



THE SURPLUS LINE ASSOCIATION  
OF CALIFORNIA

388 MARKET STREET  
SAN FRANCISCO, CA 94111

ARTHUR D. FREEMAN, JR.  
MANAGER

JAMES S. PUGH  
ASSISTANT MANAGER

TELEPHONE  
(415) 434-4900  
FAX  
(415) 434-3716  
TELEX  
988719 SLACA

April 17, 1989

No. 433

BULLETIN TO ALL MEMBERS

RE: Revision of SLA-104C Tag Form

We are in the process of computerizing the SLA-104C tag form. Enclosed are samples of the new format. You will note that there are no longer codes for the items requested. Full descriptions of requested information will be printed on the face of the tag.

You will receive two copies of the tag for each policy. The first copy is to be signed and returned with your reply. The second copy is for your records.

You may continue to receive old tag forms on some items that are currently being processed.

If you have any questions, please give us a call at (415) 434-4900.

A handwritten signature in cursive script, appearing to read 'A. D. Freeman, Jr.', written in dark ink.

A. D. Freeman, Jr.  
Manager

ADF:je

encs.

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= TAGGED ITEM =
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3/23/89

SURPLUS LINE ASSOCIATION OF CALIFORNIA
308 MARKET STREET
SAN FRANCISCO, CA. 94111
Phone:(415)434-4900

INSURANCE DATA SERVICES
55 FRONT ST.
SAN FRANCISCO, CA 94444

INSURED NAME:DOE JOHN

POLICY:GLS11111

EFFECTIVE: 1/01/89

THIS DECREE REQUIRES THE FOLLOWING INFORMATION REGARDING THE ABOVE STATED POLICY

SLA-101 form is missing. This is the Insurance Department Affidavit
form showing that the particular risk is declined by the majority
admitted market. When this form is required, it is not necessary to
send the SL-1 form.

Policy/certificate is shown to be a renewal. This office has no record
of the policy/certificate having been filed for #.....
If this is correct, please file it in your next batch and include the
premium on the adding-machine tape. If the policy/certificate was
filed under a different name or a different number please indicate the
name and number in the reply section.

Please provide Security by numbered endorsement or copy of cover-note
showing PERCENTAGES FOR EACH COMPANY, OR SYNDICATE.

STAMPING OFFICE, BY

KEEP THIS COPY FOR YOUR FILES THANK YOU

SLA-104C-TAG REV.89

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= TAGGED ITEM =

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3/23/89

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STAMPING OFFICE, BY

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PLEASE REPLY IN THE SPACE BELOW AND REMIT THIS FORM TO OUR OFFICE:

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DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_