

# RMAP Quarterly Report

Insurer: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Program Year July 1, \_\_\_\_\_ to June 30, \_\_\_\_\_

Title: \_\_\_\_\_

Quarter ending: \_\_\_\_\_

Phone #: \_\_\_\_\_

| Quarter ending:   | 30-Sep | 31-Dec | 31-Mar | 30-Jun | YTD |
|---|--------|--------|--------|--------|-----|
| Assessments collected   |        |        |        |        | 0   |
| Plus: Interest Earned   |        |        |        |        | 0   |
| Less: Disbursements   |        |        |        |        | 0   |
| Net Balance   | 0      | 0      | 0      | 0      | 0   |
| Horizontal cross check<br>Should = YTD Total<br>directly above it |        |        |        |        | 0   |

## THINGS TO REMEMBER:

For each quarter, report the assessments collected in that quarter. The YTD total should reflect the cumulative total throughout the year.

For an electronic copy of this spreadsheet example, please email a request to [jane.g.lathrop@maine.gov](mailto:jane.g.lathrop@maine.gov)