

TITLE COMPANIES

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: Maine Filings Made During the Year 2012

(1) Check- List	(2) Line #	(3) REQUIRED FILING FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE (postmarked)	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
I. NAIC FINANCIAL STATEMENTS								
	1	Annual Statement (8 ½" x 14")	XXX	EO	XXX	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	XXX	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	
II. NAIC SUPPLEMENTS								
	11	Actuarial Opinion	XXX	EO	XXX	3/1	Company	
	12	Investment Risk Interrogatories	XXX	EO	XXX	4/1	NAIC	
	13	Management Discussion & Analysis	XXX	EO	XXX	4/1	Company	
	14	Schedule SIS	XXX	N/A	N/A	3/1	NAIC	
	15	Supplemental Compensation Exhibit	XXX	N/A	N/A	3/1	NAIC	
	16	Supplemental Schedule of Business Written By Agency	XXX	EO	XXX	4/1	NAIC	
III. ELECTRONIC FILING REQUIREMENTS								
	50	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	51	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	52	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	53	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	54	Quarterly Statement Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	55	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	56	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
IV. AUDIT/INTERNAL CONTROL RELATED REPORTS								
	71	Accountants Letter of Qualifications	XXX	EO	N/A	6/1	Company	
	72	Audited Financial Reports	XXX	EO		6/1	Company	
	73	Audited Financial Reports Exemption Affidavit	XXX	N/A	N/A		Company	
	74	Communication of Internal Control Related Matters Noted in Audit	XXX	N/A	N/A	8/1	Company	
	75	Independent CPA (change)	XXX	N/A	N/A		Company	
	76	Management's Report of Internal Control Over Financial Reporting	XXX	N/A	N/A	8/1	Company	
	77	Notification of Adverse Financial Condition	XXX	N/A	N/A		Company	
	78	Request for Exemption to File	XXX	N/A	N/A		Company	
	79	Relief from the five-year rotation requirement for lead audit partner	XXX	EO	XXX	3/1	Company	
	80	Relief from the one-year cooling off period for independent CPA	XXX	EO	XXX	3/1	Company	
	81	Relief from the Requirements for Audit Committees	XXX	EO	XXX	3/1	Company	
V. STATE REQUIRED FILINGS								
	101	Filings Checklist (with Column 1 completed)	XXX	0	XXX	3/1	State	
	102	Maine Fraud and Abuse Annual Report	XXX	0	1	3/1	State P	
	103	Premium Tax	XXX	0	1	3/1	State E	
	104	Signed Jurat	XXX	XXX	XXX	3/1, 5/15, 8/15, 11/15	NAIC	
	105	State Filing Fees	XXX	0	1	8/10	State C,P	

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.