



STATE OF HAWAII
INSURANCE DIVISION
 DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
 P. O. Box 3614
 Honolulu, Hawaii 96811-3614
 335 Merchant St., 2nd Floor
 Honolulu, Hawaii 96813

ACCOUNT OF SURPLUS LINES BUSINESS TRANSACTED DURING THE YEAR 20__

NAME OF SURPLUS LINES BROKER _____

RECAPITULATION BY INSURANCE COMPANIES

NAIC CODE	NAME OF INSURANCE COMPANY (COMPLETE NAME IN ALPHA ORDER) (NO BROKER NAMES)	ADDRESS	CITY	STATE	ZIP CODE	GROSS PREMIUMS (9)	RETURN PREMIUMS (10)	NET PREMIUMS (11)	
						TOTALS	\$	\$	\$

(Totals Must Equal All Related Reports)