, MP 96950

Location: San Jose, Saipan

Telephone: 234-6485

Resident Agent: Victorino N. Villacrusis

License No.: FX(D)@03-89R

Date Issued: 12/14/88

Foreign Currency Exchange Agent: None

13. SAIPAN HOTEL CORPORATION

(Hafadai Beach Hotel)

P. O. Box 338

Saipan, MP 96950

Location: Garapan, Saipan

Telephone: 234-6495/8

Resident Agent: Herman Guerrero

License No.: FX(D)@11-89R

Date Issued: 1/10/89

Foreign Currency Exchange Agents:

- 1. Seiyo Horai (FX(A)@28-89R)
- 2. Tomic Hanai (FX(A)039-89R)
- Toshiichi Kase (FX(A)027-89R)
- 4. Yutaka Kurihara (FX(A)@29-89R)

TONY LIM ENTERPRISE (Antonio T. Lim)

F. O. Box 1579

Saipan, MP 96950

Location: Garapan, Saipan

Telephone: 234-6834

Resident Agent: Benigno R. Fitial

License No.: FX(D)007-89R

Date Issued: 4/22/88

Foreign Currency Exchange Agents: 1. Medellio C. Oclima (FX(A)@1@-89R)

(Dollar Up Souvenir Mart, Inc.)

SAIPAN DIAMOND HOTEL 15.

P. O. Box 66

Saipan, MP 96950

Location: Susupe, Saipan

Telephone: 234-5900

Resident Agent: Juan C. Lizama

License No.: FX(D)001-89R

Date Issued: 11/23/88

Foreign Currency Exchange Agent: None

16. SUWASO CORPORATION
(Coral Ocean Point Country Club)
P. 0. Box 1160

Saipan, MP 96950

Location: Agingan Point, Saipan

Telephone: 234-7000

Resident Agent:

License No.: FX(D)020-89R Date Issued: 04/06/89

Foreign Currency Exchange Agents: 1. Hideo Sugiyama (FX(A)036-89N)

17. TRI-ALL INTERNATIONAL CORP.

P. O. Box 2610

Saipan, MP 96950

Location: Gualo Rai, Saipan Telephone: 234-6610/6345

Resident Agent: Jorge Manalili

License No.: FX(D)008-89R

Date Issued: 1/10/89

Foreign Currency Exchange Agents: 1.

- . Adela Arcales (FX(A)021-89R)
- 2. Esterlita Canadalla (FX(A)@12-89N)
- 3. Elizabeth D. Manio (FX(A)@22-89N)
- 4. Manuel L. Acaban (FX(A)037-89N

 United Pacific International, Inc. (Galaxy Services)

P. C. Box 587

Saipan, MP 96950

Location: Chalan Piac, Saipan

San Jose, Tinian

Songsong, Rota

Telephone: 234-6694/6838

Resident Agent: None

License No.: FX(D)@18-89N

Date Issued: 02/23/89

Foreign Currency Exchange Agents: 1.

- . Roma Diaz-Aranda (FX(A)035-89N)
- 2. Frederick C. Craw (FX(A)@31-89N)
- 3. Juan C. Diaz (FX(A)032-89N)
- 4. Arturo E. Macaspac (FX(A)@33-89N)
- 5. Jojo C. Reyes (FX(A)034-89N)

19. VICTORIA FOREIGN EXCHANGE, INC.
P. O. Box 2753
Saipan, MP 96950
Location: San Jose, Saipan
Telephone: 234-8521
Resident Agent: Lupe Flores
License No.: (FX(D)014-89R
Date Issued: 01/25/89

Foreign Currency Exchange Agent: 1. Lupe A. Flores (FX(A)014-89R)

20. VIKING INTERNATIONAL CORPORATION
P. O. Box 1280
Saipan, MP 96950
Location: Lower Base, Saipan
Telephone: 322-9006
Resident Agent: Servando SP. Regis
License No.: FX(D)012-89R
Date Issued: 01/10/89

Foreign Currency Exchange Agents: 1. Servando SP. Regis (FX(A)038-89R)
2. Willington Ang (FX(A)013-89R)

#### 1989 LISTING

#### Finance Companies

- 1. Burbank Capital Sources
  P. O. Box 1298
  Saipan, MP 96950
  Tel: 234-9336
  Location: San Jose, Saipan
  Activity: Financing Agent
  Date License Issued: 05/15/89
  License No. FIN-008-89R
- 2. Citizens Financial Corporation
  P. O. Box 2606
  Saipan, MP 96950
  Tel: 234-0627
  Location: Susupe, Saipan
  Activity: Finance
  Date License Issued: 01/27/89
  License No. FIN-003-89R
  Resident Agent: Fred A. Cochran
  P. O. Box 2606
  Saipan, MP 96950
- 3. Friendly Finance Co., Inc.
  P. 0. Box 486
  Saipan, MP 96950
  Tel: 234-6676
  Location: San Jose, Saipan
  Activity: General Finance
  Date License Issued: 01/10/89
  License No. FIN-002-89R
  Resident Agent: Peter Michael P. Tenorio
- 4. Home Financial Corporation
  P. P. Box 206
  Saipan, MP 96950
  Tel.: 234-6442
  Location: San Jose, Saipan
  Date Issued: 08/16/89
  License No.: FIN-009-89N
  Resident Agent: Joel J. Bergsma

- 6. Marianas Realty Financial Corporation P. B. Box 1447
  Saipan, MP 96950
  Tel: 234-6445/6
  Location: Susupe, Saipan
  Activity: Finance
  Date License Issued: 02/22/89
  License No. FIN-006-89R
  Resident Agent: Clarence T. Tenorio
- 7. Micronesia (Int'l) Jewelry, Inc.
  dba Micronesia Financing Co.
  P. O. Box 1750
  Saipan, MP 96950
  Tel: 234-9531
  Location: Garapan, Saipan
  Activity: Finance
  Date License Issued: 02/10/89
  License No. FIN-005-89R
  Resident Agent: Julian C. Calvo
- 8. Pacific Financial Corporation
  P. 0. Box 1657
  Saipan, MP 96950
  Tel: 234-8615/5706
  Location: Professional Bldg., San Jose, Saipan Activity: Finance
  Date License Issued: 01/11/89
  License No. FIN-001-89R
  Resident Agent: Alex Tudela
- 9. Sablan Finance, Inc.
  P. 0. Box 1430
  Saipan, MP 96950
  Tel: 234-7937
  Location: Chalan Kanoa, Saipan
  Activity: Finance
  Date License Issued: 01/31/89
  License No. FIN-004-89R

10. Saipan Global Financial Co., Inc.
P. 0. Box 1298
Saipan, MP 96950
Tel: 234-9336
Location: San Jose, Saipan
Date License Issued: 02/22/89
License No. FIN-007-89R
Resident Agent: Antonio S. Cabrera

#### 1989 LISTING

#### Securities

- 1. First American National Securities, Inc. 3120 Breckinridge Boulevard, Bldg. 400 Duluth, Georgia 30199-0001 Activity: Securities Date License Issued: 01/06/89 License No. SEC(BD)001-89R Resident Agent: Imants E. Klingbergs
- 2. Imants E. Klingbergs (Agent for First American National Securities, Inc.) P. O. Box 405 Saipan, MP 96950 Tel: 234-3151 Location: Susupe, Saipan Activity: Financial Agent Date License Issued: 01/10/89 License No. SEC(A)001-89R
- 3. Paul S. Nimchick
  (Agent for First American National Securities, Inc.)
  P. O. Box 2179
  Saipan, MP 96950
  Tel: 234-5259
  Location: Garapan, Saipan
  Activity: Securities Agent
  Dated License Issued: 03/14/89
  License No. SEC(A)002-89R
- 4. Dr. Gideon A. Querimit
  (Agent for First American National Securities, Inc.)
  P. O. Box 33
  Saipan, MP 96950
  Tel: 234-5785
  Location: San Jose, Saipan
  Activity: Securities Agent
  Date License Issued: 04/06/89
  License No. SEC(A)005-89R

5. Juan A. Cruz
(Agent for First American National Securities, Inc.)
P. O. Box 23007
GMF, Guam 96921
Location: Garapan, Saipan
Activity: Securities Agent
Date License Issued: 04/07/89
License No. SEC(A)004-89R

### 1989 LISTING

### Trust Companies

- 1. Bishop Trust Company, Ltd.
  P. G. Box 706
  Saipan, MP 96950
  Tel: 234-6844
  Location: Saipan
  Activity: Trust & Fiduciary
  Date License Issued: 02/10/89
  License No. TR-001-89R
- 2. Hawaiian Trust Co., Ltd.
  P. D. Box 241 CHRB
  Saipan, MP 96950
  Location: As Mahetok, Saipan
  Tel: 322-3455
  Activity: Trust & Investment Services
  Date Issued: 08/03/89
  License No.: TR-002-89N

OFFICE OF THE INSURANCE COMMISSIONER
DEPARTMENT OF COMMERCE AND LABOR
FIRST FLOOR, ADMINISTRATION BUILDING, CAPITOL HILL
SAIPAN, MP 96950

SECOND

ANNUAL REPORT

OF

THE INSURANCE COMMISSIONER

FOR THE CALENDAR YEAR ENDING DECEMBER 31, 1989

JOAQUIN S. TORRES
Insurance Commissioner

October 1990

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### 1989 ANNUAL REPORT Names of Foreign Insurance Companies Classes of Insurance Authorized in CNMI and their General Agents

| !  |  | <br>  CLASSES OF INSURANCE   | I NAME AND ADDRESS I<br>I OF GENERAL AGENT I   |
|----|--|--|--|
| 1) | Assurance Company of<br>Columbus<br>1932 Wynnton Road<br>Columbus, Georgia 31999 | Disability & Life  | Asia Pacific Insurance, Inc.<br>P. 8. Box 820<br>Saipan, MP 96950  |
| 2) | American Home Assurance<br>70 Pine Street<br>New York, NY 10270                  | Disability, General 'Casualty, Marine, 'Property, Surety & 'Vehicle'   | Moylan's Insurance<br>Underwriters (Int'l), Inc.<br>P. O. Box 658<br>Saipan, MP 96950  |
| 3) | Insurance Company  | 9  | American Life and Property Insurance, Inc. P. O. Box 149 CHRB Saipan, MP 96950   |
| 4} | Commercial Bankers Life Insurance Company 2301 Dupont Drive Irvine, CA 92715     | Disability & Life  | 7 Bank of Saipan<br>7 P. O. Box 690<br>7 Saipan, MP 96950  |
| 5) | One Continental Drive<br>Cranbury, New Jersey                                    | Disability, General 'Casualty, Marine, 'Property, Surety & 'Vehicle'   | Magdalena S. George<br>P. O. Box 1369<br>Saipan, MP 96950  |
| (3 | Piscataway, NJ 08854   | Disability, General ' Casualty, Marine, ' Property, Surety & ' Vehicle | Underwriters of the Pacific, Inc. Pacific, I |

| }   | **************************************   |                                       | ומ מחידוותמע מנוע הנונו   |
|-----|--|---------------------------------------|---|
| 1   | NAME OF COMPANY  | CLASSES OF INSURANCE !                |   |
| 7)  | Delaware American Life Insurance P. O. Box 667 One Alico Plaza Wilmington, DE 19899-0667 | Disability & Life 7                   | Moylan's Insurance Underwriters (Int'l), Inc.   |
| 8)  | Grand Pacific Life Insurance Co., Ltd. 888 Mililani Street Honolulu, Hawaii 96813        | Disability & Life "                   | Pacifica Insurance Underwriters, Inc. P. 0. Box 168 Saipan, MP 96950 Pacific Basin Insurance Underwriters, Inc. P. 0. Box 710                   |
| 9)  | North America<br>1600 Arch Street<br>Philadelphia, PA 19103                              | , , , , , , , , , , , , , , , , , , , | Microl Corporation P. O. Box 267 Saipan, MP 96950 Associated Insurance Underwriters of the Pacific, Inc. Pacific Fianacial Corp. P. O. Box 1657 |
|     |  | 7<br>7<br>7                           | ' Saipan, MP 96950 ' Moylan's Insurance ' Underwriters (Int'l), Inc   |
| 10) | 1600 Oak Street<br>Kansas City, MO 64108   | ,<br>7<br>5                           | ' Moylan's Insurance ' Underwriters (Int'l), Inc ' ' ' ' '  |

| !   | NAME OF COMPANY   | <br>  CLASSES OF INSURANCE   |   |
|-----|---|--|---|
| 11) | John Hancock Mutual Life Insurance Co. John Hancock Place P. 8. Box 111 Boston, Massachusetts 02117 | 7  | Universe Insurance<br>Underwriters (Micronesia)<br>Inc. |
| 12) | John Hancock Variable<br>Life Insurance Company<br>John Hancock Place                               |  | Universe Insurance<br>Underwriters (Micronesia)<br>Inc. |
| 13) | Lincoln National Life Insurance Company 1300 South Clinton St. Fort Wayne, Indiana 46801            | Disability & Life '  | Magdalena S. George                                     |
| 14} | Lumbermens Mutual<br>Casualty Company<br>Route 22, Long Grove<br>Illinois 60049                     | Disability, General 'Casualty, Marine, 'Property, Surety & 'Vehicle' | Underwriters of the Pacific, Inc.                       |
| 15) | 3120 Breckinridge Blvd.<br>Duluth, Georgia<br>30199-001   | Disability & Life  | Juan R. Sablan<br>P. O. Box 964<br>Saipan, MP 96950     |

| <b>!</b> | NOME OF COMPONY  |  | NAME AND ADDRESS OF                               |
|----------|--|--|---|
| <b>3</b> | NAME OF COMPANY  | CLASSES OF INSURANCE   | GENERAL AGENT                                     |
| 16)      | Municipal Bond Investors  Assurance Corporation  113 King Street  Armonk, NY 10504                                 | Surety 5   | Moylan's Insurance<br>Underwriters (Int'l), Inc   |
| 17)      | Pittsburgh, PA   | Disability, General 'Casualty, Property, 'Marine, Surety & 'Vehicle' |   |
| 18)      | National Western Life<br>Insurance Company<br>850 East Anderson Lane<br>Austin, Texas 78752-1602                   | Disability & Life  | Moylan's Insurance<br>Underwriters (Int'l), Inc   |
| 19)      | Company<br>1750 Elm Street   | Disability, General 'Casualty, Marine, 'Property, Surety & 'Vehicle' | Underwriters (Int'l), Inc                         |
| 20)      | North Coast Life<br>Insurance Company<br>W. 116 Riverside Ave.<br>P. 8. Box 1445<br>Spokane, WA 99210              | Life   | ' Moylan's Insurance<br>Underwriters (Int'l), Inc |
| 21)      | Occidental Life Insurance Company of North Carolina 1001 Wade Avenue P. O. Box 10234 Raleigh, North Carolina 27605 | Disability & Life  | Moylan's Insurance Underwriters (Int'l), Inc      |

| !   | NAME OF COMPANY  | <br>  CLASSES OF INSURANCE  |                                   |
|-----|--|---|-----------------------------------|
| 22) | Pacific Guardian Life<br>Insurance Co., Ltd.<br>1600 Kapiolani Blvd. | Disability & Life   | Pacifica Insurance                |
| 23) | 4 Penn Center Plaza<br>Philadelphia, PA 19103                        | Disability, General 'Casualty, Property 'Marine, Surety & 'Vehicle'       | Underwriters of the               |
| 24} | Compliance Department 4 Penn Center Plaza                            | Disability, General Casualty, Property, Marine, Surety & Vehicle  Vehicle | Underwriters of the Pacific, Inc. |

# 1989 ANNUAL REPORT Names of Alien Insurance Companies Classes of Insurance Authorized in CNMI and their General Agents

|    | NAME OF COMPANY  | I<br>I CLASSES OF INSURANCE                                      | I NAME AND ADDRESS I<br>I OF GENERAL ABENTS I  |
|----|--|--|--|
| 1) | Korea Automobile Fire & Marine Insurance Company, Ltd. #21-9, Cho-dong, Chung-ku Secul Korea   | Disability, General Casualty, Property, Marine, Surety &         | ' Moylan's Insurance ' Underwriters (Int'l), Inc. ' P. O. Box 658 ' Saipan, MP 96950 '   |
| 5) | New Zealand Insurance<br>Company Limited<br>35/F-37/F, World Trade<br>Centre, Causeway Bay<br>Hong Kong  | Disability, General Casualty, Property, Marine, Surety & Vehicle | Microl Corporation P. O. Box 267 Saipan, Mp 96950  The state of the st |
| 3) | Taisho Marine & Fire<br>Insurance Co., Ltd.<br>111 John Street<br>New York, NY 10038-3145  | Disability, General Casualty, Marine, Property, Surety & Vehicle | Microl Corporation   |
| 4} | and the second of the second o | ' Property, Surety &   | Pacifica Insurance Hoderwriters, Inc. P. O. Box 168 Saipan, MP 96950  How with the second sec |
| 5) | 26-1, Nishi-Shinjuku<br>Itochome, Shinjuku-ku<br>Tokyo, Japan  | 7                          | <ul> <li>Universe Insurance</li> <li>Underwriters (Micronesia),</li> <li>Inc.</li> <li>P. 0. Box 512</li> <li>Saipan, MP 96950.</li> </ul>   |

# 1989 ANNUAL REPORT Names of Domestic Insurance Companies Classes of Insurance Authorized in CNMI and their General Agents

|   |  | •  |
|---|--|--|
| NAME OF COMPANY   | <br>  CLASSES OF INSURANCE   |  |
| Ltd. ' P. 8. Box 1280 ' Saipan, MP 96950 '  | Surety   | Penigno R. Fitial P. O. Box 1280 Saipan, MP 96950  |
| 2) Global Insurance, Inc.<br>P. O. Box 1638<br>Saipan, MP 96950                         | Surety   | Norman T. Tenorio P. O. Box 1638 Saipan, MP 96950  |
| LA DA TITA TITA   | ,<br>! Surety<br>!   | ' John T. Sablan ' P. O. Box 2119 ' Saipan, MP 96950 '   |
| Company, Ltd.<br>P. O. Box 732<br>Saipan, MP 96950                                      | Disability, General Casualty, Marine, Property, Surety & Vehicle   | Posalia S. Cabrera P. O. Box 732 Saipan, MP 96950  |
| Insurance Corporation   | Page 19 Page 1 | Pruce Macmillan Proce Macmilla |
| 6) World Surety & Insurance<br>Underwriters, Inc.<br>P. O. Box 2183<br>Saipan, MP 96950 | Surety   | Moses Quitugua P. G. Box 2183 Saipan, MP 96950  The state of the state |

1989 ANNUAL REPORT
Alien Insurance Companies Securities Deposits/Bond

|   |   | }   |                  | MATURITY                 | TCD/BOND                   |
|---|---|---|------------------|--------------------------|----------------------------|
|   | NAME OF COMPANY                             | I INSURERS                                  | I AMOUNT         | DATE                     | NUMBER                     |
| ) | Marine Insurance Co.,Ltd.                   | 'Insurance Company ' 'Of North ' 'America ' | ' 100,000 '      | 06/30/91                 | <br>  B#44@N9@@4<br> -<br> |
| > | New Zealand Insurance<br>Co., Ltd.          | ,<br>, Barsk of Hawaii<br>,                 | 9                | 9 09/23/91<br>9 09/23/91 | 1                          |
| ) | Insurance Co., Ltd.                         | 'Insurance Company ' 'of North ' America    | ,<br>, 100,000 ; | Continuous '             | ,<br>1 8#69HF-351(<br>,    |
| } |   | 'Union Bank'<br>'                           | 1 100,000 1      | )                        | ,<br>7 T#17280<br>,        |
| } | Yasuda Fire & Marine<br>Insurance Co., Ltd. | 'Insurance Company ' ' of North ' America   | , 100,000 ;      | 04/01/91                 | :<br>* B#440N900<br>;<br>; |
|   |   | ን<br>ና<br>?                                 | 7<br>7<br>7      | 9<br>7<br>7              | y<br>5<br>5                |
|   |   | 7   | ¥                | y<br>9<br>7              | 7<br>7<br>7                |
|   |   | ម្<br>ទ<br>ម                                | 9<br>9           | 9<br>9<br>9              | 7<br>7<br>7                |
|   |   | 3   | <del>7</del>     | 7<br>3 .                 | 9<br>1<br>7                |
|   |   | 7<br>7                                      | <del>)</del>     | y<br><del>Y</del>        | 7<br>7<br>7                |
|   |   | 5<br>¥                                      | 4                | 7                        | y                          |

### 1989 ANNUAL REPORT Financial Statement of Licensed Insurance Companies As of December 31, 1989

## \$ In Thousand

|     |  | }                        |                   | f I                              |  |
|-----|--|--------------------------|-------------------|----------------------------------|--|
| i   | NAME OF COMPANY  | ASSETS                   | !LIABILITIES      | CAPITAL                          | SURPLUS                                |
| 1)  | American Family Life<br>Assurance Company of<br>Columbus | 5,204,729                | ,<br>, 4,685,994  | ; 3,714 ;                        | 515,021 '                              |
| 2)  | American Home Assurance Company                          | 5,477,319                | , 4,563,902       | 1 4,238 1<br>1 1                 | 909,179                                |
| 3)  | American National<br>Insurance Company                   | DID NOT                  | FILE              | , REPORT ,                       | 9<br>9                                 |
| 4}  | Commercial Bankers Life<br>Insurance Company             | '<br>' ii@,444           | 100,865           | , 1,100 ;                        | 8,478                                  |
| 5)  | Continental Insurance<br>Company                         | DID NOT                  | FILE              | , REPORT ;                       | ************************************** |
| 6)  | Continental Int'l. Life<br>Insurance Company             | WITHDREW                 | FROM              | onei o                           | 6/22/89                                |
| 7)  | Delaware American Life<br>Insurance Company              | 95, 064                  | 92,473            | ,<br>, 2,500 ;                   | 10,091                                 |
| 8)  | Grand Pacific Life<br>Insurance Company                  | ,<br>, 120,812           | ,<br>116,096      | , 1,486 ;                        | 3,230                                  |
| 9)  | Individual Assurance<br>Company                          | ,<br>, 22,046            | 16,731            | , 1,500 ;                        | 3,815                                  |
| 10) | Insurance Company of<br>North America                    | 5,026,999                | ,<br>, 4,192,227  | , 56,785 ;                       | 777, 987                               |
| 11) | John Hancock Mutual<br>Life Insurance Co.                | , 3,284,974              | , 3,256,919       | 7 — <u>(</u> 2)— 7<br>7 — (2)— 9 | 28,055 1                               |
| 12) | John Hancock Variable<br>Life Insurance Co.              | ,<br>, 1,601,499         | 9                 | ,<br>, 52'600<br>,               | 157,234                                |
| 13) | Lincoln National Life<br>Insurance Company               | ,<br>, 16, 161, 864<br>, | , 15,357,259<br>, | , 52,000 ;<br>, 52,000 ;<br>, ,  | ·                                      |

\$ In Thousand

| 1   | NAME OF COMPANY  | are en      | <br>         | {  | Philippins rom |
|-----|--|-------------|--------------|--|----------------|
| ·   | NAME OF COMPANY  | ASSETS      | !LIABILITIES | : <u></u>                                      | SURPLUS        |
| 14) | Lumbermen's Mutual<br>Casualty Company                       | 5, 355, 354 | 3,825,087    | 3 ÿ- "   | 1,530,267      |
| 15) | Massachusetts Indemnity '<br>and Life Insurance '<br>Company | 1,108,785   | 671,397      | 2,500  | 434, 887       |
| 15) | Municipal Bond Investors Assurance Company                   | 1,299,116   | , 906, 830 ; | , 2,500 ,                                      | 389, 785       |
| 17) | National Union Fire Insurance Company of Pittsburg, PA       | 6,111,488   | 5,126,532    | 4,479  | 980,477        |
| 18) | National Western Life Insurance Company                      | 1,602,190   | 1,583,169    | 3,478  | 45, 543        |
| 19) | New Hampshire Insurance Company                              | 2,150,507   | 1,678,630    | 5,325 ;  | 466,552        |
| 50) | North Coast Life Insurance Company                           | 53,088      | 51,664       | 550  | 874            |
| 21) | Occidental Life Insurance Company of North Carolina          | 198,010     | 180,562      | . 2.500 1<br>1                                 | 14,948         |
| 22) | Pacific Guardian Life Insurance Co., Ltd.                    | 50,758      | 35,912       | 6,000  | 8,846          |
| 23) | Reliance Insurance Co.                                       | WITHDREW    | · FROM       | owi i  |                |
| 24) | United Pacific Insurance Company                             | WITHDREW    | FROM         | * CNMI 9 * 9 * 9 * 9 * 9 * 9 * 9 * 9 * 9 * 9 * |                |
| •   | •  | 1<br>1      | 3            | 7 5  |                |

\$ In Thousand

| }   | 3  |              | !                               | 1 1               |            |
|-----|--|--------------|---------------------------------|-------------------|------------|
| !   | NAME OF COMPANY                                      |              | LIABILITIES                     | <u>: CAPITAL!</u> | SURPLUS    |
| 25} | Korea Automobile Fire 'A Marine Insurance 'Co., Ltd. |              | 7 301,583<br>,                  | † 29,313 †<br>†   | 11,642     |
| 26) | New Zealand Insurance 'Co., Ltd.                     | 928          | 7 582<br>7                      | , 169 ;<br>, ,    | 246        |
| 27) | Taisho Marine & Life 'Insurance Co., Ltd. '          | 26, 333      | 17,882                          | , 320 ;           | 8, 131     |
| 28) | Tokio Marine & Life 'Insurance Co., Ltd.             | 58, 147, 727 | , 37, 327, 447<br>,             | 741,492 1<br>1    | 20,079,788 |
| 29) | Yasuda Fire & Marine 'Insurance Co., Ltd. '          | 21, 144, 206 | , 19,772,519<br>,               | , 489, 796<br>,   | 881,891    |
| 30) | Century Insurance<br>Co., Ltd.                       | 500          | 7                               | , 500 1           | •          |
| 31) | Global Insurance, Inc.                               | 42           | , <u>j</u>                      | , 30              | 11         |
| 32) | J.T.S. Insurance Co.                                 | 504          | 7                               | 1 45 1<br>1       | 140        |
| (EE | Marianas Insurance Company Ltd.                      | 269          | , 162<br>,                      | 7 <u>1</u> 121 7  | 6          |
| 34) | Surety & Guaranty Insurance Corporation              | NEW          | ' ISSUED                        | a ()\{ a          | 12/06/89   |
| 35) | , 1<br>1   |              | 7<br>7<br>7<br>7<br>7<br>7<br>7 | 7 50 3            |            |

1989 ANNUAL REPORT Summary of Total Lines of Business Written by Property and Casualty Companies for Calendar Year Ending December 31, 1989

|   |    |                                       |    |               |          |              | _            |                    |        |              |
|---|----|---------------------------------------|----|---------------|----------|--------------|--------------|--------------------|--------|--------------|
| <b>3</b>  | ş  |                                       |    | \$            |          | \$           | ţ            | 1                  |        | ł            |
| ł   | į  | GROSS PREMI                           |    | <b>15</b> , 1 |          | ł.           | ł            | į.                 |        | ł            |
| \$  | ł  | INCLUDING M                           |    |               |          | ł            | ţ            |                    |        | ş            |
| Į.  | ţ  | FEES, LESS                            | RE | TURN !        |          | Į.           | į            | i                  |        | į            |
| LINE OF BUSINESS                                  | į  | PREMIUMS ON                           | ļļ | POLICIES .    |          | \$           | ł            | 1                  |        | į            |
| ł   | į  | NOT TAKEN                             |    |               |          | IDIRECT      | Į            | į                  |        | į            |
| 1   | į  |                                       | !  |               | DIRECT   | ILOSSES      | ł            | į                  |        | ł            |
| Į.  | ł  | DIRECT !                              | !  | DIRECT !      | UNEARNED | IPAID        | ļ            | DIRECT (           | DIRECT | į            |
| 1   | ţ  | PREMIUMS !                            | ŧ  | PREMIUMS I    | PREMIUM  | (DEDUCTIONS) | Į            | LOSSES             | LOSSES | , ,          |
| 1   | ł  | WRITTEN !                             |    |               | RESERVES |              | į            | INCURRED !         | UNPAID |              |
|   | 7  | 1                                     | -  | 1             |          | <del></del>  | ,            | 1                  |        | 一;           |
| INSURER   | 7  | 1                                     | ,  | 3             |          | 7            | ţ            | ,                  |        | 1            |
| 177001111   | Ξ, | 3                                     | ,  | 1             |          | ī            | 7            | 5                  |        |              |
| American Home Assurance                           | ,  |                                       | ,  | 9             |          | 1            | 7            | •                  |        | 7            |
| Company of Columbus                               | 1  | •                                     |    | ,             |          | ,            | •            |                    |        | ,            |
| Continental Insurance Co.                         | ,  | •                                     | ,  |               |          | · •          | ,            | 7                  |        | ,            |
|   | ,  |                                       |    | •             |          | •            | ,            | ,                  |        | •            |
| Insurance Company of North                        | ,  |                                       |    | •             |          | 1            |              | ,                  |        | ,            |
| America   |    |                                       |    | ,             |          | ,            |              |                    |        |              |
| New Hampshire Insurance Co.                       | 1  | ,                                     |    | ,             |          |              | 7            | ,                  | 1      |              |
| Korea Automobile Fire &                           | ,  | ,                                     | •  |               |          | 1            | 7            | ,                  |        |              |
| Marine Insurance Co.,Ltd.                         | ,  | 1                                     | '  | ,             |          | 1            | 1            | 1                  | •      | 7            |
| New Tealand Insurance Co.,                        | 3  | ,                                     | ,  | ,             |          | 1            | 7            | ,                  |        | 1            |
| Ltd.  | ,  | 1                                     | ŀ  | ,             |          | 1            | 1            | ,                  |        | 1            |
| Taisho Marine & Fire                              | 7  | 7                                     | 3  | 1             |          | 7            | 7            | 7                  | !      | 7            |
| Insurance Co., Ltd.                               | 1  | 1                                     | •  | 1             |          | 1            | 1            | 7                  |        | 3            |
| Tokio Marine & Fire                               | 7  | 7                                     | 7  | 1             |          | 7            | 7            | 1                  | •      | 1            |
| Insurance Co., Ltd.                               | 9  | ,                                     | ,  | 3             |          | 1            | 7            | 1                  |        | 1            |
| Yasuda Fire & Marine                              | 7  | 7                                     | 7  | 9             |          | 7            | 7            | ŧ                  | •      | Ť            |
| Insurance Co., Ltd.                               | 1  | ,                                     | •  | 3             |          | 1            | ,            | 1                  |        | 5            |
| Century Insurance Co., Ltd.                       | 7  | . \$                                  | į  | 1             |          | Ť            | 7            | 1                  |        | 7            |
| Global Insurance, Inc.                            | 1  | 1                                     | ı  | 7             |          | 3            | 7            | ,                  |        | 1            |
| J.T.S. Insurance Co., Inc.                        | 7  | ,                                     | ,  | 1             |          | 7            | 7            | ,                  | i      | Ť            |
| Marianas Insurance Co., Ltd.                      | ,  | ,                                     | ,  | ,             |          | ,            | 7            | 1                  | 1      | ,            |
| World Surety Insurance                            | 7  | ,                                     | ,  | 1             |          | 1            | 7            | 7                  | 1      | 1            |
| Underwriters, Inc.                                | ,  | 1                                     | ,  | ,             |          | ,            | ,            | ,                  |        | ,            |
| DINCE IN THE SE TIME                              | ę  |                                       |    |               |          | 1            | 7            |                    |        | •            |
|   |    | ,                                     |    |               |          | •            | ,            | ,                  |        | Ċ            |
|   | ,  | , , , , , , , , , , , , , , , , , , , |    |               |          | ·            | <del>,</del> | <u></u>            |        | <del>-</del> |
| . Cima  | ,  |                                       |    |               |          |              |              |                    |        |              |
| 1. Fire   |    | 1, 292, 160                           |    | 1,418,436     | 755,311  | 279,725      | -            | 363,748            | 200,22 | <u>ਰ</u> '   |
|   | 1  |                                       |    |               |          | , -          | 7            |                    |        | '            |
| 2. Allied lines                                   | 4  | 119, 193                              | 7  | 110, 524      | 4, 145   | <u>' -@-</u> | 1            | (189)              | 6,26   | <u>2 '</u>   |
|   | 7  | 1                                     | •  | •             |          | 7            | 3            | Ŧ                  | !      | 1            |
|   |    |                                       |    |               |          |              |              |                    |        |              |
| <ol> <li>Homeowners multiple<br/>peril</li> </ol> | 3  | 130,762                               |    | 1             |          | 4,558        | •            | 5,964 <sup>1</sup> |        | ,            |

|           |                        |            | <del></del>  | , <del>,,,,,,</del> | ····*                 | · ,          |             |
|-----------|------------------------|------------|--------------|---------------------|-----------------------|--------------|-------------|
| ŧ         | *                      |            | ł            | 1                   | ļ                     | 1 1          | }           |
| }         | !                      | GROSS PREM | •            | !                   |                       | 1 1          | ł           |
| į         | ł                      |            | MEMBERSHIP I | 1                   | •                     | }            | 1           |
| Į.        | 1                      | FEES, LESS |              | !                   | }                     | 1            | 1           |
| į         | LINE                   | PREMIUMS O | POLICIES !   | !                   | !                     | 1            | 1           |
| <u> </u>  | QF i                   | NOT TAKEN  |              | 1                   | l                     | 1            | }           |
| i         | BUSINESS /             | ļ          | 1            | ŧ                   | DIRECT                | 1 1          | ŧ           |
| ţ         | }                      | ļ          |              | DIRECT              | LOSSES                | 1            | į           |
| ł         | ļ                      | DIRECT     | DIRECT       | UNEARNED            | PAID                  | ! DIRECT !   | DIRECT      |
| į         | Į.                     | PREMIUMS ! | PREMIUMS (   | PREMIUMS            | (DEDUCTION)           | LOSSES !     | LOSSES !    |
| <u> </u>  |                        | WRITTEN (  | EARNED I     | RESERVES            | SALVAGE               | I INCURRED   | UNFAID (    |
|           | 1 1                    | 1          | •            | 1                   | l                     | 3 3          | •           |
| 4.        | Commercial multiple '  | 1          | ,            | 7                   | 1                     | * 7          | ,           |
|           | peril '                | 874, 386 1 | 622,627      | 477,695             | 899                   | ' (13,463) ' | 11,552 '    |
|           |                        | 1          |              |                     |                       | 1 (7         |             |
| <u>3.</u> | Ocean marine '         | 222,868 '  | 201,997      | /8,5/2 <sup>1</sup> | (38, <del>89</del> 3) | 1 (7,798) 1  | 50,129 '    |
| ,         | 7.31                   | •          | •            |                     | •                     | •            |             |
| <u>D.</u> | Inland marine !        | <u> </u>   | 27,388 /     | 3,3/8               | -8-                   | 1 (1,619) 1  | 1,130 .     |
| 7         | Typhoon                | 976 BOB 1  | 010 157 t    | 55 457 1            | . 17 223              | 1 0 014 1    | -9- 7       |
| 1.        | 1 VESICASIS .          | E10*330 .  | <u> </u>     | 33,741              | 179,222               | 1 8,814 7    |             |
| Я.        | Earthquake 1           | 93, 976, 1 | 701,121 1    | 24,272              | 7,054                 | 1 7.0071     | ş <b>9</b>  |
|           | 207 4110 DUNE          | 1004 370   | 704122       |                     | 1 71 122 1            | 7,827        | <del></del> |
| 9.        | All other A & H        | 826.623 1  | 733,607      | 463, 520            | 329, 483              | 345.143      | 36.005      |
|           | 7                      | ,          | ,            | 1                   | 1                     | 345, 143     | 7           |
| 16.       | Workers' compensation' | 1,070,340  | 501,390      | 657, 917            | 125,035               | 189,465      | 100,655     |
|           | . 7                    | 7          | •            |                     | 7                     | 7 7          | 1           |
| 11.       | Other liability '      | 933,880 1  | 751,263 1    | 481,450             | 59,562                | 324,822      | 311,116 '   |
|           | ţ                      | •          | : 1          | ,                   | 7                     | 1 1          |             |
| 12.       | Other private '        | 4          | , ,          | ' '                 | i                     | 7 3          | 3           |
|           | passenger auto '       | •          | ; 1          | 1                   | 7                     | 1            | •           |
|           | liability '            | 1,159,505  | 1,209,700    | 284,533             | 415, 188              | 1 521,860 1  | 499,013     |
|           | 7 7                    | •          | 1            | i i                 | ¥                     | 1            | •           |
| 13.       | Other commercial auto  | 1          | • •          |                     | 1                     | , ,          |             |
|           | liability <sup>1</sup> | 147,497    | 150,970      | 55,758              | 95,173                | 213,717      | 185,644     |
|           | 1 7                    | 1          | ; <u> </u>   | İ                   | f                     | 1 1          | 7           |
| 14.       | Private passenger '    |            |              |                     | 1                     | 1 1          |             |
|           | auto physical damage'  | 2,962,431  | 1,771,262    | 719,201             | 1 835,531             | 735,931      | 240,207     |
|           |                        | ' •        | <b>!</b> .   | <b>)</b><br>-       | †<br>-                | 1 1          |             |
| 15.       | Commercial auto        |            |              |                     | 1                     | 1            |             |
|           | physical damage '      |            | 398,148      | 141,575             | <u>, 552,378</u>      | 242,903      | 49,273      |
|           | و                      |            |              |                     |                       |              |             |
| 15.       | Fidelity *             | 7,000      | 7,096        | <u>' 25</u>         | 1 <u>i(</u> -         | 376          | 529 1       |
| J **      |                        |            |              |                     |                       |              |             |
| 11.       | Surety t               | 625,557    | t 534, 395   | , বর্ম কিন্         | 13,340                | 1 228, 997   | 356         |

|   |                      | ŧ |            |   |           | ļ |                                       | ļ | \$            |             | į |           |
|---|----------------------|---|------------|---|-----------|---|---------------------------------------|---|---------------|-------------|---|-----------|
|   |                      | ļ | GROSS PREM | I | UMS,      | į |                                       | ļ | į             |             | 3 |           |
|   |                      | į | INCLUDING  | H | EMBERSHIP | ł |                                       | į | į             |             | í |           |
|   |                      | š | FEES, LESS | į | RETURN    | į |                                       | ļ | ţ             |             | į |           |
|   | LINE                 | ļ | PREMIUMS ( | N | POLICIES  | ļ |                                       | į | Š             |             | į |           |
|   | QF                   | ž | NUT TAKEN  |   |           | ì |                                       | į | DIRECT        |             | į |           |
|   | BUSINESS             | į | 1          |   |           | , | DIRECT                                | į | LOSSES (      |             | ļ |           |
|   |                      | 3 | DIRECT     |   | DIRECT    | į | UNEARNED                              | ł | PAID (        | DIRECT      | ļ | DIRECT    |
|   |                      | ţ | PREMIUMS ( |   | PREMIUMS  | į | PREMIUMS                              | ţ | (DEDUCTION) ( | LOSSES      | ţ | LOSSES    |
|   |                      | į | WRITTEN !  |   | CARNED    | į | RESERVES                              | 3 | SALVAGE I     | INCURRED    | į | UNPAID    |
|   |                      | 1 | 7          |   |           | 5 |                                       | 7 | f             |             | 1 |           |
| 18.                                     | Slass                | 1 | 5,956 '    |   | 6, 629    | 7 | 1.982                                 | ŧ | 75 1          | 878         | 7 | 814       |
|   |                      | 1 | 1          |   |           | • |                                       | 7 | 7             |             | ŧ |           |
| 13.                                     | Burglary and theft   | 7 | 41,421     |   | 49, 804   | į | 18,845                                | ŧ | 26,529 1      | 27,308      | 7 | 7,052     |
|   |                      | 7 | ,          | _ |           | 7 | · · · · · · · · · · · · · · · · · · · | 1 | P             |             | 3 |           |
| 20.                                     | Boiler and Machinery | 7 | 5, 017     |   | 5, 799    | 7 | <b>≨-</b>                             | 7 | -g- 1         | &           | ŧ | 23        |
| *************************************** |                      | 1 | 3          |   |           | î | ·                                     | ì | Ť             |             | 7 |           |
| 21.                                     | Aggregate write-ins  | • |            |   |           | ş |                                       | 7 | 7             |             | 9 | :         |
|   | for other lines      | 3 | 9          |   |           | ŧ |                                       | ī | 7             |             | Ť |           |
|   | of tusiness          | 1 | 343,685 1  |   | 230, 039  | 7 | 158,761                               | , | 1,669         | 251,669     | ŗ | 250,001   |
|   |                      | Ť | 7          |   |           | 7 |                                       | , | 7             |             | 9 |           |
| 22.                                     | TOTALS               | ¥ | 10,930,096 |   | 9.116.115 | • | 4,773,326                             | 9 | 2.395.256 *   | 3, 473, 561 | 7 | 1.853.781 |

# 1989 ANNUAL REPORT Summary of Life Insurance Direct Premiums and Annuity Considerations for the Calendar Year Ending December 31, 1989

| }                              | ł  |           | ICREDIT LIFE       |           | 1            |
|--------------------------------|----|-----------|--------------------|-----------|--------------|
| §                              | ł  |           | I (GROUP AND       | <b>!</b>  | 1            |
| INSURER                        | į  | ORDINARY  | (INDIVIDUALS)      | GROUP     | TOTAL        |
|                                | 7  |           | 7 7                |           | 7            |
| American Family Life Assurance | 7  |           | * 9                | ı         | †            |
| Company of Columbus            | 7  |           | 7 3                |           | ŋ            |
| Commercial Bankers Life        | 7  |           | 7                  | ı         | 'n           |
| Insurance Company              | 7  |           | "                  |           | 9            |
| Grand Pacific Life Insurance   | 7  |           | 9                  | ī         | 7            |
| Co., Ltd.                      | 7  |           | 7 3                |           | 1            |
| Individual Assurance Company   | Ą  |           | 9                  | ı         | 7            |
| Lincoln National Life          | 7  |           | 9 9                |           | ij           |
| Insurance Company              | 7  |           | 7                  |           | 7            |
| Massachusetts Indemnity &      | ij |           | 7                  |           | 7            |
| Life Insurance Company         | 7  | •         | 7                  | l         | Ť            |
| National Western Life          | 7  |           | 7 7                |           | <del>1</del> |
| Insurance Company              | å  |           | 7                  |           | Ť            |
| Worth Coast Life Insurance Co. | 4  |           | 7                  |           | 7            |
| Pacific Guardian Life          | 3  |           | 7                  |           | 3            |
| Insurance Co., Ltd.            | 4  |           | 7                  |           | 7            |
|                                | 7  |           | י ע                |           | ii.          |
|                                | Ŧ  |           | 7                  |           | ‡            |
|                                | y  |           | 5                  |           | ų            |
|                                | 3  |           | 7                  |           | ţ            |
| 1. Life insurance              | 7  | 1,182,300 | <u>' 129,353 '</u> | 1,560,593 | , 5,875,546  |
|                                | 9  |           | 9                  |           | 4            |
| 2. Annuity considerations      | 7  |           | 7                  |           | 1            |
|                                | 9  |           | 7                  |           | 7            |
| 3. Aggregate write-ins         | 7  |           | 7                  |           | 3            |
| for other lines of             | 7  |           | y .                |           | 7            |
| business                       | 7  |           | 9                  | :<br>     | 7            |
|                                | 9  |           | 9                  |           | 9            |
| 4. Totals                      | 7  | 1,182,300 | <u>1 129,353 7</u> | 1,560,593 | 7 2,872,246  |

1999 ANNUAL REPORT
Summary of Life Insurance Direct Claims and Benefits Paid
for the Calendar Year Ending December 31, 1989

|                                     | <del></del> |                     |                                       |           |
|-------------------------------------|-------------|---------------------|---------------------------------------|-----------|
|                                     | }           |                     |                                       |           |
|                                     | }           | CREDIT LIFE (GROUP) |                                       |           |
| INSURER                             | ORDINARY    |                     | GROUP (                               | TOTAL_    |
|                                     | 7           | •                   | f 1                                   |           |
| ommercial Bankers Life Insurance Co | 7           | 7                   | 1                                     |           |
| rand Pacific Life Insurance Co.     | 1           | 7 1                 | 1                                     |           |
| ndividual Assurance Company         | \$          | 1                   | 1 1                                   |           |
| incoln Metional Life Insurance Co.  | 3           | 1                   | 1                                     |           |
| orth Coast Life Insurance Co.       | 5           | 3                   | i 1                                   |           |
|                                     | •           | 1                   | <b>,</b>                              |           |
|                                     | ħ           | 9                   | i 1                                   |           |
|                                     | ţ           | 1                   | f T                                   |           |
|                                     | Ť           | •                   | 1 3                                   |           |
|                                     | 7           | 1                   | 3                                     |           |
| i. Death benefits                   | 140,000     | 1                   | 1,500,450                             | 1,649,450 |
|                                     | ÿ           | 1                   | Ţ                                     |           |
| 2. Matured endowments               | 1 6,349     | 7                   | 1 1                                   | 6,349     |
|                                     | 7           | 7                   | , ,                                   |           |
| 3. Annuity benefits                 | 4,449       | ¶                   | 9 7                                   | 4,448     |
|                                     | 1           | 1                   | 1                                     |           |
| 4. Surrender values                 | 27.209      | 1                   | , ,                                   | 27,268    |
| IN DOTTECTION FOR UND               | 1           | 1                   | ) 7                                   |           |
| 5. Aggregate write-ins for          | 3           | <b>.</b>            | , ,                                   |           |
| miscellaneous direct                | 7           | 7                   | ;<br>;                                |           |
| claims and benefits                 | 3           | ,                   | 5 1                                   |           |
| cidims and denerits<br>paid         |             |                     | · · · · · · · · · · · · · · · · · · · |           |
| ARIO                                | ·<br>1      |                     | ·<br>                                 |           |
| 6. All other benefits               |             | ·                   | ·<br>9                                |           |
|                                     | •           | ·                   | , ,<br>i ,                            |           |
| except accident and                 | ,           |                     | ;<br>;                                |           |
| health                              |             | <del></del>         | ,                                     |           |
|                                     | 1           | <i>.</i>            |                                       |           |
| 7. Totals                           | 178,005     | f                   | 1,508,450                             | 1,686,455 |

# 1389 ANNUAL REPORT Summary of Life Insurance Direct Death Benefits Incurred for the Calendar Year Ending December 31, 1989

|  | į            |     |       | <del> </del> | ł           |     |         |                | }              | <del></del> | -        |             | 1            |                       |
|--|--------------|-----|-------|--------------|-------------|-----|---------|----------------|----------------|-------------|----------|-------------|--------------|-----------------------|
|  | ş            |     |       |              | ₹ CR        | EDI | T LIF   | E (GROU        | Ρį             |             |          |             | l            |                       |
|  | 1            | n   | QT    | INARY        |             |     |         | IDUALS)        |                | SR          | Q):      | iD          | ł            |                       |
| INSURER                                      | 5            | 14  | rr14= |              | , 200<br>1  | 130 | 2173527 | and the til    | i              | 271         |          | •           | j            | TOTAL                 |
| 1345050000                                   | · ·          |     | į     |              | <u>}</u>    |     |         |                | <del>-}-</del> |             | ţ        |             | <del>}</del> | 19197                 |
|  | <i>}</i>     |     | •     |              | •           |     |         | •              | •              |             | •        |             | •            | •                     |
|  | 1            |     | į     |              |             |     | Ind.    |                | 1              |             | ţ.       |             | •            |                       |
|  | į            |     | ļ     |              | ∤ ₽o        |     |         | ţ              |                | . ef        | ŝ        |             | •            | <b>}</b>              |
|  |              | ic. | 1     | Amount       |             | Ū€  | rtifs   | Amoun          |                |             | -        |             |              | i Amount              |
|  | 7            |     | •     |              | 1           |     |         | 1              | 1              |             | ,        |             | 1            | 1 .                   |
| rand Pacific Life Insurance                  | 7            |     | Ŧ     |              | 9           |     |         | 7              | 7              |             | 7        |             | Ť            | 3                     |
| Co., Ltd.                                    | 7            |     | Ť     |              | 1           |     |         | 1              | •              |             | ţ        |             | 7            | 7                     |
| ndividual Assurance Company                  | 7            |     | 3     |              | 7           |     |         | Ŧ              | 7              |             | 1        |             | 1            | ל                     |
| orth Coast Life Insurance Co.                | 7            |     | 9     |              | ,           |     |         | 1              | 3              |             | 1        |             | 1            | 1                     |
| acific Guardian Life Insurance               | 1            |     | Ŧ     |              | •           |     |         | 1              | Ť              |             | ,        |             | t            | 9                     |
| Company, Ltd.                                | ,            |     | 1     |              | •           |     |         | ;              | 7              |             | 9        |             | 7            | 1                     |
| company, eva.                                | 1            |     |       |              | 7           |     |         | 1              | 7              |             | 7        |             | ,            | ,                     |
|  | ,            |     | ,     |              | 1           |     |         | 1              | •              |             | 1        |             | ,            | 5                     |
|  | <del>,</del> |     | ÷     |              | •           |     |         | <del></del>    | •              |             | <u>.</u> |             | <u> </u>     | <u>.</u>              |
|  | -            |     |       |              | · ·         |     |         | •              | 1              |             | 1        |             | •            | 1                     |
| <ol> <li>Unpaid December 31,</li> </ol>      | t            |     | 7     |              | 1           |     |         | •              | 1              |             | 1        |             |              |                       |
| previous year                                | 7            |     | 1     | 2,079        |             |     |         | <u> </u>       |                | 18          | ,        | 272,969     | 19           | 275,048               |
|  | 7            |     | 7     |              | 1           |     |         | 1              | 7              |             | Ŧ        |             | 1            | •                     |
| <ol><li>Incurred during current</li></ol>    | 7            |     | 7     |              | 7           |     |         | 7              | 1              |             | 7        |             | ,            | 7                     |
| year   | 1            | 3   | 1     | 140,000      | 1           |     |         | ĭ              | 7              | 85          | 1        | 1,492,946   | 1 99         | 1,632,946             |
|  | 7            |     | •     |              | 1           |     |         | 1              | 5              |             | 7        |             | 1            | Ť                     |
| Settled during current year:                 | ,            |     | 7     |              | 1           |     |         | 7              | 1              | ~           | ţ        |             | 9            | 1                     |
|  | 7            |     | 7     |              | 5           |     |         | Ť              | 7              |             | 7        |             | 7            | 3                     |
| 3.1 By Payment in Full                       | 3            | 3   | 7     | 140,000      | 7           |     |         | Ŧ              | -5             | 83          | 1        | 1.507.450   | 1 86         | 1,547,450             |
| the state of the first tark and the state of | 7            |     | ,     | 3.03.00      | 1           |     |         | 1              | 7              |             | 7        |             | 1            | 7                     |
| 3.2 By Payment on Compromise                 | o#1          |     | ,     |              | 1           |     |         | ,              | ÿ              |             | ,        |             | 1            | ,                     |
| claims                                       | 1<br>50.     |     | ŧ     |              | 7           |     |         | •              | 7              |             | Ť        |             |              | 1                     |
| C161#5                                       |              |     | 7     |              | ,           |     |         | <del></del>    | ·              |             | -        |             | 1            | ·                     |
| ng ng han g_gr. Mak e s                      | -            |     |       | 110 000      | •           |     |         | 1              |                | 67          | •        | ያ ድርማ አድዳ   | ·<br>• 2.5   | -<br>אלים פייעית גיים |
| 3.3 Totels Paid                              |              | _3  |       | 140,000      |             |     |         | 1              |                | 83          | <u>.</u> | 1,587,458   | <u>. 86</u>  | 1,547,450             |
|  | 3            |     | 1     |              | 1           |     |         | · <del>-</del> | •              |             | 7        |             | 1            | 1                     |
| 3.4 Reduction by Compromise                  |              |     | ŧ     | ·            | 7           |     |         | 1              | 7              |             | 7        |             |              | 1                     |
|  | Ŧ            |     | 7     |              | \$          |     |         | 1              | 7              |             | 1        |             | 7            | •                     |
| 3.5 Amount Rejected                          | 7            |     | 7     |              | 1           |     |         | 1              | 7              |             | 1        |             | 3            | Ť                     |
|  | 7            |     | 1     |              | 7           |     |         | f              | 7              |             | 1        |             | 9            | 1                     |
| 3.5 Total Settlements                        | ۲            | 3   | 7     | 140,000      | ş           |     |         | •              | 3              | 83          | 7        | 1,507,450   | 1 86         | 1,547.458             |
|  | 7            | =   | 1     |              | 5           |     |         | 7              | 1              |             | 1        | <del></del> | 9            | †                     |
| 4. Unpaid December 31, 189                   | 7            |     | ,     |              | •           |     |         | Ť              | 3              |             | ŧ        |             | ş            | 7                     |
| 4. oripeto pecember 31, 133                  | ,            | +   | 7     | 9 670        | 9           |     |         | 7              | ,              | 20          | 1        | 258,465     | 7 91         | 250,544               |
| (175-3.5)                                    |              |     |       | 2,079        | <del></del> |     |         | <u> </u>       | <u> </u>       | E&          | _        | 575,405     | 54           | £59,344               |

# 1989 ANNUAL REPORT Summary of Life Insurance Policy for the Calendar Year Ending December 31, 1989

|                              | ,    |       |                 |             | -          | ·        |              | <del></del> |         |         | ,    |              |     |            |            |
|------------------------------|------|-------|-----------------|-------------|------------|----------|--------------|-------------|---------|---------|------|--------------|-----|------------|------------|
|                              | 3    |       |                 |             | 100        | ተጠየም 1 ቀ | <u>-</u>     | /cnous      | ;<br>,, |         |      | 1            |     |            |            |
|                              | ;    |       | . <del></del> . | ta (S.Fat)  |            | EDIT LI  |              |             |         | ann     | , te | ·            |     | <b>-</b> . | 5#A:       |
| to and instella              | - *- | £8    |                 | NARY        |            |          | INDIVIDUALS) |             | 1 GRO   |         |      | <u>`</u>     |     |            | JTAL       |
| INSURER                      | }    |       | 1               |             |            | . of     | }            |             | 1       |         | 3    | i            |     | \$         |            |
|                              | •    |       | 1               |             |            | d.Pols.  | 1            |             | 1       | _       | 3    | 5            |     | 1          |            |
|                              | ļ    | ,     | ł,              |             |            | Br.      | 1            |             |         | s of    | ł    |              | ٠.  |            |            |
|                              | 10   | ic.   | _               | Percurit    | <u>ILE</u> | rtifs.   | 1 1          | Hecurit     | 144     | 3110162 | 1    | Heount !     | NO  |            | - Fracussi |
|                              | ,    |       | 1               |             | 7          |          | •            |             | 7       |         | 7    | ,            |     | ,          |            |
| ican Family Life Assurance   | †    |       | 1               |             | 1          |          | •            |             | •       |         | ,    | ,            |     | 1          |            |
| mpany of Columbus            | 7    |       | •               |             | 7          |          | 7            |             | •       |         | ;    | 1            |     | 7          |            |
| ercial Bankers Life          | 9    |       | i               |             | 9          |          | 1            |             | 1       |         | 5    | ,            |     | 7          |            |
| sarance Company              | 7    |       | 7               |             | 1          |          | 1            |             | 7       |         | •    | ,            |     | 7          |            |
| d Pacific Life Insurance Co. | 9    |       | 1               |             | 1          |          | 7            |             | 1       |         | 1    | 9            |     | 7          |            |
| vidual Assurance Company     | 7    |       | 7               |             | 1          |          | 7            |             | 1       |         | 1    | 1            |     | 7          |            |
| h Coast Life Insurance Co.   | 7    |       | Ŧ               |             | 1          |          | 7            |             | 1       |         | ŧ    | 1            |     | 7          |            |
| fic Guardian Life Insurance  | 3    |       | 7               |             | 7          |          | 1            |             | •       |         | 1    | 1            |     | 7          |            |
| mpany, Ltd.                  | 7    |       | 1               |             | •          |          | ą            |             | 5       |         | ş    | 1            |     | 5          |            |
|                              | 7    |       | 1               |             | 1          |          | 7            |             | ¥       |         | 7    | 1            |     | 7          |            |
|                              | 7    |       | 1               |             | 7          |          | 7            |             | 7       |         | ¥    | 3            |     | 7          |            |
|                              | ,    |       | 7               |             | 7          |          | 7            |             | 7       |         | Ť    | 3            |     | 7          |            |
| i) In force December 31,     | 1    |       | 3               |             | 1          |          | 1            |             | 1       |         | 7    | 9            |     | 1          |            |
| previous year                | 7    | 1.848 | 3               | 65,227,075  | 7          |          | 1            |             | ł       | 82      | 7    | 30,504,206 ' | 1.1 | 301        | 95.731.8   |
|                              | 1    |       | 7               |             | 7          |          | 7            |             | 1       |         | ,    | 1            |     | ,          |            |
| 2) Issued during year        | 7    | 401   | 9               | 4,693,800   | 7          | 894      | 7            | 3,454       | 7       | 22      | 7    | 8,853,778 1  | 1.3 | 177        | 13.557.0   |
|                              | 1    |       | ;               |             | 1          |          | 7            |             | 1       |         | 1    | •            |     | 1          |            |
| 3) Ceased to be in force     | 1    |       | 7               |             | 3          |          | 7            |             | 7       |         | 7    | 7            |     | 7          |            |
| during year (Net)            | 7    | 227   | 3               | 9, 102, 343 | Ŧ          | 256      | 7            | 989         | ŧ       | S       | 1    | 1,837,490    | 4   | 911        | 10, 940, 8 |
| Mary 1724 France 1735 89     | 7    |       | 7               |             | 7          |          | 7            |             | 1       |         | 7    | 1            |     | 7          |            |
| 4) In force December 31      | i    |       | 7               |             | ,          |          | 1            |             | ,       |         | 7    | ,            |     | 1          |            |
| of current year              |      | 1 557 | ŧ               | 60,824,532  | ,          | 638      | y            | 2,465       | 4       | 96      | •    | 37,520,494   | 4 5 | C71        | 00 747 A   |

### 1989 ANNUAL REPORT Summary of Accident and Health Insurance for the Calendar Year Ending December 31, 1989

|                               |                | ·                                      |    | <del></del>                            |       | <del></del> |              |             |
|-------------------------------|----------------|--|----|--|-------|-------------|--------------|-------------|
| ·                             | ł              | DIRECT                                 | ł  | DIRECT                                 |       | DIRECT      | į            | DIRECT      |
| INSURER                       | ţ              | PREMIUMS                               | ł  | PREMIUMS                               |       | LOSSES      | ł            | LOSSES      |
|                               | }              | WRITTEN                                | 1  | EARNED                                 |       | PAID        | 1            | INCURRED    |
|                               | 7              |  | 7  |  | ¥     |             | 7            |             |
| merican Family Life Assurance | 4              |  | *  |  | ,     |             | ,            |             |
| Company of Columbus           | 7              |  | 7  |  | 7     |             | 7            |             |
| ndividual Assurance Company   | 7              |  | 3  |  | 7     |             | ŋ            |             |
| incoln National Life          | 7              |  | 7  |  | 7     |             | 7            |             |
| Insurance Company             | 9              |  | 7  |  | 7     |             | 7            |             |
| · -                           | 7              |  | 7  |  | 9     |             | 7            |             |
|                               | þ              |  | 5  |  | 7     |             | 9            |             |
| 1. Group Policies             | 7              |  | 7  |  | 7     |             | 7            |             |
|                               | 5              |  | ,  |  | ,     |             | 7            |             |
| 1.1 Credit (Group and         | y              |  | 7  |  | 7     |             | 4            |             |
| Individual                    | ,              |  | 4  |  | 9     |             | 7            |             |
|                               | 7              |  | 7  |  | 9     |             | 7            |             |
| 1.2 Collectively Renewable    | ,              |  | ,  |  | 9     |             | 7            |             |
| Policies                      | 4              |  | 4  |  | 7     |             | y            |             |
|                               | 7              | ······································ | 3  | ······································ | 7     |             | 9            | <del></del> |
| Other Individual Policies:    | 5              |  | 4  | •                                      | 7     |             | 7            |             |
|                               | ,              |  | ,  |  | ,     |             | 4            |             |
|                               | 7              |  | y  |  | y     |             | 3            |             |
| 2.1 Mon-cancellable           | 9              | 882                                    | 9  | 896                                    | t     |             | y            |             |
| 747 MM FBMFF17857E            | 7              | 1001                                   | 7  | 777                                    | 7     |             | <del>.</del> |             |
| 2.2 Guaranteed renewable      | ,              | 15,406                                 | ,  | 158                                    | 7     |             | ,            |             |
| F.F DAW WWEER LEWERTE         | <u>,</u>       | 13,700                                 | 3  | 100                                    | 3     |             | 7            | ·····       |
| 2.3 Non-renewable for         | 3              |  | 4  |  | 9     |             | 9            | F.          |
|                               | 9              | 293                                    | ,  | 281                                    | ,     |             | 7            |             |
| stated reasons only           | <del>-</del>   | 529                                    | ·- | <u> </u>                               | 3     |             |              |             |
| O / Million                   | ,              |  | y  |  | ,     |             | ,            |             |
| 2.4 Other accident only       | - <del>-</del> |  | ·, |  | <br>3 |             | <u>,</u>     | <del></del> |
|                               |                |  | •  |  | -     |             | •            |             |
| 2.5 All other                 | 1              |  | 1  |  | 7     |             | 7            |             |
|                               | 7              |  | 7  |  | 7     |             | 7            |             |
| 2.6 Totals (Sum of 2.1        | 4              |  | y  |  | 7     |             | 4            |             |
| to 2.5)                       | 7              | 16,581                                 | 7  | 1,335                                  | 7     |             | 7            |             |
|                               | 7              |  | 7  |  | 7     |             | y            | 4           |
| 3. Totals (Lines 1+1.1+       | 9              |  | 7  |  | 7     |             | 7            |             |
| 1.2+2.6)                      | ÿ              | 16,581                                 | 7  | 1,335                                  | y     |             | 7            |             |

### 1989 ANNUAL REPORT Credit Life and Accident and Health Experience Exhibit for the Calendar Year Ending December 31, 1989

PART 1 - Summary of Credit Life Insurance Experience Exhibit

| *                                | INSURER   | SINGLE  | JOINT  | TOTAL I  |
|----------------------------------|---|---|--|--|
|                                  | ividual Assurance Company, Life, Health<br>nd Accident  | 9 9<br>9 9<br>9 9   | 9<br>9<br>9  | 7<br>1<br>7  |
|                                  | i. Earned Premiums:   | 5 7<br>7  | <b>7</b>   | ?<br>1   |
| A.<br>B.<br>C.<br>D.<br>E.<br>F. | Premium reserves, start of period Premium reserves, end of period Actual earned premiums (C+D-E)          | 94,117 1,559 1<br>1,559 1<br>92,558 1<br>74,218 1<br>89,286 1<br>77,490 1 | i, 122 '<br>36, 796 '<br>20, 043 '<br>33, 751 '<br>23, 088 ' | 2,681 '<br>129,354 '<br>94,261 '<br>123,037 '<br>100,578 ' |
|                                  | 2. Incurred Claims:   | 9 9<br>9 -  | ·<br>}   | y  |
| A.<br>B.<br>C.                   | Claims paid Unreported claim reserve, start of period Unreported claim reserve, end of period             | 7 7<br>7 7  | ;  | 1<br>1<br>3  |
| D.<br>E.<br>F.                   | Claim reserves, start of period<br>Claim reserves, end of period<br>Incurred claims $(A - B + C - D + E)$ | י פי יי<br>ז<br>ז<br>ז  | 1 9<br>5 9<br>7 9  |  |
|                                  | 3. Loss Ratio:  | <b>7</b>  | ;<br>, , ,   | ; <b>y</b>   |
| A.<br>B.                         | Actual loss ratio (2F / 1F)<br>Loss ratio at prima facie rates<br>(2F / 1G)                               | ;<br>;<br>;   | ;<br>;   | ;<br>;<br>;  |
|                                  | 4. Mean insurance in force  | 6,495,739 °   | 1,093,914  | 7,589,653  |
|                                  | 5. Losses per \$1,000 mean insurance in force ((1,000 * 2F)/4)  | 7 : : : : : : : : : : : : : : : : : : :                                   | ) ;<br>;<br>;  | 1 7<br>7<br>1 7<br>1 7                                     |

PART 2 - Summary of Credit Accident and Health Insurance Experience Exhibit

| 1  |     |                                 | Į.    |     |     | 1      |     |      | 1               |      |     |       |      |    | <u>l</u> |              |    | <u> </u>   |     |
|----|-----|---------------------------------|-------|-----|-----|--------|-----|------|-----------------|------|-----|-------|------|----|----------|--------------|----|------------|-----|
| 3  |     |                                 | 1 1   | 4   | YAC | -      | 14  | DAY  | 1 3             | 30 J | DÄY | 1 3   | 0 D  | ΑŸ | 1        | OT           | ÆF | 101        | AL  |
| 1_ |     |                                 | } F   | ET. | RO  | IN     | 0N- | RETR | OI F            | RET  | RO  | IN    | 3N-F | ET | RO!      |              |    | ł          |     |
|    |     |                                 | 7     |     |     | 9      |     |      | 7               |      |     | 1     |      |    | 7        |              |    | 5          | 9   |
| Ĭ. | Ear | ned Premiums:                   | 7     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 9        |              |    | 4          | 7   |
|    |     |                                 | 7     |     |     | 7      |     |      | y               |      |     | 7     |      |    | ,        |              |    | 1          | ,   |
|    | Α.  | Gross Written premiums          | 7     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 7          | 3   |
|    | B.  | Refunds on terminations         | 5     |     |     | ,      |     |      | 7               |      |     | 9     |      |    | å        |              |    | 7          | 7   |
|    | €.  | Net written premiums<br>(A - B) | 9     |     |     | 7<br>7 |     |      | 7               |      |     | 7     |      |    | y        |              |    | 9          | 1   |
|    | D.  | Premium reserves, start         | 2 M   |     |     | 7      |     | N    | 7 (             | 3 0  | Q   | A M   |      |    | 3        |              | N  | 'EEEE      | EE  |
|    |     | of period                       | 1 141 | ł   |     | 7      |     | N    | 30              |      | 0   | * sip | i    |    | 7        |              | N  | 1 E        | 9   |
|    | E.  | Premium reserves, end           | , M   | N   |     | 4      |     | N    | 10              |      | 0   | M     | M    |    | 7        |              | N  | ۶E         | , 7 |
|    |     | of period                       | * N   | N   |     | 7      |     | N    | ° (3            |      | 0   | 1 14  | M    |    | 7        |              | N  | 1 E        | 7   |
|    | F.  | Actual earned premium           | ³ N   | -   | N   | Ą      |     | N    | <sup>9</sup> (3 |      | Q   | ı M   | ħ    | ł  | 7        |              | N  | ۲E         | ÿ   |
|    |     | (C + D - E)                     | * N   |     | M   |        |     | N    | " 🖰             |      | 0   | 1 N   |      | N  | ,        |              | N  | 'E         | 7   |
|    | G,  | Earned premiums at prima        | 1 14  |     | M   |        |     | N    | 7 (3            |      | Q   | 7 N   |      | N  | 7        |              | N  | " EELE     | = 1 |
|    |     | facie rates                     | * M   |     | :   | M      |     | M    | <sup>9</sup> [] |      | 0   | Y N   |      | 1  | N 9      |              | Ŋ  | 9 <u>E</u> | 7   |
|    |     |                                 | a M   |     |     | N      |     | N    | " ()            |      | 8   | a M   |      |    | N        |              | N  | 'E         | 7   |
| 2. | Inc | curred claims:                  | * M   |     |     | ş ;    | N   | N    | , G             |      | 0   | 9 N   |      |    | N        |              | N  | a E        | 9   |
|    |     |                                 | a M   |     |     | 7      | N   | N    | 10              |      | O.  | , M   |      |    | 7        | M            | N  | "E         | ,   |
|    | A.  | Claims paid                     | , Pi  |     |     | 4      | M   | M    | " ()            |      | Ω   | * M   |      |    | 9        | M            | N  | 9 <u>E</u> | 5   |
|    | B.  | Unreported claim reserve        | 3 1/1 |     |     | 7      | l   | MM   | <sup>9</sup> 🖸  |      | (3  | a M   |      |    | 7        | <del>,</del> | W  | 'E         | 1   |
|    |     | start of period                 | ³ N   |     |     | 7      |     | M    | " {             | 3 0  | 0   | 1 1/4 |      |    | 7        |              | N  | PEEEE      | EE" |
|    | C.  | Unreported claim reserve        | , 9   |     |     | 7      |     |      | 7               |      |     | 7     |      |    |          |              |    | 7          | 9   |
|    |     | end of period                   | 7     |     |     | 7      |     |      | 7               |      |     | 7 .   |      |    | ,        |              |    | 7          | 7   |
|    | Đ.  | Claim reserves, start           | Ä     |     |     | 9      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 9          | 7   |
|    |     | of period                       | 7     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 9        |              |    | 4          | 7   |
|    | E.  | Claim reserves, end             | y     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 7          | 7   |
|    |     | of period                       | 7     |     |     | 7      |     |      | ,               |      |     | 7     |      |    | 7        |              |    | 7          | ,   |
|    | F.  | Incurred claims                 | 7     |     |     | 9      |     |      | 4               |      |     | 7     |      |    | 3        |              |    | 7          | 9   |
|    |     | (A - B + C - D + E)             | 7     |     |     | 4      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 7          | 7   |
|    |     |                                 | 7     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | Ą          | 7   |
| 3. | Los | s Ratio:                        | ,     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 7          | 9   |
|    |     |                                 | 7     |     |     | 7      |     |      | 7               |      |     | 9     |      |    | 7        |              |    | 7          | 7   |
|    | Α.  | Actual loss ratio               | 7     |     |     | 5      |     |      | 7               | ٠    |     | 7     |      |    | 7        |              |    | 4          | ,   |
|    |     | (2F / 1F)                       | 7     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 7        |              |    | 7          | 7   |
|    | B.  | Loss ratio at prima             | 7     |     |     | 7      |     |      | ,               |      |     | 3     |      |    | ,        |              |    | 9          | 7   |
|    |     | facie rates (2F / 1G)           | 9     |     |     | 9      |     |      | 9               |      |     | 7     |      |    | ÿ        |              |    | 9          | 7   |
|    |     |                                 | 3     |     |     | 4      |     |      | 9               |      |     | 3     |      |    | 7        |              |    | 7          | 9   |
|    |     |                                 | 4     |     |     | 7      |     |      | 7               |      |     | 7     |      |    | 4        |              |    | 9          | 1   |