

NOTICE OF TRANSMITTAL

FOR DATA SUBMITTED UNDER
SFAA FIDELITY AND SURETY STATISTICAL PLAN
(FULL LEVEL)

Calendar Year 2017 Statistics

INSTRUCTIONS:

- a. Complete items 1 through 9 found on pages 1 and 2;
b. Provide company information requested on page 2;
c. Mail this form to the address noted at the bottom of page 2;
d. Report DIRECT BUSINESS ONLY for Premiums, Paid Losses and Outstanding Losses; and
e. A separate Notice of Transmittal must be filed for each of Premiums, Paid Losses and Outstanding Losses.

1. Company/Group Name \_\_\_\_\_

2. Company/Group Number..... [ ] [ ] [ ] [ ]

3. Accounting Month \_\_\_\_\_ Accounting Year \_\_\_\_\_

4. Type of Statistics..... [ ]
Select one: 1 - Premiums
2 - Paid Losses
3 - Outstanding Losses

5. a) Type of Submission..... [ ]
Select one: 0 - No Statistics to Report
1 - Full Original
2 - Partial Original
3 - Resubmission
5 - Error Correction
6 - Supplemental

b) Type of Submission Count..... [ ] [ ]
Enter the Count for this Type of Submission only
Examples: If this is the third Partial Original, then enter "03".
A Full Original must be count "01".
For the first Resubmission, enter "01"
For the third Error Correction, enter "03"

c) If this is a Resubmission, indicate submission being corrected..... [ ] [ ] [ ]
Applies only for Type of Submission 3 - Resubmission, for all other submissions, leave blank.
Indicate the Type of submission being corrected in the first box. Indicate the Count of the
submission being corrected in the second and third boxes.
Examples: For a resubmission of the Full Original Submission, enter "101".
For a resubmission of the third Partial Original, enter "203".
For a resubmission of the second supplemental, enter "602".

6. If this the Final Partial Original Submission for the Type of Statistics and Accounting Period indicated
above, then enter an "X" in box, otherwise leave blank..... [ ]

THE SURETY & FIDELITY ASSOCIATION OF AMERICA  
**NOTICE OF TRANSMITTAL (Con't)**

7. TECHNICAL REQUIREMENTS

ISOeSubm/FTP: \_\_\_\_\_ a) Date of Transmission: \_\_\_\_\_

8. Grand Total Dollars \_\_\_\_\_ If Credit, enter "X"

*Fidelity and Surety Combined  
Exclude Transmittal Letter (TL) and Submission Control (SC) Records  
For Error Correction Submissions leave blank  
For Paid Loss file, include paid loss, salvage/subrogation, and paid ALAE in Grand Total  
For Outstanding Loss file, include outstanding loss and outstanding ALAE in Grand Total  
Use this amount in the SC record in the file*

Subtotal: Loss Dollars \_\_\_\_\_ If Credit, enter "X"

*For Paid Loss file, include only paid loss and salvage/subrogation  
For Outstanding Loss file, include only outstanding loss  
Do not use this amount in the SC record in the file*

9. Grand Total Records \_\_\_\_\_

*Fidelity and Surety Combined  
Exclude Submission Control Records  
For Error Corrections enter the number of Parameter Records  
For Paid Loss or Outstanding Loss files, include paid loss, salvage/subrogation, and ALAE in Grand Total*

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**COMPANY INFORMATION**

Date Submitted to SFAA \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title\* \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Company Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\* Signatory must be company official responsible for compilation of statistical data.

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*This form is available online at <http://www.surety.org/scontent.cfm?lid=22&catid=9&spid=39>*

**PLEASE EMAIL THIS FORM IMMEDIATELY UPON SUBMISSION TO THE SFAA at [edonnell@surety.org](mailto:edonnell@surety.org).**