Chapter Ins 52 APPENDIX H

Form CR-S — PART 2 Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 Company	2	3	4 Name	5	6	7
Code or		Effective	of		Paid	Unpaid
ID Number		Date	Company	Location	Losses	Losses
	Annuity and Accid		1			ļ