

THE STATE INSURANCE FUND

199 Church St, New York, NY, 10007-1100
(888) 875-5790

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| Document Type: AUDIT | Group No: | Period Covered: * | R.B. File No: |
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INSURED :

GROUP MANAGER :

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| Policy No: |
| Date: |
| Document Number: |

* PERIOD OF COVERAGE BEGINS AND ENDS AT TWELVE AND ONE MINUTE O'CLOCK A.M. EASTERN STANDARD TIME

INFORMATION PAGE AUDIT

| ITEM# | CODE CLASSIFICATION DESCRIPTION | PAYROLL | X RATE PER \$100 | = SIF MANUAL RATE PREMIUM |
|-------|--|---------|---------------------|------------------------------|
| 1. | 7998 HARDWARE STORES-RETAIL | 372,877 | 4.24 | 15,809.98 |
| 2. | 8809 EXECUTIVE OFFICERS N.O.C. ETC-U | 197,600 | 0.32 | 632.32 |
| 3. | 8810 CLERICAL OFFICE EMPLOYEES NOC-U | 111,613 | 0.31 | 346.00 |
| 4. | MANUAL PREMIUM | | | 16,788.30 |
| 5. | EXPERIENCE RATING CREDIT 8% OF (ITEM 4). | | | 1,343.06CR |
| 6. | TOTAL MODIFIED PREMIUM | | | 15,445.24 |
| 7. | NYSIF DISCOUNT 20% OF (ITEM 6) | | | 3,089.05CR |
| 8. | EXPENSE CONSTANT | | | 250.00 |
| 9. | TERRORISM PREMIUM. | | | 395.61 |
| 10. | NATURAL DISASTER AND CATASTROPHE PREMIUM | | | 81.85 |
| 11. | TOTAL PREMIUM. | | | 13,083.65 |
| 12. | ASSESSMENT CHARGE 13.8% OF (ITEM 11 LESS ITEM 8). | | | 1,771.04 |
| 13. | TEMPORARY ASSMT CREDIT (SEE ASSMT NOTICE). | | | 306.15CR |
| 14. | TOTAL PREMIUM + ASSESSMENTS. | | | 14,548.54 |
| | CREDIT FOR PREVIOUS DEPOSIT PREMIUM. | | | 3,724.83CR |
| | CREDIT FOR PREVIOUS INSTALLMENTS | | | 11,174.49CR |
| A. | TOTAL CREDIT FOR PREVIOUS PREMIUM. | | | 14,899.32CR |
| B. | TOTAL PREMIUM + ASSESSMENTS (ITEM 14). | | | 14,548.54 |
| C. | NET PREMIUM FOR THIS PERIOD (B LESS A) | | | 350.78CR |

THIS IS NOT A BILL. IMPORTANT PREMIUM CALCULATION, PLEASE RETAIN FOR YOUR RECORDS.
(SEE REVERSE SIDE FOR CONDITIONS)