### BOARD NOTICE

#### **BOARD NOTICE 80 OF 2008**

### FINANCIAL SERVICES BOARD

# SHORT-TERM INSURANCE ACT, 1998 (ACT NO. 53 OF 1998): RETURNS BY SHORT-TERM INSURERS TO REGISTRAR

- I, Dube Phineas Tshidi, Registrar of Short-term Insurance, hereby notify, in terms of section 35 of the Short-term Insurance Act, 1998, that every short-term insurer shall furnish the Registrar, -
  - (a) within a period of four months after the expiration of each financial year with an audited return relating to its business;
  - (b) within a period of one month after the expiration of each quarter of its financial year with a return relating to its business; and
  - (c) within a period of six months of the expiration of each financial year, with a copy of its financial statements as defined in section 1(1) of the Companies Act, 1973 (Act No. 61 of 1973).

This Board Notice is applicable to all registered short-term insurers with financial years ending on or after 1 January 2008 and relates to the financial year under review in its entirety.

The returns must be submitted on A4 paper and also electronically.

The returns referred to in paragraphs (a) and (b) above must contain the following information and be submitted in the following form:

- 1. Annual Statutory Return (Refer Annexure A)
- 2. Quarterly Return (Refer Annexure B)

Board Notice 60 of 25 May 2007, published in the Government Gazette No. 29894 is hereby repealed.

15 18H181

**DP TSHIDI** 

REGISTRAR OF SHORT-TERM INSURANCE

## **ANNEXURE A**

# SHORT-TERM INSURANCE ACT (NO. 53 OF 1998) SHORT-TERM RETURN

REGISTRAR OF SHORT-TERM INSURANCE REFERENCE NUMBER END OF PERIOD UNDER REVIEW FINAL PRINTOUT DATE

2008/06/30 20/8/2008 11:41

1.25

Statement	Section	Description	No. of pages	Version	Issue/Amendment date	
A1	General	REGISTRATION INFORMATION	1	1.0	2006-01-01	
A2	General	ADDRESSES & PARTICULARS OF KEY PERSONS	1	1.0	2006-01-01	
A3	General	DIRECTORS AND MEMBERS OF AUDIT COMMITTEE	<del>- i</del>	3.0	2008-01-01	
B1	Underwriting	GROSS UNDERWRITING RESULTS	1	2.0	2008-01-01	
B2	Underwriting	REINSURANCE UNDERWRITING RESULTS	1	2.0	2008-01-01	
	Onderwriting	REINSURANCE UNDERVIRITING RESULTS		2.0	2000-01-01	
B3	Underwriting	[DELETE]	1	1.0	2006-01-01	
B4	Underwriting	GROSS AND REINSURANCE PREMIUM ANALYSIS	1	2.0	2008-01-01	
B5	Underwriting	NET UNDERWRITING RESULTS	1	2.0	2008-01-01	
B6	Underwriting	SUMMARY OF BUSINESS COMPOSITION BY PRIMARY INSURERS	1	3.0	2008-01-01	
C1	Financial statements	INCOME STATEMENT AS PER SHAREHOLDERS' FINANCIAL STATEMENTS	1	1.0	2006-01-01	
C2	Financial statements	BALANCE SHEET AS PER SHAREHOLDERS' FINANCIAL STATEMENTS	2	2.0	2007-01-01	
C3	Financial statements	COMPARISON OF STATUTORY UNDERWRITING RESULTS AND PUBLISHED UNDERWRITING ACCOUNT	1	1.0	2006-01-01	
C4	Financial statements	ANALYSIS OF ISSUED PREFERENCE SHARES & DEBENTURES	1	1.0	2006-01-01	
СБ	Financial statements	CASH FLOW STATEMENT AS PER SHAREHOLDERS' FINANCIAL STATSTEMENTS	1	1.0	2008-01-01	
D1	Reserving	RESERVING DEVELOPMENT FOR ALL BUSINESS	2	3.0	2008-01-01	
D1.1	Reserving	RESERVING DEVELOPMENT PROPERTY	2	3.0	2008-01-01	
D1.2	Reserving	RESERVING DEVELOPMENT FOR TRANSPORT	2	3.0	2008-01-01	
D1.3	Reserving	RESERVING DEVELOPMENT FOR MOTOR	2	3.0	2008-01-01	
D1.4	Reserving	RESERVING DEVELOPMENT FOR ACCIDENT AND HEALTH	2	3.0	2008-01-01	
D1.5	Reserving	RESERVING DEVELOPMENT FOR LIABILITY	2	3.0	2008-01-01	
D1.6	Reserving	RESERVING DEVELOPMENT FOR ENGINEERING	2	3.0	2008-01-01	
D1.7	Reserving	RESERVING DEVELOPMENT FOR GUARANTEE	2	3.0	2008-01-01	
D1.8	Reserving	RESERVING DEVELOPMENT FOR MISCELLANEOUS	2	3.0	2008-01-01	
D2	Reserving	UNEARNED PREMIUM PROVISIONS	2	2.0	2008-01-01	
D3	Reserving	SUMMARY OF TECHNICAL PROVISIONS	1	1.0	2006-01-01	
		MOVEMENT ANALYSIS OF STATUTORY TECHNICAL	_			
D3.1	Reserving	PROVISIONS	1	1.0	2008-01-01	
E1	Assets	CASH & BALANCES & DEPOSITS	1	1.0	2006-01-01	
E1.1	Assets	CASH & BALANCES & DEPOSITS	1	1.0	2006-01-01	
E2	Assets	SECURITIES & LOANS	1	1.0	2006-01-01	
E2.1	Assets	SECURITIES & LOANS	1	1.0	2006-01-01	
E3	Assets	DEBENTURES, LOAN STOCKS & OTHER SECURITIES	1	1.0	2006-01-01	
E3.1	Assets	DEBENTURES, LOAN STOCKS & OTHER SECURITIES	1	1.0	2006-01-01	
E4	Assets	DEBTORS (Claims against persons and entities)	1	1.0	2006-01-01	
E4.1	Assets	DEBTORS (Claims against persons and entities)	1	1.0	2006-01-01	
E5	Assets	SHARES, UNITS & DEPOSITORY RECEIPTS	2	1.0	2006-01-01	
E5.1	Assets	SHARES, UNITS & DEPOSITORY RECEIPTS	1	1.0	2006-01-01	
E6	Assets	LAND AND BUILDINGS - FREEHOLD ONLY	1	1.0	2008-01-01	
E7	Assets	FIXED ASSETS AND SUMMARIES OF OTHER ASSETS	1	1.0	2006-01-01	
E8 _	Assets	DERIVATIVES	1	1.0	2006-01-01	
E8.1	Assets	DERIVATIVES	1	1.0	2006-01-01	
E9	Assets	ASSETS AND LIABILITIES: COMPARISON OF STATUTORY TO SHAREHOLDERS' VALUES	1	1.0	2006-01-01	
E9.1	Assets	DIFFERENCES BETWEEN ASSETS AND LIABILITIES: COMPARISON OF STATUTORY TO SHAREHOLDERS' VALUES	1	1.0	2006-01-01	
E10	Assets	RELATED PARTY BALANCES	1	1.0	2006-01-01	
F1	Financial soundness	SURPLUS ASSETS, NET ASSET RATIO AND SOLVENCY MARGIN	1	2.0	2006-01-01	
F2	Financial soundness	SPREAD OF DOMESTIC ASSETS (INCLUDING FOREIGN ASSETS DEEMED TO BE DOMESTIC)	1	1.0	2006-01-01	
G1	Questionnaires	GENERAL INFORMATION	2	2.0	2007-01-01	
Н	Audit report	REPORT BY THE AUDITORS IN TERMS OF SECTION 19(7) OF THE ACT	1	2.0	2007-01-01	

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## SHORT-TERM INSURANCE ACT (NO. 53 OF 1998) SHORT-TERM RETURN ABC LIMITED

REGISTRAR OF SHORT-TERM INSURANCE REFERENCE NUMBER END OF PERIOD UNDER REVIEW FINAL PRINTOUT DATE

No number available 2008/06/30 2008/07/16 09:25

Statement Section Descri		Description	No. of pages	Version	Issue/Amendment date
G2	Questionnaires	RISK REPORT ISSUED BY DIRECTORS	1	1.0	2006-01-01
G3	Questionnaires	RISK REPORT ISSUED BY MANAGEMENT	5 %	3.0	2008-01-01
G4.1	Cross border	SADC BRANCH	2	1.0	2007-01-01
G4.2	Cross border	SADC SUBSIDIARY	2 .	1.0	2007-01-01
G4.3	Cross border	SADC OTHER INSURANCE OPERATIONS	3	1.0	2007-01-01
G4.4	Cross border	NON-SADC BRANCH	2	1.0	2007-01-01
G4.5	Cross border	NON-SADC SUBSIDIARY	2	1.0	2007-01-01
G4.6	Cross border	NON-SADC OTHER INSURANCE OPERATIONS	2	1.0	2007-01-01
ı	Cell captives	CELL CAPTIVE INSURERS	2	1.0	2006-01-01
J1	Reinsurance	SHORT-TERM REINSURANCE SUPERVISION QUESTIONNAIRE	3	1.0	2006-01-01
J2	Reinsurance	SPREAD OF REINSURERS	1	1.0	2006-01-01
J3	Reinsurance	CATASTROPHE REINSURANCE	2	1.0	2006-01-01
J4	Reinsurance	REINSURANCE DETAILS REGARDING PROPERTY	1	1.0	2006-01-01
J5	Reinsurance	REINSURANCE DETAILS REGARDING TRANSPORTATION	1	1.0	2006-01-01
J6	Reinsurance	REINSURANCE DETAILS REGARDING MOTOR	1	1.0	2006-01-01
J7	Reinsurance	REINSURANCE DETAILS REGARDING ACCIDENT AND HEALTH	1	1.0	2006-01-01
J8	Reinsurance	REINSURANCE DETAILS REGARDING GUARANTEE	1	1.0	2006-01-01
J9	Reinsurance	REINSURANCE DETAILS REGARDING LIABILITY	1	1.0	2006-01-01
J10	Reinsurance	REINSURANCE DETAILS REGARDING ENGINEERING	1 .	1.0	2006-01-01
J11	Reinsurance	REINSURANCE DETAILS REGARDING MISCELLANEOUS	1	::1.0	2006-01-01
put required	Modelling	FINANCIAL CONDITION REPORTING CALCULATION TOOL	:	1.0	2006-01-01

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		PUBI	LIC STATEMENT
FINAL PRINTOUT DATE	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Tradamin suppression with the state of the s	2008/07/16 09:25
	REGISTRATION INFORMATIO	New State Control of the Control of	
	OT ABC LIMITED	/06/2008 ———————————————————————————————————	
1	as at the end of innancial period 30	3	4
'		<u> </u>	
1. DESCRIPTION		Regulators Ref.	AAA AAA AAA
Registrar of Short-term Insurance reference number	No number available	<del></del>	
End of financial period (dd/mm/yyyy)	2008/06/30	<del></del> -	
Name of short-term insurer	ABC LIMITED		
Number of months in financial period under review	12		
A TYPE OF POLICIES	CERTIFICATE O	F REGISTRATION AS AN INSURER ISSUED BY THE REGISTRAR	
2. TYPES OF POLICIES			
☐ Property ☐ Transportation	_		
Transportation  Motor	_		
Accident and health	_		
Guarantee	_		
☐ Liability	<del>-</del> -		
Engineering  Miscellaneous	_		
Miscellaneous	-		
Certificate number		Conditions imposed <sup>1</sup> (Y/N)	
3. NAMES OF CONTACT PERSONS			
3.1 PUBLIC OFFICER			
Initials and surname of Public Officer		Did person change since previous year (Y/N)	
Initials and sumame of contact person regarding the return		Did person change since previous year (Y/N)	
3.2 CHAIRPERSON (CHAIR)			
Initials and surname of Chairperson		Did person change since previous year (Y/N)	
3.3 CHIEF EXECUTIVE OFFICER Initials and surname of Chief Executive Officer		Did person change since previous year (Y/N)	
Iffilials and sufficiency Chief Executive Officer		Did person change since previous year (1114)	
3.4 AUDITOR			
Name of first firm		Did person change since previous year (Y/N)	
Initials and sumame of Responsible Partner		Did person change since previous year (Y/N)	<u> </u>
Name of second firm		Did person change since previous year (Y/N)	
Initials and surname of Responsible Partner		Did person change since previous year (Y/N)	
A GUARGUOI BERG			
4. SHAREHOLDERS Are all the shareholders holding more than 25% of the issued shares, the s	came as the previous year? (Y/N)		
Fig. and state indicates nothing there than 20 to the isough shales, the s	and as the professor four ( ( )		
5. TURNOVER			
If non-insurance business was conducted furnish the annual turnover of the	at business (R'000)		
6. NUMBER OF PEOPLE EMPLOYED			
		AUDITORS	
		AUDITORS	

#### Notes:

1 Conditions imposed on an insurer are available from the Registrar on request.

FINAL PRINTOUT DATE			2008/07/16 09
Fant The Milleries due affects Antiques in the life of their sections in the section of the section and order are made the affects	STATEMEN ADDRESSES & PARTICULAF of ABC LIM as at the end of financial	ITED period 30/06/2008	
1	2	3	4
1. HEAD OFFICE AND PUBLIC OFFICER			
1.1 HEAD OFFICE OF SHORT-TERM INSURER IN RSA		1.2 PUBLIC OFFICER	
Telephone (including area code) Fax (including area code) website e-mail		Initials and sumame Telephone (including area code) Fax (Including area code) Cellphone e-mail	
Physical address	Postal address	1.3 PERSON COMPLETING THE RETURN	
		Initials and surname Telephone (including area code) Fax (including area code) Cellphone e-mail	
		1.4 CONSUMER COMPLAINTS PERSON	
2. AUDITORS		Initials and surname Telephone (including area code) Fax (including area code) Cellphone e-mail	
2.1 FIRST AUDITOR (Responsible Partner)		2.2 SECOND AUDITOR (Responsible Partner)	
Telephone (including area code) Fax (including area code) Cellphone e-mail		Telephone (including area code) Fax (Including area code) Cellphone e-mail	
Physical address	Postal address	Physical address	Postal address
		AUDITORS	S

	AUDITORS			
				•
				100
				•
				•
				2. MEMBERS OF AUDIT COMMITTEE:
				2. MANAGEMENT EXECUTIVES
				•
				•
				Alternate
				Non-executive
				•
				Executive
				1. DIRECTORS:
5	4	3	2	
Position held	Highest academic qualification	Date resigned	Date appointed	Initials & Surname
2.76 at///mon2	RS OF AUDIT COMMITTEE	NT A3 AND MEMBE MITED	STATEME EXECUTIVES of ABC LII	STATEMENT A3  DIRECTORS, MANAGEMENT EXECUTIVES AND MEMBERS OF AUDIT COMMITTEE  of ABC LIMITED  as at the end of financial period 30/05/2008
PUBLIC STATEMENT	PUE			FINAL PRINTOUT DATE
Page 5 of 97				ST2008

Notes:
1 Examples include: Chairman, Vice-chairman, Non-executive, Managing Director etc.

2008

SHEET REFERENCE NUMBER

ST2008

901.00.4 PUBLIC STATEMENT FINAL PRINTOUT DATE 2008/07/16 09:25 STATEMENT B1
GROSS UNDERWRITING RESULTS of ABC LIMITED as at the end of financial period 30/06/2008 PREVIOUS YEAR CURRENT YEAR DOMESTIC AND FOREIGN COMBINED DOMESTIC AND DESCRIPTION FOREIGN ONLY FOREIGN FOREIGN ONLY Total Liability Property Transportation Motor Accident and health Guarantee Engineering Miscellaneous COMBINED RYNOO R1000 R'000 R1000 R1000 R'000 R'000 R'000 R'000 R'000 R'000 R'000 10 12 9 11 13 1 Unearned premiums - opening 2 Direct premiums written: 2.1 Inclusive of refunded premiums 22 Less: Refund of premiums 3 Reinsurance premiums Inwards: 3.1 Proportional 3.2 Non proportional 4 Premiums in respect of portfolio transfers 5 Other 6 Unearned premiums - closing 7 PREMIUMS EARNED 8 Outstanding claims - Opening 9 IBNR - Opening 10 Claims paid 11 Other 12 Outstanding claims - Closing IBNR - Closing 13 CLAIMS INCURRED 14 Gross commission paid on direct premiums 15 Gross commission paid on reinsurance premiums inwards 16 DAC on direct premiums 17 DAC on reinsurance premiums Inwards 18 Gross commission incurred on direct premiums 19 Gross commission incurred on reinsurance premiums inwards 20 EXPENSES 21 GROSS RESULT: PROFIT/(LOSS) 22 Gross commission paid as % of premium written
23 Gross commission incurred as % of premium earned 0% 0% 0%

IF the period to which the figures in this return apply, is NOT TWELVE MONTHS, furnish
the following figures which are required in terms of Schedule 2 to
the Act for the calculation of the IBNR and contingency reserve:

	the Act for the Carotration of the IDNN and Contingency reserve.
24	Gross premiums written (direct premiums and reinsurance inwards)
	for the twelve month period preceding the date of this return:

<sup>25</sup> Domestic reinsurance including Lloyds's (i.r.o. these premiums)

Domestic R'900	Foreign R'000
ol	0
0	

<sup>26</sup> Foreign reinsurance (i.r.o. these premiums)

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EI NEPERENCE HOMBER											PU	BLIC STATEMS
PRINTOLT DATE	· Kadibin makemila / di	985ar ' 1' rv1 ras av	as 1905) " members 452 "V C		or to the delicer to the angle of the last control of	- 7.5. march (106-200-2006), 2-0-5-00.		200 C	onless and a Popular agency of the	Manufacture Colored State Colored		2008/07/16
			4.1	2 - 0.40	URANCE UNDERWRIT	NNG RESULTS D			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
						CURRENT YEAR					PREVIO	US YEAR
DESCRIPTION	Total	Property	Transportation	Motor	DOMESTIC AND FO	Guarantee	Liability	Engineering	Miscellaneous	FOREIGN ONLY	DOMESTIC AND FOREIGN COMBINED	FOREIGN ON
	R7000	R*000	R'000	R'000	R1000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
1	2	3	4	5	6	7	8	9	10	11	12	13
		-										
Uneamed reinsurance premiums - opening		4	0 0		0 0			0 0	<u> </u>	<u> </u>	0	4
Reinsurance premiums paid :		<u> </u>	0		0 0			0 0		o <u></u>	0	4
2.1 Proportional		<u> </u>	00		<u> </u>			0 0		0 0	<u>)                                    </u>	4
2.2 Non proportional		<u> </u>	0 0		0 0			o <u>}o</u>		0 0	) <u> </u>	
Other	i c	oli .	io lo		야 아	0		o} o	Į.	o{ c	) 0	d
Unearned reinsurance premiums - closing			0 0		ol ol	0		0 0	<u> </u>	0 0	0	
Outstanding R/I claims - Opening			0 0		0 0		_	0 0		ol	1 0	1
IBNR - Opening			0 0		0 0			00		0 0		
Reinsurance claims made		0	0		0 0			0 0	1	0 0	0	
Other		<u> </u>	00		o) o			<u>o}</u>	<u>t</u>	<u>o </u>	0	L
Outstanding R/I claims - Closing		D	0 0		0 0			0 0		0 0	. 0	
IBNR - Closing		0	<u>o)</u>		<u>o)                                    </u>			0] 0	)	0  0	0	
REINSURANCE CLAIMS INCURRED		0	0 0		0 0			0 0		0	0	
COMMISSION RECOVERED	J=		<u>o)</u> <u>o</u>		n n			ol o	4	0( 0	T .	
EXPENSES RECOVERED			0 0		0 0			0 0	t	0 0	-0	
	***************************************		-1 9									
REINSURANCE RESULT: (PROFIT)/LOSS	ž.	oll	0 0		0 0			o( 0		0 0	0	1

AUDITORS	
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PUBLIC STATEMEN

		PUBLIC STATEMENT
FINAL PRINTOUT DATE		2006/07/16 09:25
	STATEMENT B4 GROSS AND REINSURANCE PREMIUM ANALYSIS Of ABC LIMITED as at the end of financial period 30/06/2008	

	F	RISKS WITHOUT L	JPP AT YEAR END					RISKS WITH UP	P AT YEAR END			
DESCRIPTION	MONTHLY	BUSINESS	RISKS EXPIRED	AT YEAR END	CONSTAN	T RISKS	INCREASII	NG RISKS	DECREASI	NG RISKS	UNEVE	N RISKS
	Domestic R'000	Foreign R700	Domestic R'000	Foreign R'000								
1	3	4	5	6	7	8	9	10	9	10	11	12
1 1. GROSS PREMIUMS WRITTEN	0	0	0	0	0	0	0	0	0		0 0	(
2. REINSURANCES:												
2.1 Domestic (including Lloyd's):												
2 2.1.1 Proportional	0	0	0	0	0	0	0	0	<u> </u>		0 0	
2.1.2 Non-Proportional											, ——	
3 2.1.2 (a) Expiring at Year end	0	0	0	ol	<u>(0</u>	0	0	0	o		0	
2.1.2 (b) Expiring After Year End:									,			
The part relating to this Year	- 0	0.			0		0	0	0			
5 - The part relating to next year	. 0		<u> </u>	0	<u> </u>		<u> </u>	0			)  0	
2.2 Foreign:									1 0			<del></del>
6 2.2.1 Proportional	0	0	1 0	սլ	이		<u> </u>		1			
2.2.2 Non-Proportional:		n			ol		o	0			<u> </u>	
7 2.2.2 (a) Expiring at Year end 2.2.2 (b) Expiring After Year End:		U	, U				1 0					'
8 - The pert relating to this Year	0			n l				n			1 0	
9 - The part relating to next year	1 0	<u> </u>	- 0		0				- 0		<u> </u>	
10 3. TOTAL REINSURANCES	0	Ö		0	o o	0	0	0	0	, (	0	
11 4. NET PREMIUMS	0	0	o	0	0	0	ol	0	0	(	0 0	

AUDITORS	

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SHET REFERENCE MUNDER	905-99-A PUBLIC STATEMENT
FINAL PRINTOUT DATE	2006/07/16 09 25
NET UNDERWRITING PESULTS  NET OF ABGUMITED	

				s submillion	NDERWRITING RES of ABC LIMITED of financial period	ULTS 30/06/2008						
<b>\</b>						VT YEAR				,	PREVIO	JS YEAR
ļ-					OMESTIC AND FOREK	<u></u>				1		1
DESCRIPTION	Total	Property	Transportation	Motor	Accident and health	Guarantee	Liability	Engineering	Miscellaneous	FOREIGN ONLY	DOMESTIC AND FOREIGN	FOREIGN ONLY
	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
1	2	3	. 4	5	6	7	<u> </u>	9	10	11	12	13
1 Uneamed premiums - opening	0	0	0	0	0	0	0	0	0	0	0	0
2 Premiums written - Gross	0		ol.	0	1 0							-
3 Reinsurance		0				0	<del>                                     </del>	- 0	Ö	<del></del>	0	
4 Net	oi	D.	0	0	0	0	- 0	0	0			0
5 Other	0	0	0	0	0	0	0	0	- 0		0	0
6 Uneamed premiums - closing	0	0	0	0	0	0	C	0		0	0	0
7 NET EARNEO PREMIUMS		0	0	0	0	0		0	0	C	0	0
8 Outstanding claims - Opening	0	ol	o	0				0		ì	0	
9 IBNR - Opening	Ó	0	0	0	. 0	0	C	0	0	0	0	0
0 Ctalms and claims expenses paid	0	0	0	0			0	0	0		0	0
1 Other	0		0			0		. 0	0		0	
2 Outstanding claims - Closing		0	0	0		0			0		0	0
13 IBNR - Closing	0	0	0	0		0	<u> </u>	0			0	0
14 NET CLAIMS INCURRED		0	0	0		0	c	0	0	C	0	0
5 COMMISSIONS	0	0	0		0	0	i) c		1 0	0	0	0
16 EXPENSES	0	0	0		0		<u> </u>	0	0	C	0	0
17 NET RESULT: PROFIT/(LOSS)	0	o	0		) 0	0		0	0	1 0		0
18 CLAIMS RATIO (claims incurred as % of earned premium)	0.0%	0.0%	D.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
19 COST RATIO (commission + expenses as % of written premium)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%
20 COMBINED RATIO (claims+comm+exp as % of earned premium	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
21 RETENTION RATIO (net premiums as % of gross premiums)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0,0%
22 OPERATING RATIO	0%	(claims + commission	n + expenses less total i	nvestment income as s	% of earned premium)					0%	0%	0%

AUDITORS		

Notes: Reinsurers shouldn't complete this statement.

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PUBLIC STATEMENT

E NUMBER
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	The state of the s				end of fiftericial period 30/06/2008	Committee of the second of the		AND THE PROPERTY OF THE PROPER	
DESCRIPTION	Gross premium on policies renewed	Gross premium on new policies	oss policy	Average contract period per policy	Number of policies at the beginning of the financial wear	Number of policies at the end of the financial year	Number of claims reported	Average gross claims amount	Average net claims amount
	R'000	R'000	R'000	St.			c	R'000	R'000
			4	5				5	2
Property	0	0		0	0	o	0		0
	0	0	ō	0	0	0	0	0	
3 Corporate	0	0		0	0 0	0	0		0
4 Commercial	0	0		0	0	ō	0		
6 Transportation	-								
7 Personal	10				0				
	0			0	0	o	0	0	0
9 Commercial	0	0	0	0	0	٥	0		0
11 Motor	0	0		0		0	0		
12 Personal	0 (	0	0	0	0	0	o	0	0
13 Corporate	0	0		0		0	0		
14 Commercial	-6	0	0	0	0	0	0	0	0
16 Accident & health	0	0		0			0		
	0	0		0	0	0	0	0	0
18 Corporate	ō			0			5		
19 Commercial	0	0		5			5		
21 Guarantee				0			0		
22 Personal	0	0		0			0		0
23 Corporate	0	0	0	0	0	0	0	0	
	0	0		0			0		
26 Liability	0	0	0	0	0		0	0	Ö
							5		
Commercial	5								
31 Engineering			-				0		
32 Personal							0		0
33 Corporate	0	0	0	0	0	0	0	0	
34 Commercial	0						0		0
:									
36 Miscellaneous									
37 Personal				0	0				
38 Corporate									
23 Commercial									

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SHEET REFERENCE NUMBER

C01-99-A

## PUBLIC STATEMENT

AUDITORS

	as at the end of financial period.	2	3
	DESCRIPTION	Current year R'000	Previous year  R'000
1	Net underwriting result - profit / (loss)	0	
2	Investment income - Total	0	
3	Interest, dividends & rentals	0	
1	Realised gains/(losses) on disposals	0	·
5	Unrealised gains/(losses)	0	
3	Other income (specify)	0	
7		0	
3	Other expenditure (specify)	0	
}		0	
0	Profit/(loss) before tax	0	
1	Income tax expense	0	
2	Net profit/(loss) for the period	0	
3	Accumulated profit/(loss) at the beginning of the period	0	
4	Sub-total	0	
5	Transfer to/(from) contingency reserve	0	
3	Transfer to/(from) non-distributable reserve	0	
7	Transfer to/(from) other reserves	0	
3	Dividends	0	
9	ACCUMULATED PROFIT/(LOSS) AT THE END OF THE PERIOD	0	_
0	Difference between last year's closing and this year's opening accumulate	d profit	

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SHEET REFERENCE NUMBER

C02-99-A

## **PUBLIC STATEMENT**

	FINAL PRINTOUT DATE	PUB	PLIC STATEMENT
	STATEMENT BALANCE SHEET AS PER SHAREHOLD! of ABC LIMIT as at the end of financial p	ers' financial stati ed	2008/07/16 09:25
	1	2	3
	DESCRIPTION	Current year  R'000	Previous year <i>R'000</i>
	ASSETS	R 000	R 000
	Non-Current Assets		
1	Property & equipment	0	0
	Intangible assets	0	0
	Investment property	0	0
	Financial instruments	0	0
5	Loans advanced	0	0
6	Interest in subsidiary companies	0	0
7	Interest in associated companies	0	0
8	Goodwill	0	0
	Current Assets		
	Current investments		0
	Agents' & reinsurers' balances		U
	Other receivables	0	0
	Deposits with reinsurers	0	0
	Taxation paid in advance	0	0
	Cash & cash equivalents		0
15	Other	0	0
	Technical assets		
16	Reinsurers' share of provision for unearned premiums	0	
	Reinsurers' share of outstanding claims	0	0
	Deferred acquisition costs	0	0
19	Deferred tax assets	0	0
20	TOTAL ASSETS	0	0
	EQUITY AND LIABILITIES		
	Capital And Reserves		
	Share capital	0	0
23	Share premium - Non-distributable reserve	0	0
23	- Non-distributable reserve - Contingency reserve	0	0
2 <del>4</del> 25	- Contingency reserve - Distributable reserve	0	0
	- Retained income	0	0
۷.	- (Votalineu Illuottie	10	
27	TOTAL EQUITY	0	0
- <i>'</i> -		<u> </u>	

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SHEET REFERENCE NUMBER

C02-99-A

## **PUBLIC STATEMENT**

FINAL PRINTOUT DATE		2008/07/16 09
STATEMENT BALANCE SHEET AS PER SHAREHOLDE of ABC LIMITE	RS' FINANCIAL STATI	EMENTS :
as at the end of financial pe		
1	2	3
DESCRIPTION	Current year R'000	Previous year <i>R'000</i>
Non-Current Liabilities		
28 Interest bearing loans	0	
29 Non-current provisions	0	
30 Amounts due to subsidiaries	0	
B1 Deferred taxation	. 0	
32 Gross provision for unearned premiums	0	
33 Due to cell owner	0	
34 Gross outstanding claims	0	
B5 Deferred reinsurance commission revenue	0	
Current Liabilities		
36 Agents' and reinsurers' balances	0	
37 Deposits by reinsurers	0	5 E
8 Other payables	. 0	.: .
9 Current provisions	. 0	
Taxation payable	0	
Deferred tax liability	0	
12 TOTAL LIABILITIES	0	<u> </u>
3 TOTAL EQUITY AND LIABILITIES	0	<del></del>
	AUDITORS_	

SHEET REFERENCE NUMBER		Ğ	C03-99-A
FINAL PRINTOUT DATE		Ĭ.	2008/07/16 09:25
COMPARISON OF STATITIORY INDERWRITING RESILITS AND PUBLISHED INDERWRITING ACCOUNT	STATEMENT C3	HELISHED INDERWI	TNING ACCOUNT
	of ABC LIMITED of financial period 30	106/2008	
DESCRIPTION	Statement B5 R'000	Income statement R'000	Difference R'000
1	2	8	4
1 Gross Premiums Written	0	0	0
2 Reinsurance	0	0	0
3 Net Premiums Written	0	0	0
4 Change in Unearned Premium Provision	0	0	0
5 Net Premiums Earned	0	0	0
6 Net Claims incurred	0		
/ Claims paid 8 Movement on Outstanding claims	0	00	0
9 Movement on Incurred But Not Reported (IBNR)	0	0	0
10 Commission incurred/received	0	0	0
11 Management expenses	0	0	0
12 Underwriting Results	0	10	0

2008/07/16 09:25

In future R'000

In-arrear R'000 ဖ

**DIVIDEND/INTEREST** 

PUBLIC STATEMENT

Page 15 of 97

ST2008

SHEET REFERENCE NUMBER

of ABC LIMITED as at the end of financial period 30/06/2008 ANALYSIS OF ISSUED PREFERENCE SHARES & DEBENTURES Amount payable on redemption R'000 ວ Amount obtained through issue STATEMENT C4 R'000 Share premium R'000 Amount authorised Nominal R'000 ANALYSIS OF INSTRUMENT FINAL PRINTOUT DATE

000 000 REDEEMABLE/NON-CONVERTIBLE: Within 10 -15 years Within 7 - 10 years Within 5 - 7 years Within 1 - 3 years Within 3 - 5 year After 15 years
SUBTOTAL

1. PREFERENCE SHARE CAPITAL

REDEEMABLE/NON-CONVERTIBLE: 2. DEBENTURES

0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0		0
<ul> <li>Within 1 - 3 years</li> </ul>	<ul> <li>Within 3 - 5 year</li> </ul>	<ul> <li>Within 5 - 7 years</li> </ul>	Within 7 - 10 years	Within 10 -15 years	<ul> <li>After 15 years</li> </ul>	SUBTOTAL

AUDITORS

Page 16 of 97

SHEET REFERENCE NUMBER

PUBLIC STATEMENT

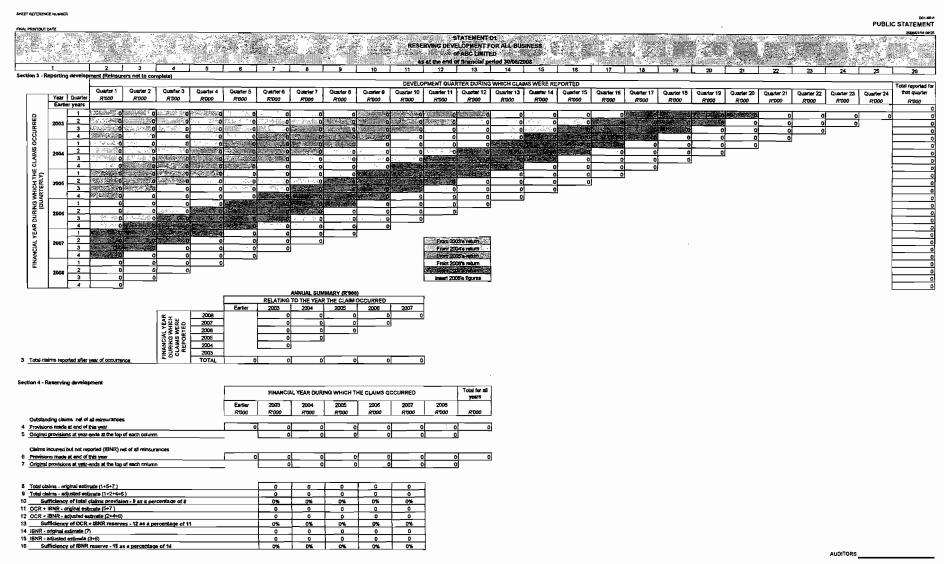
CASHFLOW STATEMENT AS SHAREHOLDER	S' FINANCIAL STATEMENTS	
of ABC LIMITED as at the end of financial perio		
as as the end of financial perio	0 30/06/2008 2	3
DESCRIPTION	Current year	Previous year
DESCRIPTION	R'000	R'000
CASH FLOWS FROM OPERATING ACTIVITIES	0	
	0	
	0	<u> </u>
	0	
	0	
	0	
lat and managed from the at in a partition of the in-	0	
let cash generated from (used in) operating activities		
CASH FLOW FROM INVESTING ACTIVITIES		
	0	
	0	
	0	
	0	
	0	
let cash generated from (used in) investing activities	0	-
	<u> </u>	
ASH FLOW FROM FINANCING ACTIVITIES		
	0	· · · · · · · · · · · · · · · · · · ·
	:	
		•
	0	5
et cash generated from (used in) financing activities	0	
ET INCREASE/(DECREASE) IN CASH AND CASH EQUIVALENTS	0	
ASH AND CASH EQUIVALENTS AT THE BEGINNING OF THE YEAR	O	
ACTI AND CACH EQUIVALENTS AT THE DEGINNING OF THE TEAR		
ASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	0	

3 1 Page 17 of 97

PUBLIC STATEMENT STATEMENT DI RESERVING DEVELOPMENT FOR ALL BUSINESS of ABC LIMITED
as and of financial period 30/08/2008 11 12 13 14 15 Section 1 - Payment development (Net of all Reinsurances) DEVELOPMENT QUARTER DURING WHICH CLAIMS WERE PAID Total paid for that Quarter 1 Quarter 2 Quarter 3 Quarter 4 Quarter 5 Quarter 6 Quarter 6 Quarter 7 Quarter 8 Quarter 8 Quarter 9 Quarter 10 Quarter 11 Quarter 12 Quarter 13 Quarter 14 Quarter 15 Quarter 17 Quarter 17 Quarter 19 Quarter 19 Quarter 20 Quarter 21 Quarter 22 Quarter 24 quarter Year Quarter Earlier years R'000 R'000 R'000 R'000 2003 2 - -1 2 2006 From XXXX return 2 2007 From 2004's return From 2005's return From 2006's return 2008 Insert 2008's figures ANNUAL SUMMARY (R 1000) FINANCIAL YEAR CLAIM OCCURRED 2003 2006 Eartler 2004 2005 2006 2007 1 Claims paid during the year when they occurred 2 Claims paid after the year when they occurred Section 2 - Claims development (Net of all Reinsurances) DEVELOPMENT QUARTER DURING WHICH CHANGES OCCURRED IN CLAIMS LIABILITY Year Quarter INBURERS - FINANCIAL YEAR CLAIMS OCCURRED (QUARTERLY)
REINBURERS - UNDERWRITHIS YEAR CLAIMS OCCURRED
(QUARTERLY) 2003 3 1 2 - o o 1 2

From 2003's return From 2004's return \*\*
Erour 2005's return \*\*
From 2006's return Insert-2006's figures Ô

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SHET REPERING MARKET			DI 14 PUBLIC STATEMEN
1 2 3 4 5	र्जर ABC LINETED as at the end of financial period	PROPERTY	200 m s
Section 3 - Reporting development (Reinstances not to complete)			
		CH CLAIMS WERE REPORTED  riter 13	Communication   Communicatii   Communication   Communication   Communication   Communication
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2006 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0	
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HA CONTROL ON THE PROPERTY OF			
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2007 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 From 2004's return 0 0 0 From 2004's return 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
2008 2 0 0 0	o From 2008 return		
4 0	ANNUAL SUMMARY (R'000)		
2008 2007 2007 2007 2007 2007 2007 2007	RELATING TO THE YEAR THE CLAMM OCCURRED  Earlier 2003 2004 2005 2006 2007  0 0 0 0 0 0  0 0 0 0  0 0 0 0  0 0 0 0  0 0 0 0  0 0 0 0  0 0 0 0  0 0 0 0 0  0 0 0 0 0  0 0 0 0 0 0 0  0 0 0 0 0 0 0 0		
Section 4 - Reserving development	<u> </u>		
Section 4 - Interest and accomplisher	FINANCIAL YEAR DURING WHICH THE CLAIMS OCCURRED Total for all years		
	Earlier 2003 2004 2005 2006 2007 2008 R'000 R'000 R'000 R'000 R'000 R'000 R'000 R'000 R'000 R'000		
Outstanding claims net of all reinsurances  Provisions made at end of this year  Original provisions at year-ends at the top of each column	0 0 0 0 0 0 0		
Calins incurred but not reported (IBNR) net of all reinsurances  Provisions made at end of this year  Original provisions at year-ends at the top of each column			
8 Total claims - original estimate (1+5+7)	0 0 0 0 0		
9 Total ctaires - adjusted estimate (1+2+4+6) 10 Sufficiency of total claims provision - 9 as a percentage of 8	0 0 0 0 0 0 0% 0% 0% 0% 0% 0%		
11 QCR + IBNR - original estimate (5+7) 12 QCR + IBNR - adjusted estimate (2+4+6)	0 0 0 0 0		
13 Sufficiency of OCR + IBNR reserves - 12 as a percentage of 11	0% 0% 0% 0%		

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----3 2

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2087

PUBLIC STATEMENT STATEMENT D1.2
RESERVING DEVELOPMENT FOR TRANSPORT,
of ASC LIMITED
as at the end of financial period 3000/2002 DEVELOPMENT QUARTER DURING WHICH CLAIMS WERE PAID Total paid for that quarter 
 Cluster 3
 Quarter 4
 Quarter 5
 Quarter 6
 Quarter 7
 Quarter 8
 Quarter 9
 Quarter 10
 Quarter 12
 Quarter 13
 Quarter 15
 Quarter 16
 Quarter 17
 Quarter 19
 Quarter 20
 Quarter 21
 Quarter 22
 Quarter 23
 Quarter 24
 R000
 R0 Year | Quarter Earlier years R1000 2 3\_ 4 4 1 2 2 From 2003's tellum From 2004's return From 2006's return Insert 2006's figures ANNUAL SUMMARY (R'000) FINANCIAL YEAR CLAIM OCCURRED Earlier 2004 2005 2006 2008 1 Claims paid during the year when they occurred 2 Claims paid after the year when they occurred Section 2 - Claims development (Not of all Reinsurances) DEVELOPMENT QUARTER DURING WHICH CHANGES OCCURRED IN CLAIMS LIABILITY Quarter 1 Quarter 2 Quarter 3 Quarter 4 Quarter 5 Quarter 5 Quarter 6 Quarter 7 Quarter 6 Quarter 7 Quarter 8 Quarter 7 Quarter 8 Quarter 10 Quarter 12 Quarter 13 Quarter 13 Quarter 15 Quarter 16 Quarter 17 Quarter 18 Quarter 19 Quarter 20 Quarter 20 Quarter 20 Quarter 21 Quarter 22 Quarter 23 Quarter 24 Quarter 25 Quarter 26 Quarter 27 Quarter 28 Quarter 28 Quarter 28 Quarter 28 Quarter 29 Qu **QUARTER** Year Quarter Earlier years R7000 R1000 INBURERB - FINANCIAL YEAR CLAIMS OCCURRED (QUARTERLY)
REINBURERB - UNDERWRITING YEAR CLAIMS OCCURRED
(QUARTERLY) 2063 2 2004 4

From 2003's Jehrn

From 2004's return

From 2008's return insert 2006's figures

PHILTI RETURNACE NUMBER	01240A PUBLIC STATEMENT
RESERVING DEVELOPMENT FOR TRANSPORT  OF ABC LIMITE:  OF ABC LI	2008-07 rts or 25
	25 26 0
Section 3 - Reporting development (Reinsurers not to complete)	
DEVELOPMENT QUARTER DURING WHICH CLAIMS WERE REPORTED  Cuarter 1 Quarter 2 Quarter 3 Quarter 4 Quarter 4 Quarter 5 Quarter 5 Quarter 6 Quarter 7 Quarter 6 Quarter 7 Quarter 7 Quarter 7 Quarter 2 Quarter 2 Quarter 2 Quarter 2 Quarter 2 Quarter 3 Quarter 3 Quarter 4 Quarter 15 Quarter 16 Quarter 17 Quarter 18 Quarter 18 Quarter 19 Quarter 2 Quarter 2 Quarter 2 Quarter 2 Quarter 3 Quarter 3 Quarter 4 Quarter 5 Quarter 6 Quarter 7 Quarter 8 Quarter 7 Quarter 2 Quarter 2 Quarter 3 Quarter 3 Quarter 4 Quarter 5 Quarter 6 Quarter 7 Quarter 8 Quarter 7 Quarter 8 Quarter 7 Quarter 8 Quarter 9 Quart	Total reported for rter 24 that quarter
Earlier years	000 R000
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2007 2 5 1 20 1 20 1 20 1 20 1 20 1 20 1 20	0
TOTAL	0
2008 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0
ANNUAL SUMMARY (R000)  RELATING TO THE YEAR THE CLAM OCCURRED	
Earlier   2003   2004   2005   2007	
三 要	
3 Total claims reported after year of occurrence   2003   10   10   10   10   10   10   10	
Section 4 - Reserving development  FINANCIAL YEAR DURING WritCH THE CLAIMS OCCURRED  Total for sil	
Years   Year	
R1000         R1000 <th< td=""><td></td></th<>	
4 Provisions made at end of this years 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Claims incurred but not reported (rSNR) not at all reinsurances	
6 Provisione made at end of this year 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
8 Total ciaires - original estimate (1-5-7) 0 0 0 0 0 0 0 0 9 Total ciaires - adjusted estimate (1-2-4-6) 0 0 0 0 0 0	
10 Sufficiency of total claims provision - 9 as a percentage of 9 0% 0% 0% 0% 0%	
11 OCR + IBNR - original estimate (5+7) 0 0 0 0 0 0 0 12 OGR + IBNR - adjusted estimate (2+4+6) 0 0 0 0 0 0	
13 Sufficiency of OCR + IBNR reserves - 12 as a percentage of 11 0% 0% 0% 0% 0%	

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Insert 2006's figures

SHEET REPERISHER HUMBER			PUBLIC STATEMENT
	STATEMENT DI.2  reserving development in  of ASC Limite)  as at the antiof finantial period	OR MOTOR:	The second secon
1 2 3 4 5	5 7 8 9 10 11 12 13	14 15 18 17 18 19 20 21 2	22 23 24 25 26
Section 3 - Reporting development (Reinsurers not to complete)	DEVELOPMENT QUARTER DURING WK	RICH CLAIMS WERE REPORTED	Total reported for
Year Querter Rooo Rooo Rooo Rooo	Quarter 5 Quarter 6 Quarter 7 Quarter 6 Quarter 9 Quarter 10 Quarter 11 Quarter 12 Qu	uarter 13 Quarter 14 Quarter 15 Quarter 16 Quarter 17 Quarter 18 Quarter 19 Quarter 20 Quar	
Earlier years		0 0 0 0 0 0 0 0 0 0	0 0 0 0
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1 1 4 1 01	ANNUAL SUMMARY (R'000) RELATING TO THE YEAR THE CLAIM OCCURRED		<u> </u>
2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2006 2007 2007	Earlier 2003 2004 2005 2006 2007 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
Section 4 - Reserving development			
	FINANCIAL YEAR DURING WHICH THE CLAIMS OCCURRED Your years		
Outstanding claims, net of all reinsurances	Earlier 2003 2004 2005 2006 2007 2008 R000 R000 R000 R000 R000 R000 R000		
Provisions made at end of this year     Original provisions at year-ends at the top of each column	0 0 0 0 0 0 0		
Claims Incurred but not reported (IBNR) net of all reinsurances			
Provisions made at end of this year     Original provisions at year-ends at the top of each column	0 0 0 0 0 0 0 0 0 0 0 0 0 0		
8 Total claims - original estimate (1+5+7) 9 Total claims - adjusted estimate (1+2+4+6) 10 Sufficiency of total claims provision - 9 as a percentage of 8 1 OCR - HBNC - original estimate (2+7) 12 OCR - HBNC - adjusted estimate (2+4+6) 13 Sufficiency of OCR - HBNR reserves - 12 as a percentage of 11	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		

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ETATTUTAL PART OF A STATE OF A ST
RESERVING DEVELOPMENT FOR ACCIDENT AND HEALTH
COMPANIES OF A CONTROL OF A CON
as at the end of financial period 30/09/2006
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26

											DEV	ELOPMENT O	JARTER DUR	ING WHICH O	I AIMS WERE	PAID										Total pai
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Quarter 5	Quarter 6	Quarter 7	Quarter 8	Quarter 9	Quarter 10		Quarter 12		Quarter 14	Quarter 15	Quarter 16	Quarter 17	Quarter 16	Quarter 19	Quarter 20	Quarter 21	Quarter 22	Quarter 23	Quarter 24	
Year	Quarter	R'000	RTOO	R'000	R'000	R1000	RYOO	RYOO	R'000	RYOOO	RYDOO	R000	R'000	R'000	R'000	R1000	RYOO	R'000	ROOO	R7000	R1000	R'000	R1000	RY000	R1000	R
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				FINA	NCIAL YEAR	CLAIM OCCUP	RED	
		Earler	2003	2004	2005	2006	2007	2008
1	Claims paid during the year when they occurred		0	0	0	0	0	0
2	Claims paid after the year when they occurred	-	- 0	0	0	-		

ection 2 - Claims development (Net of all Reinsurances)	rances)
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			_		_					-	ACCOLMICIAL	QUARTER DU	MINTO TALITOR	1 CIPRITOLO C	DOURNED IN	JUNIO EIADI	15111									Total
		Quarter 1	Quarter :					Quarter?	Quarter 8	Quarter 9	Quarter 10		Quarter 12		Quarter 14	Quarter 15		Quarter 17		Quarter 19	Quarter 20		Quarter 22	Quarter 23	Quarter 24	
	Quarter	R'000	R1000	R1000	R1000	RY00	R'000	R'000	R'000	R'000	R'900	R7000	R'000	R'000	R1000	R'000	R'000	R1000	R1000	R'000	R1000	RY000	R'000	R1000	R'000	
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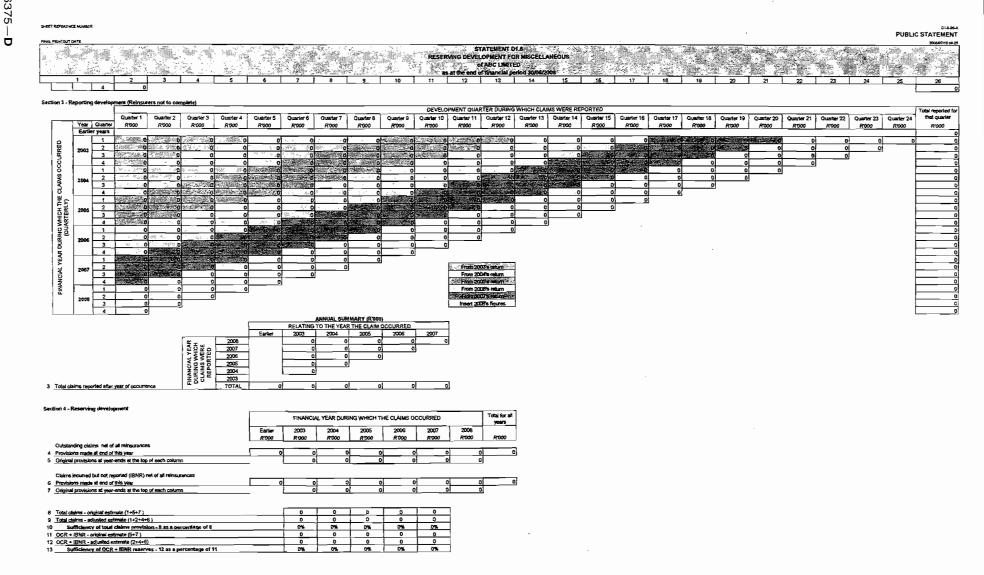
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ARY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUM SLESS APPROVED REINSURANCE   Security in respect of friends premium beginning of each risk   R000   R0	STATEMENT D2   STATEMENT D2   STATEMENT D2   SUNFAMED   STATEMENT D2   SUNFAMED   STATEMENT D2   SUNFAMED   STATEMENT D2   SUNFAMED   SUNFAMED   STATEMENT D2   SUNFAMED   SUNFAMED   STATEMENT D2   SUNFAMED	JMMARY OF UNEARNED PREMIUM PR  1 Constant Risks 2 Increasing Risks 3 Decreasing Risks	Gross premium payable at inception/ beginning of each risk	3  D ON GROSS PRI  Commission paid	4 EMIUMS LESS A Reinsurance pak	UNEARNED  as at the end  5  PPROVED REINSU  In respect of gross	6	SIONS 0/06/2008 7			**************************************		2008/07/16 0
ARY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   See at the end of financial period Stote(2006)   See at the end of financial period Stote(2006	ARRY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   Agricultura playshed as in respect of gross promise provided in respect of gross promise provided in respect of gross promise provided in respect of gross promise playshed as in respect of gross promise playshed as in respect of gross promise provided in respect of gross promise playshed as in respect of gross promise playshed provided in respect of gross promise playshed playshed as in respect of gross promise playshed playshed provided provided provided on respect of gross promise playshed playsh	MARY OF UNEARNED PREMIUM PR  Constant Risks Increasing Risks Decreasing Risks	Gross premium payable at inception/ beginning of each risk	3  D ON GROSS PRI  Commission paid	4 EMIUMS LESS A Reinsurance pak	UNEARNED  as at the end  5  PPROVED REINSU  In respect of gross	6	ISIONS 0/06/2008 7			**************************************		
ARY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   See at the end of financial period Stote(2006)   See at the end of financial period Stote(2006	ARRY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   Agricultura playshed as in respect of gross promise provided in respect of gross promise provided in respect of gross promise provided in respect of gross promise playshed as in respect of gross promise playshed as in respect of gross promise provided in respect of gross promise playshed as in respect of gross promise playshed provided in respect of gross promise playshed playshed as in respect of gross promise playshed playshed provided provided provided on respect of gross promise playshed playsh	MARY OF UNEARNED PREMIUM PR  Constant Risks Increasing Risks Decreasing Risks	Gross premium payable at inception/ beginning of each risk	D ON GROSS PRI	4 EMIUMS LESS A Reinsurance pair	5 PPROVED REINSU in respect of gross	6	0/06/2008   7			10		
ARY OF UNEARNED PREMIUM   PROVISION - BASED   ON GROSS PREMIUMS LESS APPROVED REINSURANCE	MARY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   Circle premium payable al inception beginning of active seminary payable at inception beginning active seminary payable at inception se	MMARY OF UNEARNED PREMIUM PR  Constant Risks Increasing Risks Decreasing Risks	Gross premium payable at inception/ beginning of each risk	D ON GROSS PRI	4 EMIUMS LESS A Reinsurance pair	5 PPROVED REINSU in respect of gross	6	7	8	9	10		12
ARY OF UNEARNED PREMIUM   PROVISION - BASED   ON GROSS PREMIUMS LESS APPROVED REINSURANCE	MARY OF UNEARNED PREMIUM PROVISION - BASED ON GROSS PREMIUMS LESS APPROVED REINSURANCE   Circle premium payable al inception beginning of active seminary payable at inception beginning active seminary payable at inception se	MMARY OF UNEARNED PREMIUM PR  Constant Risks Increasing Risks Decreasing Risks	Gross premium payable at inception/ beginning of each risk	Commission paid	Reinsurance pak	in respect of gross	RANCE		_				
Constant Risk	Constant Risks	1 Constant Risks 2 Increasing Risks 3 Decreasing Risks	Gross premium payable at inception/ beginning of each risk	Commission paid	Reinsurance pak	in respect of gross	RANCE						
Payable at Inception   Payable at Inception	Payable at inexplicit   Paya	Constant Risks Increasing Risks Decreasing Risks	payable at inception/ beginning of each risk										
Domestic   Domestic   Domestic   Poreign   Domestic   Poreign   Domestic   Poreign   Property   Domestic   Property   Domestic   Property   Domestic   Property   Domestic   Property   Domestic   D	Domestic   Foreign   Property and relative   Property and relative   Domestic   Property   Domestic   Property and relative   Domestic   Domestic   Property and relative   Domestic   Domestic   Property and relative   Domestic   Domestic   Domestic   Property   Domestic   Domestic   Domestic   Property   Domestic   Domestic   Domestic   Property   Domestic   Domestic	Constant Risks Increasing Risks Decreasing Risks		0000		ual premium	Commission rec	eived on reinsurance		Full period of risk in	Expired period of risk		Unaumad 9/
Domestic   Prosection   Domestic   Prosection   Domestic   Prosection   Domestic   Prosection   Domestic   Prosection   Domestic   Prosection   Domestic   Domestic	Domestic Policies	Increasing Risks Decreasing Risks	R'000 0	0000	Domestic	Foreign	Domestic	Foreign	- Iorongii romoznanoc	months	in months	year end	Uneamed 70
Prescribed method   Prescribed   Prescribed method   Prescribed	Commission negation   Property   O   O   O   O   O   O   O   O   O	Increasing Risks Decreasing Risks	0										
Description	Decreasing Risks   0   0   0   0   0   0   0   0   0	Decreasing Risks				<u> </u>		<u> </u>	<u> </u>				
New Property   O   O   O   O   O   O   O   O   O			0										
Name	SKRIPTES		-										
SK TYPES   SK TYPES   CRIPTION OF DIRECT INSURANCE AND INWARD REINSURANCE AND INVANCE AN	SCRIPTION OF DIRECT INSURANCE AND INVARACE AND INVARIANCE AND I					·			<u> </u>				
CRIPTION OF DIRECT INSURANCE AND INWARD REINSURANCE   Payable at inception   Department   Dep	Commission paid   Reinsurance paid in respect of gross single/annual premium payable at inception payable at inception (NWARD REINSURANCE)   Commission paid (NWARD REINSURANCE)   Robot   R	Totals	<u> </u>			0] 0		0)	0 0	(	0	0	
CRIPTION OF DIRECT INSURANCE AND INWARD REINSURANCE   Payable at inception   Department   Dep	Commission paid   Reinsurance paid in respect of gross single/annual premium payable at inception payable at inception (NWARD REINSURANCE)   Commission paid (NWARD REINSURANCE)   Robot   R	RISK TYPES											
INVARID REINSURANCE   Deginning of each risk   R000   R0	Domestic   Protein   Pro	DESCRIPTION OF DIRECT INSURANCE AND	payable at inception/	Commission paid			Commission rec	eived on reinsurance		Full period of risk in		provision at financial	Uneamed %
1.1   Prescribed method   Property   0   0   0   0   0   0   0   0   0	1.1   Prescribed method   Property   0   0   0   0   0   0   0   0   0	INWARD REINSURANCE							7	months	in months	-	Officarried 7
Property	Property   0   0   0   0   0   0   0   0   0		R'000	R'000	R'000	R'000	R'000	R000	R'000				
Accident and Health	Accident and Health   O   O   O   O   O   O   O   O   O	Transportation				<u> </u>				·		0	
Guarantee   0   0   0   0   0   0   0   0   0	Guarantee   0   0   0   0   0   0   0   0   0		- 0			<u> </u>			<u> </u>		·		
Liability	Liability		1 0			<u> </u>		•,	•		,		
Engineering 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Engineering 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		- ·			· ·							
Miscellaneous   0   0   0   0   0   0   0   0   0	Miscellaneous   0   0   0   0   0   0   0   0   0		<u> </u>			•							
1.2 Other approved method  Property 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1.2 Other approved method   Property					N .	1.7	ni -					
Property         0<	Property         0<					<u> </u>			0 0	i	0	0	
Transportation         0	Transportation         0	Miscellaneous				<u> </u>			0 0	i	0	0	
Motor         0         0         0         0         0         0         0         0         0           Accident and Health         0	Motor         0 <td>Miscellaneous  1.2 Other approved method</td> <td>0</td> <td>0</td> <td></td> <td>0) 0</td> <td></td> <td>ol</td> <td>0 0</td> <td></td> <td>0</td> <td>0</td> <td></td>	Miscellaneous  1.2 Other approved method	0	0		0) 0		ol	0 0		0	0	
Accident and Health 0 0 0 0 0 0 0 0 0 0 0 0	Accident and Health         0         0         0         0         0         0         0         0           Guarantee         0<	Miscellaneous  1.2 Other approved method Property	0	0		o		0	0 0		0	0	
	Guarantee         0	1.2 Other approved method Property Transportation	0 0	0		0 0 0		0	0 0 0 0 0 0		0 0	0	
Guarantee I 01 01 01 01 01 01 01 01 01	Liability         D         D         O         O         O         O         O         O         O           Engineering         D         O	Miscellaneous  1.2 Other approved method Property Transportation Motor	0 0	0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0	0 0 0 0	
	Engineering D 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health	0 0 0	0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	
		Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee	0 0 0 0	0 0		0 C C C C C C C C C C C C C C C C C C C		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	
		Miscelianeous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee Liability	0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0		0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	
Engineering 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee Liability Engineering	0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0		0		0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	
Engineering         D         O         O         O         O         O         O         O           Miscellaneous         0	TOTAL - Domestic 0 0 0 0 0 0 0 0 0	Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee Liability Engineering Miscellaneous	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0		0		0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	
	angine viving	10 Guarantee 11 Liability	<u> </u>	0		0 0		Ö	0 0	i	0		0
		Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee	0 0 0 0	0 0		0 C C C C C C C C C C C C C C C C C C C		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	
	miscensineous   u  U  U  U  U  U  U  U  U  U  U  U  U  U	Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee Liability	0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0		0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	
Engineering 0 0 0 0 0 0 0 0 0 0 0		Miscellaneous  1.2 Other approved method Property Transportation Motor Accident and Health Guarantee Liability Engineering	0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0		0		0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	

MEET	REFERENCE	NIMBED

											PU	BLIC STATEMENT
FINAL PR	NTOUT DATE											2008/07/16 09:25
	habababahaba				UNEARNE	STATEMENT D2 D PREMIUM PROVI of ABG LIMITED of financial period 3						
6.4	The Marie County County County		#### #P# 6-12 ·	- 1 S L	as at the end of	orannanciai penocis	D/06/2008 XX 18/200	CONTRACTOR OF THE PROPERTY.	1900 1910 1910 1910 1910 1910 1910 1910	TOTAL SERVICES	A Table of the Control	
<u> </u>	1	2	3	4	5	) 6	7	8	9	10	11	12
	2.2 Other approved method							_				
31	Property	0		٥	\	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0	0	0.0%
32	Transportation	0	0	0	0	0 0		oi	- 0	ol ol	0	0.0%
33	Motor	0	Ö		0	0			<del></del>	0		0.0%
34	Accident and Health	0				0 0		<u> </u>	1 0	ol d	0	0.0%
35	Guarantee	0	0	0		5 c		10		0		0.0%
36	Liability	0	0			) 0		) - (	1	0	0	0.0%
37	Engineering	0	0			0		3	0	1 0	0	0.0%
38	Miscellaneous	0	0	0	1 0		1	<del></del>	1	0	0	0.0%
39	TOTAL - Foreign	0	D	0		0		0	· · · · · · · · · · · · · · · · · · ·	0)	0	0.0%
40 3	ALL POLICIES	0	0	0		0	(	)(		0	0	0.0%
				_								

40

	ATOUT OATE		•	2008/07/16 09:25
	STATEMENT D3 SUMMARY OF TECHNICAL PROVISION Of ABCLIMITED as at the end of financial period 30/06/2	DNS		
		1	2	3
	1. UNEARNED PREMIUM PROVISION	Domestic	Foreign	Total
1	1.1 Constant risks	R'000	R'000	R'000
2	1.2 Increasing risks	0		<u>ö</u>
3	1.3 Decreasing risks	0	ol	
4	1.4 Uneven risks	0	0	
5	1.5 Statutory unearned premium provision	o	0	
			,	
	2. OUTSTANDING CLAIMS	Domestic	Foreign	Total
6	2.1 Gross outstanding claims	R'000	R'000	R'000
7	Less; reinsurance recoveries	<u> </u>		0
8	2.2 Domestic reinsurance including Lloyd's	O		C
9	2.3 Foreign reinsurance	0	0	
10	2.4 Security in respect of foreign reinsurance	0	- 0	
	arr oversky arroupout or lest sign for the area to	•		
11	2.5 Statutory net outstanding claims	0	0	
	3 CLAIMS INCURRED BUT NOT REPORTED (IBNR)	Domestic R'000	Foreign <i>R'000</i>	Total R'000
12	3.1 Gross premium	0	0	C
13	3.2 Domestic reinsurance including Lloyd's	0	0	C
14	3.3 Foreign reinsurance	0	0	
15	3.4 Security i.r.o. foreign reinsurance	0	0	- 0
16	3.5 IBNR based on statutory percentage (7%)	0	0	
17	3.6 Actual calculated IBNR	0	0	
18	3.7 Statutory approved lower IBNR	0	0	
	Date of statutory approval for lower IBNR			
19	3.8 Statutory IBNR (Larger of item 3.5 or item 3.6 or approved lower IBNR)	0	0	
	4 CONTINGENCY RESERVE	Domestic	Foreign	Total
		R'000	R'000	R'000
20	4.4. Conne umanitum	0	0	(
21	4.1 Gross premium  4.2 Domestic reinsurance including Lloyd's	0	. 0	
22	4.2 Domesuc reinsurance including cloyds 4.3 Foreign reinsurance	0	0	
23	4.4 Approved foreign reinsurance	0	0	<del></del>
23	4.4 Approved to eight elistratice			
24	4.5 Contingency reserve {Statutory percentage (10%) x4.1 - 4.2 - 4.4}	0	0	
		Dames	Farrier	Total
	5 UNEXPIRED RISK PROVISION	Domestic R'000	Foreign R'000	R'000
25	5.1 Underwriting loss, if any (Statement B5)		000000000000000000000000000000000000000	
26	5.2 The amounts which the insurer and auditors consider to be necessary for an additional provision	0	0	(
27	5.3 Total - Unexpired risk provision	0		
			AUDITORS	

SHEET REFERENCE NUMBER

D3.1-99-A

RINTOUT DATE STATEMENT D3.1	E 120 T	2008/0
STATEMENT D3.1  MOVEMENT ANALYSIS OF STATUTORY TE  of ABC LIMITED  as at the end of financial period	CHNICAL PROVISIONS	
estamboto com a substituta ta ta 18 de de esta estado esta constituta de esta esta esta esta esta esta esta est	1	2
1. UNEARNED PREMIUM PROVISION - NET BASIS	Current Year R'000	Previous Y
Opening balance	0	
	0	
	0	<u> </u>
Closing balance	0	_
2. OUTSTANDING CLAIMS	Current Year	Previous Y
Opening balance		R'000_
Opening balance	ŏ	
	0	
	0	
Closing balance	- 0	
3 CLAIMS INCURRED BUT NOT REPORTED (IBNR)	Current Year R'000	Previous Y R'000
Opening balance	0	
	0	
	0	
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	ŏ	
Closing balance	0	
4 CONTINGENCY RESERVE	Current Year R'000	Previous Y R'000
Opening balance	0	
· · · · · · · · · · · · · · · · · · ·	0	1
	0	
	0	
Closing balance	l o	

SHEET REFERENCE NUMBER

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								1.0.	DEIO O'A'EMEN
FINAL PRINTOUT DATE			: 2000000000000000000000000000000000	EMENT E1					2006/07/16 09:25
			of AE	NCES & DEPOSITS IC LIMITED ancial period 30/06					
NAME OF INSTITUTION	DESCRIPTION OF INVESTMENT			CURRENT YEAR		•		PREVIOUS YEAR	
(Investments of the same kind with a bank may be grouped)	(e.g. Current Account, Fixed Deposit, Bankers Acceptance, Negotiable Certificate of Deposit)	IN RSA	DEEMED TO BE IN RSA	INCOME IN RSA	OUTSIDE RSA	INCOME OUTSIDE RSA	TOTAL VALUE	TOTAL VALUE	% of total liabilities
	Certificate of Deposity	R'000	R'000	R'000	R'000	R'000	R'000	R'000	l
1	2	3	4	5	- 6	7	8	9	10
CASH     Bank notes & coins	Notes & coins		n! o		1 (	o le		<u> </u>	0.0%
2 • Krugerrands	Coins	<del></del>	1 0	- 0		0		i č	0.0%
3 SUBTOTAL	1001110	-	0	0		0 0	<del>- </del>	ŏ	0.0%
4.0.781146 (0						1 0			
4 2. BANKS (Specify in supporting statement E1.1)		L	) 0	. 0		<u> </u>		0	0.0%
5 3. CORPORATION FOR PUBLIC DEPOSITS	Deposits		) 0	0		0 0	- 0	0	0.0%
6 4. LAND & AGRICULTURAL BANK	Deposits		0	0	(	0	0	0	0.0%
5. MARGIN DEPOSITS	•		•						•
7 SAFEX	Margin deposits		0	0		0	0	0	0.0%
8 On approved foreign derivatives	Margin deposits		0		-	0	0	0	
		•	•						
9 TOTAL CASH & BALANCES & DEPOSITS			0	0	{	0		0	0.0%

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		STATEMENT E	1.1 (supporting state)	ment to E1)					*
		CASH &	MARCHIMITED	313		والمناوات والمترجول بماله			of the second second
		es at the end	of financial period 3	7/06/2008		190	1.0		ي مانس به
NAME OF INSTITUTION	DESCRIPTION OF INVESTMENT			CURRE	NT YEAR	1, * 1,1 Mark Transport Control of Control o		PREVIOUS YEAR	i i
	1	IN RSA	DEEMED TO BE IN	INCOME IN RSA	OUTSIDE RSA	INCOME OUTSIDE	TOTAL VILLE		% of total liabilities
(Investments of the same kind with a bank may be grouped)	(e.g. Current Account, Fixed Deposit, Bankers Acceptance, Negotiable Certificate of Deposit)		RSA			RSA	TOTAL VALUE	TOTAL VALUE	75 Or total habilide:
1		R'000	R'000	<i>R'000</i> 5	R'000	R'000	R'000	R'000	- 10
1	2	3	4	5	6		8	9	10
BANKS: Specify									
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10 SUBTOTAL	•		0 0	0		0 0			0.0

AUDITORS	
AUDITORG	

SHEET REFERENCE NUMBER

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FINAL	PRINTOUT DATE								2008/07/16 09:25
1 (4)			SECUR of A	ATEMENT E2 RITIES & LOANS ABC LIMITED Inancial period 30/0	6/2008				
				CURRENT YEAR				PREVIOUS YEAR	
	DESCRIPTION	IN RSA	DEEMED TO BE IN	OUTSIDE RSA	INCOME IN RSA	INCOME OUTSIDE	TOTAL VALUE	TOTAL VALUE	% of total liabilities
		R'000	R'000	R'000	R'000	R'000	R'000	R'000	
	1	2	3	4	5	6	7	8	9
•	. SECURITIES & LOANS ISSUED OR GUARANTEED BY								
1	Central government of the Republic	0	0			0	0	Ō	0.0%
2	A Minister of the Republic	0	0			0	0	0	0.070
3	Provincial government of the Republic	0	0				0	0	
4	Local authority of the Republic	0	0				0	0	
5	Other utilities of the Republic	0				,	0	0	
6	SUBTOTAL	0	0	- 0		0	0	0	0.0%
								_	
7	RAND WATER BOARD	- 0	0				0	0	
8	LAND & AGRICULTURAL BANK (excluding deposits in statement E1.	0	<u>, , , , , , , , , , , , , , , , , , , </u>	(C		0	0	0	
9	SA TRANSPORT SERVICES	C	0		4	0	0	0	
10	ESKOM		0	(		0	0		
11	SUBTOTAL		-			0		0	0.0%
12	TOTAL	0	0			0	0		0.0%
	2. SECURITIES & LOANS APPROVED BY REGISTRAR								
13	LISTED								
14	UNLISTED (Specify in supporting statement E2.1)						0		
15	SUBTOTAL		0			0	0	0	0.0%
	3. SECURITIES OUTSIDE RSA							-	
16	LISTED	1	0					0	
17	UNLISTED (Specify in supporting statement E2.1)					<u> </u>	0	0	
18	SUBTOTAL		0	(	) (	0	0	0	0.0%
19	TOTAL SECURITIES & LOANS	(	0		) (	0	0	0	0.0%
-									

AUDITORS	

SHEET REFERENCE NUMBER

FUZ 1-99-A
PUBLIC STATEMENT

FINAL PRINTOUT DATE								2008/07/16 09:25
			ES & LOANS LIMITED					
			CURRENT YEAR				PREVIOUS YEAR	
DESCRIPTION	IN RSA	DEEMED TO BE IN	OUTSIDE RSA	INCOME IN RSA	INCOME OUTSIDE RSA	TOTAL VALUE	TOTAL VALUE	% of total liabilities
	R'000	R'000	R'000	R'000	R'000	R'000	R'000	1 1
1	2	3	4	5	6	7	8	9
1. UNLISTED SECURITIES & LOANS APPROVED BY REGISTRAR								
1 •		0 0	0				0	0.070
2 •		0 0			0		0	0.0%
3 •		0 0	0		0		0	0.0%
4 •		0	0		-0			0.0%
5 •		0 0	0		0		0	0.0%
6 •		0 0	0		0	<u> </u>	0	0.075
8 SUBTOTAL		0 0	<u>_</u>		) 0	<u> </u>	0	
8 SUBTOTAL		<u> </u>	U		,, ,	<u> </u>	<u> </u>	0.0%
2. UNLISTED SECURITIES OUTSIDE RSA							_	
9 •			0		0	0	0	
10 •			0		0		0	
11 •			0		0		0	0.0%
12 •			0		) 0	c	0	0.0%
13 •		· · ·	0	(	0		0	0.0%
14 •			0		<u> </u>	<u></u>		
15 •					0	<u></u>	0	
16 SUBTOTAL			0	L	)[ 0		0	0.0%
17 SUBTOTAL			0		0		<u> </u>	0.0%

AUDITORS	

SHEET REFERENCE NUMBER

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E03-99-A

PUBLIC STATEMENT

FINAL PRIN	NTOUT DATE							2008/07/16 09:25
		as at 1	STATEMENT OTHER SECUR of ABC LIMIT the end of financial p	ITIES ED eriod 30/96/2008				
				CURRENT YEAR			PREVIOUS YEAR	
	DESCRIPTION		RSA	DEEMED TO BE IN	OUTSIDE RSA UNLISTED	TOTAL VALUE	TOTAL VALUE	% of total liabilities
		Convertible R'000	Non-convertible R'000	R'000	R'000	R'000	R'000	
Ĺ	1		3	4	5	6	7	8
	ROPERTY COMPANIES: LISTED			ıl ol		<u></u>	<u> </u>	0.00
			1			0		0.0%
3 -	UNLISTED (Specify in supporting statement E3.1) TOTAL - Property companies			<del>il - i</del>		1 0	il 8	0.0%
	RELATED PARTIES:			ol ol				0.0%
	UNLISTED (Specify in supporting statement E3.1)	<u> </u>	2)		<u>~</u>	<u> </u>	3	0.0%
	TOTAL - Related parties	_						
3. A	ASSET-HOLDING INTERMEDIARIES:						<u> </u>	
7	UNLISTED (Specify in supporting statement E3.1)		0 0	0	0		0	0.0%
4. C	OTHER COMPANIES:						_	
	LISTED		0		0	0	)C	0.0%
9	UNLISTED (Specify in supporting statement E3.1)		0 (				<u> </u>	0.0%
10	TOTAL - Other companies		<u> </u>	0		<u> </u>	0	0.0%
11 <b>TO</b>	TAL DEBENTURES, LOAN STOCKS & OTHER SECURITIES		0 0	0		C	0	0.0%

AUDITORS\_\_\_\_

SHEET REFERENCE NUMBER

STAATSKOERANT, 5 SEPTEMBER 2008

PUBLIC STATEMENT 2006/07/16 09:25 FINAL PRINTOUT DATE

A STATE OF THE STA			S Debi	TATEMENT E3.1 (S ENTURES, LOAN S	upporting statement TOCKS & OTHER S	it to E3) SECURITIES	i je ma				
AS A SECURITION OF THE SECURITIES OF THE SECURITION OF THE SECURIT				or A as at the end of fi	nancial period 30/0	5/2008					<b>秦拉尔士士科</b>
							CURRENT YEAR			PREVIOUS YEAR	]
DESCRIPTION	(D)ebentures, (L)oan stocks, (O)ther	Convertible (Y) or (N/A)	Year of maturity	Rate of interest %		RSA	DEEMED TO BE IN	OUTSIDE RSA UNLISTED	TOTAL VALUE	TOTAL VALUE	% of total liabilities
	(O)trier				Convertible R'000	Non-convertible R1000	R1000	R'000	Broom	Ficos	
1	2	3	4	5	6	7	8	9	R'000	R'000	12
	_										
1. UNLISTED PROPERTY COMPANIES:				0.0%			l 6			1 0	0.0%
1 •				0.0%	0		- 0		<del></del> -		
3 •				0.0%		Ö	0	. 0	0	<del>- </del>	
4 •				0.0%	0		0	0	0		0.0%
5 +				0.0%	0				0	99	0.070
6				0.0%			0	0	0		
8 •				0.0%			ŏ		<u> </u>	,	
9 SUBTOTAL				, v.v.	0	Ö	0	0	i o		
								,			
2. UNLISTED RELATED PARTIES:										ā	
10 •				0.0%	0		0		- 0		
11 •				0.0%	0		- 0		<u> </u>	<u> </u>	0.0%
13 •	<del></del>			0.0%	- 0	- 0	0	0	<u>_</u>	- 0	
14 •				0.0%	Ö	Ö	ō	0	Ö	Č	0.0%
15 • <u> </u>				0.0%	0		0		0	0	0.070
16 •				0.0%	0				0		0.070
17 • 18 SUBTOTAL				0.0%	0				0		
18 SOBIOTAL	_		_						L	<u></u>	0.0%
3. UNLISTED ASSET-HOLDING INTERMEDIARIES:											
19 •				0.0%	C	C	0	0	0	i c	0.0%
20 •				0.0%	0		0	0			0.0%
21 •				0.0%	0		0	0	0	0	0.0%
22 •		ļ		0.0%					0	0	0.078
23 •		<del>                                     </del>		0.0%	) 0						0,070
24 •		<del>                                      </del>		0.0%						<u> </u>	
25 •	-			0.0%							
27 SUBTOTAL					Č	i d		0	0	i o	
4. OTHER UNLISTED COMPANIES:											
28 •		1		0.0%				0	0		0.070
29 •				0.0%					- 9		0.0%
30 •	<del>-</del>	+		0.0%	1				l	<u> </u>	0.070
31 •	1	<del></del>		9.0%	1			0	<del>                                     </del>	<u> </u>	0.0%
33 •			1	0.0%	<del>  </del>	-	0		i	- 0	
34				0.0%				0	0		0.0%
35 •				0.0%					0	0	0.070
36 SUBTOTAL					į (	·	0	0	0		0.0%

AUDITOR	10	

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SHEET REFERENCE NUMBER

FINAL PRINTOUT DATE								100	2008/07/16 09:2
NINA, PRINTOUT DATE		DESTORS (CI	STATEMENT E4	no and antition)					* ************************************
			of ABC LIMITED d of financial perio						
	_	V X = V (* )((* * * * * * * * * * * * * * * * *	West 0 1 30 min 1 1 1 1	CURRENT YEAR			20 000	PREVIOUS YEAR	
DESCRIPTION	Any overdue capital & interest repayments	Owing at the end of this year	IN RSA	OUTSIDE RSA	INCOME IN RSA	INCOME OUTSIDE RSA	TOTAL VALUE	TOTAL VALUE	% of total liabilities
	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	
1	2	3	4	5	6	7	8	9 -	10
PROPERTY COMPANIES (Specify in supporting statement E4.1)     SECURED     UNSECURED     SUBTOTAL      RELATED PARTIES (Specify in supporting statement E4.1)	0 0			0 0 0		0	000000000000000000000000000000000000000		0.0%
4 SECURED	0			ol o	1 0	ol. o		1	0.0%
5 UNSECURED	- 0			0 0	- 0	0			0.0%
6 SUBTOTAL	0	0		0 0	- 0	0			
7 3. ASSET-HOLDING INTERMEDIARIES (Specify in supporting statement E4.1)	0	. 0		0 0	ol c	0			0.0%
4. OTHER DEBTORS (Specify in supporting stetement E4.1)									
8 SECURED	0			0 0		0			0.07
9 UNSECURED				0 0		) 0	1		0.0%
10 SUBTOTAL	0	1 0		սլ ։	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	L	<u>"</u>	0.0%

AUDITORS	

STAATSKOERANT,

5

SEPTEMBER

2008

SHEET REFERENCE NUMBER

E04,1-99-A **PUBLIC STATEMENT** FINAL PRINTOUT DATE 2006/07/16 09:25 STATEMENT E4.1 (supporting statement to E4) DEBTORS (Claims against persons and entities) of ABC LIMITED as at the end of financial period 30/06/2008 CURRENT YEAR PREVIOUS YEAR Rate of Any overdue capital & Owing at the end of INCOME OUTSIDE DESCRIPTION DETAILS OF SECURITY FURNISHED IN RSA OUTSIDE RSA INCOME IN RSA TOTAL VALUE TOTAL VALUE interest repayments this year RSA R'000 R'000 R'000 R'000 1. PROPERTY COMPANIES: Specify SECURED 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% SUBTOTAL UNSECURED 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% SUBTOTAL 2. RELATED PARTIES: Specify 0.0% 0.0% 0.0% 0.0% 0.0% 10 11 12 SUBTOTAL UNSECURED 13 14 0.0% 0.0% 0.0% 0.0% 15 16 SUBTOTAL 3. ASSET-HOLDING INTERMEDIARIES: Specify 0.0% 0.0% 0.0% 0.0% 0.0% 18 0.0% 19 20 SUBTOTAL 4. OTHER DEBTORS: Specify SECURED 0.0% 0.0% 0.0% 0.0% 0.0% 22 23 0.0% SUBTOTAL UNSECURED 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 24 25 26 27 SUBTOTAL

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EGS-99-A
PUBLIC STATEMENT

FINAL PRINTOUT DATE							PU	BLIC STATEMEN 2008/07/16 09:
PRINCE PRINCE AND ADDRESS OF THE PRINCE AND	d. 524 - A. 34	STA	TEMENT ES			C 62 54 54		20000000
		SHARES UNITS &	DEPOSITORY REC	FIPTS				
			DO LHATER	7"				
		Of A	DG LIMITED					
		as at the end of fi	nancial period 30/0	5/2008		A-7		
				NT YEAR			İ	
		<b>-</b>			1		PREVIOUS YEAR	
DESCRIPTION	IN RSA	DEEMED TO BE IN	INCOME IN RSA	OUTSIDE RSA	INCOME OUTSIDE	TOTAL VALUE	TOTAL VALUE	% of total liabilities
	D/200	RSA	71000	Dioon	RSA R'000	5000	Dinas	
	R'000	R'000	R'000	R'000	6	R'000	R'000	9
<u> </u>			<u> </u>			L	, ,	
1. SHARES								
ORDINARY:								
LISTED (by ICB supersector):							_	
1 Oil & Gas		0 0					0	
2 Chemicals		0 0					<u> </u>	***
3 Basic Resources		0 0		4	•		0	0.0
4 Industrial Goods & Services		0 0				(	0	0.0
5 Construction & Materials		0 0		1	0		0	0.0
6 Automobiles & Parts		0 0					0	0.0
7 Food & Beverage		0 0		4	. 0	<u> </u>	0	0.0
8 Travel & Leisure		0 0			0	· · · · · ·	- 6	
9 Personal & Household Goods 10 Health Care		0 0		4	0	<del>                                     </del>	0	
11 Retail		0 0			<u> </u>	<del>                                     </del>	1 0	
12 Media		0 0			0	<del></del>	il	
13 Telecommunications		0 0			0		<del>il</del>	
14 Utilities		0 0			0		0	
15 Banks		0 0			0		0	0.0
16 insurance		0 0		)	0		0	)
17 Financial Services		0 0			0		0	0.0
18 Technology		0 0			0		0	
19 UNLISTED (Specify in supporting statement E5.1)		0 0	<u> </u>		<u> </u>		0	0.0
PREFERENCE:								
LISTED (by ICB supersector):							<del>-</del>	
20 <u>Oil &amp; Gas</u>		0 0			0	9		0.0
21 Chemicals		0 0			0		0	
22 Basic Resources		0 0			0 0	<u> </u>	3	0.0
23 Industrial Goods & Services		0 0			0 0	<b>├</b> ────────────────────────────────────	3	
24 Construction & Materials 25 Automobiles & Parts	<del></del>	0 0	·		n 0		<del></del>	0.0
26 Food & Beverage	<del></del>				0 0	<del></del>	<del>-</del> 0	
27 Travel & Leisure	+		<u> </u>	•	0		3	0.0
28 Personal & Household Goods	<del>                                     </del>	0 0			0	1	<u> </u>	
29 Health Care	_	0 0			0		o o	0.0
30 Retail		0	,	0	0	(	o o	0.0
31 Media		0 (		0	0 0		0	0,0
32 Telecommunications		0 (		<u> </u>	0		0	0.0
33 Utilities		0 (		<u> </u>	0 0			0.0
34 Banks		0 (			0 0		<u> </u>	0.0
35 Insurance				9	0 0	<del></del>	0	
36 Financial Services			<u> </u>	-	0	<del></del>		
37 Technology			, <u> </u>	<u> </u>	0	<del> </del>	9	
38 UNLISTED (Specify in supporting statement E5.1)		0 0			0 0	<del>                                     </del>	0	
39 TOTAL		<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u>41</u>	1 0.03

SHEET REFERENCE NUMBER

FINAL	PRINTOUT DATE								2008/07/16 09:25
			SHARES, UNITS &	TEMENT ES DEPOSITORY REC BC LIMITED nancial period 30/06	4.89.3				
				CURRE	NT YEAR			PREVIOUS YEAR	
	DESCRIPTION	IN RSA	DEEMED TO BE IN	INCOME IN RSA	OUTSIDE RSA	INCOME OUTSIDE RSA	TOTAL VALUE	TOTAL VALUE	% of total liabilities
		R'000	R'000	R'000	R'000	R'000	R'000	R'000	
	1	2	3	4	5	6	7	8	9
	2. SHARES IN PROPERTY COMPANIES								
40	Unlisted ordinary (Specify in supporting statement E5.1)		0 0	0	(	0 0		0	0.0%
41	Unlisted preference (Specify in supporting statement E5.1)		0 0	0		0		0	0.0%
42	TOTAL		0 0	0		0		0	0.0%
	3. SHARES IN RELATED PARTIES							1	
43	Unlisted ordinary (Specify in supporting statement E5.1)		0 0			<u> </u>	<u> </u>	0	0.0%
44 45	Unlisted preference (Specify in supporting statement E5.1) TOTAL		0 0	0		0 0		0	0.0%
	4. SHARES IN ASSET-HOLDING INTERMEDIARIES <sup>5</sup>							· ·	
46	UNLISTED ORDINARY (Specify in supporting statement E5.1)		0 0			<u> </u>		0	
47	UNLISTED PREFERENCE (Specify in supporting statement E5.1)		0 0			0 0	<u> </u>	0	0.0%
48	TOTAL		0 0	0		0 0		0	0.0%
	5. DEPOSITORY RECEIPTS							a .	
49	Listed		0 0			• •		0	
50	TOTAL		0 0	0		0 0		0	0.0%
	6. LINKED UNITS & UNITS IN COLLECTIVE INVESTMENT SCHEMES					-		1	9.00
51	Units in money market funds		0 0			0 0	<u> </u>	0	0.0% 0.0%
52	Units in collective investment schemes in property shares		0 0	0	1	<u> </u>	<u> </u>	<u> </u>	0.0%
53	Linked units & units in collective investment schemes								
54	Listed		0 0			0 0			0.0%
55	Unlisted (Specify in Supporting statement E5.1)		0 0			0 0	<u></u>	0	0.0%
56	TOTAL		0 0	10	<u> </u>	<u>U</u> 0		0	0.0%
						_		7	
57	TOTAL SHARES, DEPOSITORY RECEIPTS & UNITS		0 0	0		0) 0		0	0.0%
								_	

AUDITOR	S	

52

SHEET REFERENCE NUMBER

		201000000000000000000000000000000000000	E5.1 (supporting sta	000000000000 <del>0000000000000000000000000</del>				
		SHARES, U	NITS & DEPOSITOR'	Y RECEIPTS				
			of ABC LIMITED		d grant to			
		as at the er	nd of financial period	30/06/2008	<u> </u>			
			CURREN	T YEAR			PREVIOUS YEAR	
DESCRIPTION	IN RSA	DEEMED TO BE IN	INCOME IN RSA	OUTSIDE RSA	INCOME OUTSIDE	TOTAL VALUE	TOTAL VALUE	% of total liab
		RSA	1		RSA			
	R'000	R'000	R'000	R'000 5	R'000	R'000	R'000	
	2	3	4	<u> </u>	1 0 1	7	8	9
SHARES (excluding those in property companies, related parti	ies and asset-holding	intermediaries)						•
(i) UNLISTED ORDINARY SHARES:		0 0	ol ol		lo lo		0	
. —		0 0					- 0	
SUBTOTAL		0 0	Ō		o o	0	0	
(ii) UNLISTED PREFERENCE SHARES:								
(ii) OHLISTED FREFERENCE SHARES:		0 0	0		ol ol		0	
•		0 0	0	(	0		Ō	
SUBTOTAL	·	0 0	0		0	. 0	0	
SHARES IN PROPERTY COMPANIES								
(i) UNLISTED ORDINARY SHARES:								
·		0 0			0	0		
• CURTOTAL		0 0				0	0	
SUBTOTAL		0 0	0		이 에		0	<b>!</b>
(ii) UNLISTED PREFERENCE SHARES:								
•		0 0			0	0	. 0	
SUBTOTAL	_	0 0			0 0		0	
<u> </u>		<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>			<u> </u>
SHARES IN RELATED PARTIES								
(i) UNLISTED ORDINARY SHARES:			-1				n	
:		0 0			0 0	0	0	
SUBTOTAL		0 0				0	Ö	
		-1-			,		1	_
(ii) UNLISTED PREFERENCE SHARES:					-1		<del>-</del>	
<u> </u>		0 0			0 <u>0</u>	0	0	
SUBTOTAL	_	0 0				0	0	
		•					-	_
SHARES IN ASSET-HOLDING INTERMEDIARIES (i) UNLISTED ORDINARY SHARES:								
(I) ONLISTED ONDINART SHARES.		0 0	1 0		oi o	0	1 0	
•		0 0	0		0 0	0	0	
SUBTOTAL		0 0	0		0 0	0	0	
(ii) UNLISTED PREFERENCE SHARES:								
• ONLIGICO FREFERENCE SHARES.		0 0	0		ol o		1 0	
•	_	0 0	0		0 0			
SUBTOTAL		0 0	0		0 0	0		
UNLISTED LINKED UNITS & UNITS IN COLLECTIVE INVE	STMENT SCHEMES	<b>.</b>						
SUPPLIES CHAILD GRADING OF CHAILD HAVE	CIMENT CONEME	ol c	0		0 0		1 0	1
•		0 0			0 0	0	0	
SUBTOTAL		ol c	0		0 0		0	

SHEET REFERENCE NUMBER												PUBLIC	EON-OS-
FRAL PRINTOUT CATE				S LAND AND Buil or as at the end or	TATEMENT E6 LOINGS - FREEH FABC LIMITED Iffinancial period	OLD ONLY.		T				I -	2008/tg7/16 09:2
		TATUTORY VALU			VALUATION	S DONE BY	_	Cost of land.	· ·			Imputed rental	Expenses
LOCATION AND DESCRIPTION		This year		Previous year	INDEPENDEN		Year acquired	buildings and	Book value	Amount of encumbrances	Gross income from letting	value of space	Including maintenances
	Total	In RSA	Outside RSA	total	Year of valuation	Value per valuator		improvements				occupied	and taxes
<del>-</del> 1	R'000	R'000	R'000	R'000	6	R'000	8	R'000	R'000	R'000	R'000	R'000	R'000
	-			<u> </u>	1 0 1				10	1 12	12	13	1 14
1. WHOLLY OWNER OCCUPIED							1 -			_	1		r
1	0	0			1	0		<u>۱</u> ۷		0		0	
3	o o	0	0	Č	0	0	_ 0	0		0		0	
4	- 0				0	0		7		0			<u> </u>
5		0				0	<del> </del>	1 4			•	<u> </u>	
7 6	0	0	C		0	C				0	1	0	
	0	0	0		0	0			· · · · · ·	0	-	0	<del>}</del>
9		0			<u> </u>					0	j		
2. WHOLLY LET					,					_		,	
11	9			-		0					0	-	
12	- 0	- 0					<u> </u>	' '		0	0		
14	0	0		<u>'</u>	<del>'</del>		<del></del>			<u> </u>	0		
15 16	0	0		<u>'</u>	0		<del></del>				0	1	
	9	- 0		<del>31 - 3</del>	0					0	0	1	
18	0	0		) (	0					0	0		
19	0	0		<del>\</del>	<del>' </del>					1			
3. PARTLY OWNER OCCUPIED AND PARTLY LET	<u> </u>	. 0		<u> </u>	<u> </u>		,, ,	,, .,		,	<u> </u>	J	
	0	0		,	o} o		0	0	(	0	٥	0	
21 22 23	0	0			0		<u> </u>	0					
23	9	0		) (	0 0			0		0	0		
24 25	0	0		<del></del>	0			_			0		
26	0	0			0		0	0		0	_0	0	
27	0	0			0				. (				1
26	0	0	-		0 0		) <u>0</u>						<b>-</b>
30	0	0			0 0		) 0			0	<del></del>		
31 4. TOTAL LAND AND BUILDINGS	0	0		0	o <u> </u>		<u> </u>	o) o		0	0	0	J

AUDITORS

SHEET REFERENCE NUMBER

E07-99-A

PRINTOUT DATE						BLIC STATEM 2008/07/
FIXE	STATEME D ASSETS AND SUMMAR Of ABC LIN	NT E7 NES OF OTHER NITED	ASSETS			
			908		AND THE SECOND SECOND	Asserted to the second
1	2	3	4	5	6	7
<del>-</del>	St	atutory values at	year end	_		
FIXED ASSETS		This year		Previous year totals	Acquired during the year	Rate of depreci
, , , , , , , , , , , , , , , , , , , ,	Total	In RSA	Outside RSA		•	
	R'000	R'000	R'000	R'000	R'000	%
1. Computer equipment	0		0 0	0	0	
2. Other equipment (specify)	0		0 0	0	0	
	0		0 0		0	
	0		0 0	0	0	
	0		0 0		0	
3. Motor vehicles	0		0 0		0	
TOTAL FIXED ASSETS	0		0 0	0	0	
				values at year end		
ASSETS - TRANSFERRED FROM OTHER STATEMENTS	Statement -		This year	0.444.004	Previous year totals	
		Total <i>R'000</i>	In RSA R'000	Outside RSA R'000	R'000	
PROPERTY INVESTMENTS					,,,,,,	
Quoted property companies						1
Debentures	E3			<u>o</u>		
Debtors / loans	<u>E4</u>		0 0000000000000000000000000000000000000	, ,	<u> </u>	!
Shares 2. Unquoted property companies	<u>E5</u>		0 0	0		
Debentures	E3		ol	le de la companya de	0	1
Debtors / loans	E4		0	o	0	
Shares	E5	•	o	0	0	
3. Units: Collective investment schemes in property shares	E5		0	0:	0	
4. Land and buildings	E6		0	0	0	
TOTAL PROPERTY INVESTMENTS			<u>o                                       </u>	0	0	]
To the first and						
RELATED PARTIES AND ASSOCIATED ENTITIES	[ E2 ]		<u> Alasaassaassaassaasaa</u>	∦oosoooooooooo		1
RELATED PARTIES AND ASSOCIATED ENTITIES  Debentures	E3					
RELATED PARTIES AND ASSOCIATED ENTITIES	E3 E4 E5		0		0	

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SHEET REFERENCE NUMBER

E08-99-A

FINAL PRINTOUT DATE			FODL	2008/07/16 09:25
	STATEMENT E8 DERIVATIVES of ABC LIMITED of financial period	130/05/2008		200807716 08:25
ASSET CLASS	Fair Value of Physicals (Excluding derivatives)	Fair value of derivatives	Derivatives Exposure	Effective Exposure (2+3+4)
1	R'000	<u>R'00</u> 0	<i>R'000</i>	<u>R'000</u> 5
	2	3.	4	
1. SAFEX Futures				
1 Equity Market	0	0	0	
2 Capital Market	0	0		
3 Money Market 4 Other (Specify in supporting statement E8.1)	0	0	0	
5 Subtotal	0		0	
	<u> </u>			Ŭ
2. SAFEX Options				
6 Equity Market	0	0	0	
7 Capital Market	0	0	0	0
8 Money Market 9 Other (Specify in supporting statement E8.1)	0	0	0	
9 Other (Specify in supporting statement E8.1) 10 Subtotal	0	0	0	0
TO Subtotal	<u></u>			
11 Total SAFEX	0	0	0	0
3. OTC Forwards				
12 Equity Market	0	0	0	0
13 Capital Market	0	0	0	0
14 Money Market	0	0	0	0
15 Other (Specify in supporting statement E8.1)	0	0	0	0
16 Subtotal	0	0	0	0
4. OTC Options				
17 Equity Market	0	0	0	0
18 Capital Market	0	0	0	0
19 Money Market	0	0	0	0
20 Other (Specify in supporting statement E8.1)	0	0	0	0
21 Subtotal	0	0	0	0
22 Total OTC	0	0	0	0
5. Swaps				
23 Interest rate	0	0	0	0
24 Money Market	0	0	0	0
25 Other (Specify in supporting statement E8.1)	0		0	
26 Total Swaps	0	0	0	0
27 6. Other (Specify in supporting statement E8.1)	0	0	0	0

<b>AUDITORS</b>		

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SHEET REFERENCE NUMBER

PUBLIC STATEMENT

AL PRINTOUT DATE				2008/07/16
A STATE OF THE STA	STATEMENT E8.1 (suppor DERIVATI of ABC LIN as at the end of financia	ting statement to E IVES AITED	3)	· A. C. C. S. S. S. C.
	as at the end of financia	I period 30/06/2008	4	Professional Control
ASSET CLASS	Fair Value of Physicals (Excluding derivatives)	Fair value of derivatives	Derivatives Exposure	Effective Expos (2+3+4)
	R'000	R'000	R'000	R'000
1	2	3	4	5
1. SAFEX Futures Other				
•	0	0	Ö	
•	0	0	0	
·	0	0	0	
·	0	0	0	
Subtotal	0	0	. 0	
Subtotal				
2. SAFEX Options Other				
•	0	0	<u> </u>	
	0	0	· 0	
•	0	0	0	
<u> </u>	0	0	0	
Subtotal	0	0	0	
3. OTC Forwards Other	01	0		
	0 0 0	0 0 0	0 0 0	
Other	0 0 0	0 0 0	0 0 0	
Other	0	0 0 0	0 0 0	
Other  Subtotal  4. OTC Options Other	0 0 0 0	0 0 0 0	0 0 0 0 0 0 0 0 0	
Other  Subtotal  4. OTC Options Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0 0 0	
Other  Subtotal  4. OTC Options Other	0 0 0 0 0	0 0 0 0 0	0 0 0 0 0	
Subtotal 4. OTC Options Other	0 0 0 0 0 0	0 0 0 0	0 0 0 0 0 0	
Other  Subtotal  4. OTC Options Other	0 0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	
Subtotal  4. OTC Options Other	0 0 0 0 0 0	0 0 0 0 0	0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  Subtotal	0 0 0 0 0 0 0	0 0 0 0 0	0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other  Subtotal  5. Other Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other  Subtotal  5. Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other  Subtotal  5. Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other  Subtotal  5. Other Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	
Subtotal  4. OTC Options Other  Subtotal  5. Swaps Other  Subtotal  5. Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

AUDITORS \_\_\_\_\_

SHEET REFERENCE NUMBER ST2008

		STATE SS: COMPARISON of A	STATEMENT ES (Total) ETS AND LIABILITIES: COMPARISON OF STATUTORY TO SHAREHOLDERS' V of ABC LIMITED	SHAREHOLDERS:	VALUES		TEG SULPROS
	the same of the state of the same of the s	as at the end of financial period 30/06/2008	"Dancial Decide Source	2008	BLOOK TO LAND MAN	C. A. N. Charlest Man. Toward	WESSELL TABLE TOTAL
		11	THIS	THIS YEAR	Andrew State of the State of th	1881 - 0.000 - was 1.000 - 70	Company and the little of the company of the compan
		STATUTORY V	STATUTORY VALUES PER SCHEDULE 2 OF THE ACT	E 2 OF THE ACT	Values per		PREVIOUS YEAR
DESCRIPTION	Supporting statement, number	Total	In RSA	Outside RSA	shareholders' statements	Differences	TOTAL
		R'000	R'000	R'000	R'000	R'000	R'000
ţ	2	8	4	5	9		8
ASSETS							
Cash			0	0	0		0
Krugerrands							0
Outstanding short-term premiums			0		ő		
Reinsurance deposits					0		0
Mortgage bonds					0		0
Long term (investment) policies-linked					0		
Long term (investment) policies-non linked							
Other assets			0	0	0	0	
Balances and deposits with banks	Ē				0		
Securities and Loans	E2				0		0
Other Securities	ន				0		0
Debtors (Claims against persons & entities)	E4			0	0		
Shares, depository receipts and units	ES				0		0
14 Land and buildings	Ee			0			
15 Fixed assets	E7				0		0
16 TOTAL ASSETS			0 0	0	0		
LIABILITIES							
Due to other insurers and reinsurers				0	0		0
18 Reinsurance deposits					0		0
19 Bank overdraft			0	0	0		0
20 Provision for current and deferred taxation					0		
Contingent liabilities					0		0
Other liabilities			0		0		
23 Uneamed premium provisions - net	D3						٥
24 Outstanding claims - net	B		o lo	0	0		0
25 IBNR - Claims incurred but not reported	D3						0
Contingency reserve	23						0
Unexpired risk provision	D3						0
28 TOTAL LIABILITIES			0	0	Ö		0
***************************************				•	•		

STAATSKOERANT, 5 SEPTEMBER 2008

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SHEET REFERENCE NUMBER

E09.1-99-A

2008/07/16 09:25

# **PUBLIC STATEMENT**

FINAL PRINTOUT DATE

STATEMENT E9.1 (Total)

# DIFFERENCES BETWEEN ASSETS AND LIABILITIES: COMPARISON OF STATUTORY TO SHAREHOLDERS' VALUES

# of ABC LIMITED

as at the end of financial period 30/06/2008

1 2 3 4

ſ	Items with differences in statutory and shareholders' value	es Statutory value	Shareholders' value	Correspond with difference in Statement E9
1	•	0	0	0
2	•	0	0	0
3	•	0	0	0
4	•	0	0	0
5	•	0	0	0
6	•	0	0	0
7	•	0	0	0
8	•	0	0	0
9	•	0	0	0
10	•	0	0	0
11	•	0	0	0
12	•	0	0	0
13	•	0	.0	0
14	•	0	0	0
15	•	0	0	0
16	•	0	0	0
17	•	0	0	0
18	•	0	0	0
19	•	0	0	0
20	•	0	0	0
21	Sub-total	0	0	0

AUDITUNO	<b>AUDITORS</b>			
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4. Other related parties

28 29 30

32 33 34 Total

35 OVERALL TOTAL

SHEET REPERENCE NUMBER

PUBLIC STATEMENT

				as at	STATEMENT RELATED PARTY B of ABC LIMIT the end of financial p	ALANCES			<b>.</b>			
•		1			PER SHAREHOLD	RS' STATEMENTS	_	INC	LUDED AS ASSETS IN	STATEMENTS E3, E4	& E5	
RELATED PARTY	Main business activity	Country registered	Percentage holding	Total assets	Net income after tax	Return on assets	Net asset value	Ordinary shares	Preference shares	Debentures/other	Inter-company balances	TOTAL EXPOSI
				R'000	R'000	%	R'000	R'000	R'000	R'000	R'000	R*000
1	2	3	4	5	6	7	8	9	10	11	12	13
1. Subsidiaries												
		1	0.0%		nl n	0.0%	n	) .	-			n
			0.0%		0 0	0.0%			i ö	1	<del>                                     </del>	5
			0.0%	. (	0 0	0.0%			0	Ö		5
		1	0.0%	£ (	0 0	0.0%	0		O	0		0
			0.0%	<b>∅</b>	0 0	0.0%	0		Ð	0		ol
			0.0%	<u> </u>	0 0	0.0%			0	0		ol .
<u> </u>			0.0%		0 0	0.0%			0	0		D]
			0.0%		0	0.0%			0	1 0		0
Total			L		0	0.0%		<u> </u>	<u>q</u>			
2. Associates												
2. ASSOCIATES		_	0.0%		nl o	0.0%		1 0	) 0	1 0		nl
		<del>-</del>	0.0%		a 0	0.0%	- 0		1 0			0
			0.0%		0 0	0.0%	C		-	0		3
			0.0%		0 0	0.0%			0	0	(	
			0.0%		0 0	0.0%			0	0		0
			0.0%		0 0	0.0%		0	0			p
			0.0%		0 0	0.0%	C		0	0		)
			0.0%		00	0.0%			0	0	l l	o l
Total				_	<u>0</u>	0.0%	1 0	(	0	0	(	ol .
3. Holding Companies		1	0.0%		0 0	0.0%		1 .	1 0		,	n!
		<del></del>	0.0%		0 0	0.0%	<u> </u>	<del>                                     </del>	, ,	, ,	,	1
			0.0%		0 0	0.0%			0 0	n		5
5. roung companies		1	0.0%		0 0	0.0%	i	1	i	, o		
<del></del>	-	İ	0.0%	_	0 0	0.0%	1 0		0	0		ol
		1	0.0%		0 0	0.0%			0	0		ol
			0.0%		0 0	0.0%		i	0	0		)
		İ	0.0%		0 0	0.0%	1		0	6		<b>3</b>
Total					0 0	0.0%		1 6	· ·		,	1

0.0% 0.0% 0.0% 0.0%

0.0%

0.0%

0.0% 0.0% 0.0% 0.0% 0.0% 0.0%

AUDITORS				

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SHEET REFERENCE NUMBER

F01-99-A

# PUBLIC STATEMENT

AUDITORS\_\_\_\_\_

INAL I	PRINTOUT DATE		2008/07/16 09:25
	STATEMENT F1 SURPLUS ASSETS, NET ASSET RATIO AND of ABC LIMITED as at the end of financial period 3	SOLVENCY MARGIN	
( # K.X.)	as acute end of intanciar period si	2	3
,	SURPLUS ASSETS AND NET ASSET RATIO STATUTORY BASIS	World-wide R'000	In RSA R'000
1	1. Premiums less all reinsurances		
2	(i) Twelve months preceding financial year end	0	C
3	(ii)Twelve months preceding previous financial year end.	0	(
4	(iii) The greater of the two	0	(
7	(ii) Current minimum value (iii) 15% of 1(iii)	3,000	3,000
6 7	(i) Enter current minimum value in 2(ii).  (ii) Current minimum value	3,000	3,000
8			(
9	(iv) The greater of 2(ii) or 2(iii)	3,000	3,000
10	3. Net assets - Statutory (i) Assets  Domestic		
11	Foreign, deemed to be domestic	[0000000000000000000000000000000000000	(
12	Total assets	0	ŗ
13 14	(ii) Less: Liabilities (iii) Sub total - net assets	0	<u> </u>
14	(III) Sub total - Het assets		`
15	(iv) Less: Requirement for additional assets per 2(iv)	3,000	3,000
16	SURPLUS / SHORTFALL OF ASSETS	-3,000	-3,000
17	Net assets as a % of net premiums - this year [3(iii) / 1(iii)]	0.0%	0.0%
18	Net assets as a % of net premiums - previous year	0.0%	0.0%

œ	
2	
×	
-	
S	

			SPREAD OF	3	USSETS (INCLUDING FOREIGN ASSETS DEI of ABC LIMITED as at the end of financial period 30/04/2008	SPEEJU OF COMESTICASSETS (NCL UDING FOREIGN ASSETS DEENED TO BE DOMESTIC)  6.4 Apr. LIMITED  6.5 If the end of finitial period showtdog	ETS DEEMED TO	BE DOMESTIC)			
1	2	3		40	9	7	8	6	10	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12
	2002					Marimum adn	Maximum admissible for each item of this statement	m of this statement		NOTE - ITEMS 4 + 5, 13 + 14 :	
Domestic assets must exceed the following:	900	N 13	ADD Assels of asset-holding		Subtotals: Assets	aq.	Percentages	T T	Admitted for each ttern (the lesser of	Admitted values are	
	3,000	deemed to be	intermedianes and linked Investment	=		Perron 3 to the	Distrancefore	l otal domestic llabifdes * greater of the 2		the previous column	R'000
2 Asset-holding intermediarles' liabilities 3 Total domestic liabilities	3,000	запелен д	Section	Auedord		P P	nevig	percentages		Nems 4+5: IndMdual	
4.0		R'000	R'000	R:000	R'000	%	%	R'000	R'000	1. 1. 3	
R 4 Moderate bonds	L	-	70		0		7600	10	-	memes 3-4-14:   netherinal	
				,		0.09					
8 3. Any other debtors*		0		0	0				0	•	
9 Sub total		0			0	25.0%		750	0	[6]	
0. 4 Shares - Ordens and consodials detectives - Ordens		0				760 05	7600				
									0	CALCULATION OF FURTHER EXCESSES AND FINAL ADMITTED	
12 Sub total						·	ı	1,950			R.000
13 R. Letod contrittocacharse . Ensalva desmod to be Dom	<b>!</b> —	-			0	15.0%	%00	450	0	1 if liems 5+14+18+20 exceed 15% of listalities the excess is	
		0	0	0		ŀ					
		0			0		9600		0	2 if the admitted value of items 1 to 12	
		0	0		0				0		
		0					90.0			of total domestic fiabilities, the excess is	<u> </u>
18 11. Other equipment and motor vehicles		0			0	2.5%			0	C.	
19 12. Investment policies-non linked		0	9		0	ا		0	0	[0]	
20 Total of items 6 to 19		0	0	0	0	70.0%	60.0%	3,825	0		
24 42 44 - 12 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	L	٦		-		2 208	3600			4 Sumins of overall admitted assets over total domestic liabilities	200 E-
22 14. Margin deposits - Foreign, deemed to be Domestic		0			0			75		1	
		0					0.0%	75	0	[6]	
2. 62 Peak	الم	٦	•	ľ		,	,			Γο	
					0	10.0%	8600	6			
		0						0	9	le <sup>1</sup>	
27 18. Bank balances+deposits - Foreign, deemed to be Dom.		0				15.0%	960.0	j#	3	ol	
		0			0					CODEACH CONTROL CANTED FROM	
		9			0 0	15.0%	80.0	450		OF REALING RELUINGMENTS	
30 Total of flems 21 to 29		5				5					
24 July 11 July 12 Jul	-	[				12				F	

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SHEET REFERENCE NUMBER

FINAL PRINTOUT DATE

G01-99-A

**PUBLIC STATEMENT** 

STATEMENT G1 GENERAL INFORMATION of ABC LIMITED as at the end of financial period 30/06/2008

1. Has any change been made during the year under review to the Memorandum and Articles of Association or equivalent document by which the insurer is constituted and in accordance with which it conducts its insurance business?

If "YES", attach a certified copy of the document as amended Or indicate if it has already been submitted.

#### SHARE CAPITAL

- 2. Please attach a diagram of the entire group structure, showing percentages of shareholding and names of ultimate shareholders as at the end of the period under review. Include percentages at the end of the previous period in brackets.
- 3. Furnish the name of the body or person who controls the insurer. Is this the same body or person as at the end of the previous year?
  - If "NO" attech details.
- 4. Is the body or person who controls the insurer incorporated or resident in the RSA?
  - If "NO", attach details.
- 5. Does the insurer hold, directly or indirectly, 25% or mora of the issued share capital of another company, incorporated in or outside the RSA carrying on insurance or banking business in or outside the RSA?
  - If "YES", state the name(s) of the insurer(s) or bank(s) and particulars of share holding. Attach a copy of the latest audited accounts and balance sheet if the institution is not registered to carry on insurance or banking business in the RSA.
- 6. Does the insurer have shares in the holding company?
  - If "YES", please refer to Directive 141b(i) (Short-term)

	Number of shares	Shares as a % of the total issued shares of
(1) Total issued shares of holding company	0	holding company
(2) Total shares held by insurer and group undertakings: (Sum of (e) to (d) below)	0	0.0%
(a) Shares held in shareholders' fund (Approved under Sec 33(1)(e))	0	0.0%
Shares held in share incentive schemes of the insurer and its subsidiaries (Approved under Sec 33(1)(e))	0	0.0%
Shares held by the subsidiaries of insurer including asset holding intermediaries and trusts (Approved under Sec 33(1)(e))	0	0.0%
(3) Shares held by other subsidiaries of the holding company	0	0.0%
(4) Total number of shares held by the subsidiaries of the holding company ((2) + (3	)) 0	0.0%

# **ASSETS AND LIABILITIES**

- 7. Has there been any direct or indirect borrowing of assets?
  - If "YES", attach details.
- 8. Has any guarantee or suretyship, otherwise than by means of an insurance guarantee policy, been given as described in sections 31 and 33 of the Act?
  - If "YES", attach details
- 9. Do the liabilities include all contingent liabilities, guarantees and commitments?
  - If "NO", attach details.
- 10. Are all the assets or title thereto held by the insurer?
  - If "NO", attach details.
- 11. Are all the assets or title thereto held in the RSA or in a manner approved by the Registrar?
  - If "NO", attach details.
- 12. Have you satisfied yourselves that all the requirements in Directive 126 pertaining to the approval granted to enter into agreement with the attached nominee companies have been met?
  - Attach a list of nominee companies and provide full details
- 13. Have any assets been encumbered?
  - If "YES", attach details.

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FINAL PRINTOLIT DATE	2008/07/18 09:25
STATEMENT G1 GENERAL INFORMATION of ABC LIMITED as at the end of financial period 30/06/2008	in the second
<ul><li>14. Has any script been lent out by the insurer i.t.o. script lending transactions?</li><li>If "YES", attach details.</li></ul>	
EXCHANGE RATE  16. Have ruling year-end rates of exchange been applied in converting foreign assets and liabilities?  * Attach details.	
<ul> <li>Are foreign denominated liabilities substantially covered by appropriate foreign denominated assets?</li> <li>If "NO", state the amount of the mismatch in R'000.</li> </ul>	0
AUDIT COMMITTEE  18. Has an audit committee been appointed for the insurer?  * If "NO", attach details.	
19. Did the audit committee convene during the financial period?  If "YES" how many times.  If "NO" provide full reasons why no meetings were held.	
SHARE-BASED PAYMENTS 20. Please provide the liability in respect of cash-based equity share payments (R'000)	0
CELL CAPTIVE INSURERS  21. Do you write any insurance business as part of a structure in terms whereof shares or any similar instrument is issued to clients or persons by the insurer or another group undertaking for purposes of issuing and underwriting specific kinds of policies in such structure?	
If yes, please complete Statement I	
22. Have you or any related party issued shares or similar instruments for the purpose stated in the previous question to another locally registered short-term or long-term insurer? If yes, please provide the name of such insurer.	
CHAIRMAN DIRECTOR	R
PUBLIC OFFICER DATE	
AUDITORS (initial)	

**ST2008** Page 61 of 97

SHEET REFERENCE NUMBER

G02-99-A

FINAL PRINTOUT DATE

# CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

2008/07/16 09:25

# STATEMENT G2 RISK REPORT ISSUED BY DIRECTORS of ABC LIMITED as at the end of financial period 30/06/2008

1.	Are the insurer's internal controls and systems designed to provide reasonable assurance as to the integrity and reliability of the published financial statements?  It "NO", provide particulars.	
2.	In all material respects, are such controls and systems are based on established written policies and procedures and implemented by trained, skilled personnel, whose duties have been segregated appropriately?  • If "NO", provide particulars.	,
3.	Are the controls monitored by the insurer and are all employees required to maintain the highest ethical standards in ensuring that the insurer's business practices are conducted in a manner that, in all reasonable circumstances, is above reproach?  • If "NO", provide particulars.	
4.	Has anything come to the attention of the directors to indicate that any material malfunction in the functioning of the aforementioned controls, procedures and systems has occurred during the period under review?  • If "YES", provide particulars.	
5.	Is there any reason to believe that the insurer will not be a going concern in the year ahead?  If "YES", disclose and explain reasons.	
6.	Has there been any developments after year-end which may have a material impact on the financial soundness of the insurer?  • If "YES", provide particulars.	
7.	Did the Board meet at least quarterly?  • If "NO", how frequently have they met.	
8.	Are at least half of the directors on the Board non-executive?  * If "NO", provide particulars.	
	CHAIRMANDIRECTOR	
	PUBLIC OFFICER DATE	
	AUDITORS (initial)	

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SHEET REFERENCE NUMBER

G03-

CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC FINAL PRINTOUT DATE STATEMENT G3 RISK REPORT ISSUED BY MANAGEMENT of ABC LIMITED as at the end of financial period 30/06/2008 **GENERAL** Was business materially affected in an adverse manner by changes in the legal/social/business environment? If "YES", provide particulars. Do the provisions for intimated and unintimated claims include all expected amounts to dispose of such claims? If "NO", provide particulars. Has any person to your knowledge received or dealt with your premiums otherwise than in terms of Regulation 4 to the Act? If "YES", provide particulars. RISK MANAGEMENT Is a risk management function operative? If "YES", provide a brief description. If "NO", explain how risks are managed. List the insurer's five major risk areas. Attach a summary of the insurer's risk management procedures. TECHNICAL PROVISIONS AND INTERNAL SYSTEMS Is sufficient reliable data available for the calculation of technical provisions? If "NO", provide particulars. Are the bases for calculating technical provisions as in the past, and appropriate under present conditions? If "NO", provide particulars. Has an independent person verified the adequacy of technical provisions? If "YES", please provide name and qualification. If "NO", explain how adequacy is verified. Are future direct claims handling expenses included in claims provisions? If "NO", how were they treated? 10. Has the effect of inflation been allowed for in claims provisions? Has discounting been applied in arriving at claims provisions? If "YES", provide particulars. Approximately what percentage of your business is "long tail" - claims notified/settled after more 12. than 1 year?

14. If an Unexpired Risk provision was established, how were premium rates and claims experience taken into account in deciding on the establishment of an Unexpired Risk provision?

13. Are the premium rates for all classes of business sufficient to cover the risk profile of the

If "NO", provide particulars.

15. Where exposure to risk is not proportional to the term of the policy, indicate how this was dealt with in the calculation of the Unexpired Risk Provision.

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FINAL PRINTOLIT DATE

# CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

		2008/07/16 09:25
	STATEMENT G3 RISK REPORT ISBUED BY MANAGEMENT Of ABC LIMITED as at the end of financial period 30/06/2008	7
DED	/ATIVES	
16.	Does the insurer make use of derivative instruments?	
	Board of Directors	
(a)	Has the Board of Directors approved the use of derivative instruments including their strategic use, related procedures and monetary exposure limits?  If "YES", please provide details.  If "NO", give reasons.	
(b)	Has the Board of Directors documented clearly the objectives and policies for use of derivatives and does it monitor their use to ensure that it is in line with the objectives & policies?	
	<ul> <li>If "YES", provide a short description of the objectives and policies, the mandate provided to the investment manager and procedures to follow when changes are required to the mandate.</li> </ul>	
(c)	<ul> <li>If "NO", give reasons.</li> <li>Is the approval to use derivative instruments specific as to the purpose, (e.g. hedging or trading)</li> </ul>	
	product type and market and credit risk limits?	
(d) (e)	Does senior management formally approve the overall exposure position?  Does the insurer make use of the full time services of an investment manager for this purpose?	
	(Internal or external investment manager)  Provide details.	
	Systems & control	
<b>(f)</b>	Is the person responsible for the control of the derivatives sufficiently independent of the day-to- day operators to ensure efficient control?	
(~ <b>\</b>	f "NO", give reasons.	
(g)	Are appropriate systems in place to enable the frequent and effective monitoring of positions and able to cope with the volumes and volatility of transactions undertaken?	
	<ul> <li>If "YES", provide a short description of the monitoring process and systems.</li> <li>If "NO", give reasons.</li> </ul>	
(h)	Has the insurer established appropriate and Independent performance measures to analyse and monitor risks of all transactions undertaken individually and in aggregate for its derivative	
	activities, including interest rate risk, foreign currency risk, fraud, error, unauthorised access to confidential information and other operational risks?	
	• If "NO", provide details.	
(i)	Is the insurer satisfied that sufficient control procedures have been put in place, including	
	independent agreement and reconciliation positions, independent checking of prices, agreements of manager's profits to accounting profit, appropriate authorisation where dealing limits have been exceeded, etc?	
(i)	<ul> <li>If "NO", provide details.</li> <li>How often does internal audit reviews of derivative activities take place?</li> </ul>	
(k)	How frequently are derivative positions marked to fair or market value?  Are adequate controls in place such that market data used to value derivatives is relevant,	
(1)	accurate and obtained on a timely basis from a reliable source?	
(m)	<ul> <li>If "NO", provide details.</li> <li>Are valuation models which are used to value the open positions and derivative instruments</li> </ul>	
	tested and approved and amendments to the programmes controlled and do models include appropriate tests for robustness of the portfolio to stress changing investment conditions?	
	• Provide details.	
(n)	Over the counter derivatives (OTC)  Does the incurer invest in OTC (over the counter) derivative instruments?	
(n)	Does the insurer invest in OTC (over-the-counter) derivative instruments?  If "YES", provide:	
	<ol> <li>A description of OTC valuation methods used including implied volatility and procedure for evaluation of the counterparties.</li> </ol>	

(ii) The ten largest OTC traders used and aggregate exposure to each counterparty.

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FINAL P	RINTOUT DATE		INTIAL STATEMENT NOT	2008/07/16 09:25	
		STATEMENT G3 PORT ISSUED BY MA of ABC LIMITED end of financial perio	NAGEMENT		
	Credit Paris et				
(0)	Credit Derivatives  Does the insurer invest in credit derivative  If "YES", provide:				
(p)	What is the purpose of your company's in Provide details:				
( <b>p</b> )	What does your company see as the key risks and pitfalls inherent in its Credit Risk Transfer activities?  * Provide details:				
<b>(r)</b>	What are your company's credit risk mana  * Provide details:	agement systems / proced	lures?		
(s)	Does your company have staff with appropactivities?  Provide details:	priate skill levels dealing	with Credit Risk Transfer		
(t)	Does your company have a dedicated cree	dit portfolio management	unit?		
(u)	Provide details: How does your company assess the credit	t risk in its credit derivativ	e transactions?		
(v)	<ul> <li>Provide details:</li> <li>How much attention does your company grelated legal issues?</li> <li>Provide details:</li> </ul>	live to review of credit der	ivatives documentation and		
(w)	How is the valuation of your company's cre	edit derivative position do	ne?		
(x)	Provide details:  Does your company have an independent in charge of determining fair value and ma	rking-to-market of position	eparate from the front office, ns?		
(y)	<ul> <li>If so to whom does the unit report, pro What limits are placed on your company's determined?</li> <li>Provide details:</li> </ul>		tions? How are these limits		
HEDG	E FUNDS				
17.	Does the insurer invest in "hedge funds th	at employ leverage" ?			
17.	Does the insurer invest in "hedge funds that employ leverage"? (gross market exposure in excess of capital)				
	<ul> <li>If "Y", please indicate whether these in fund structures</li> </ul>	nvestments are made in i	nternal or external hedge		
18.	Please provide details on the instruments through which the insurer invest in a hedge fund				
	Name of Hedge Fund	Operational In- / Outside RSA - R'000	Description of instruments	Hedge fund Strategy	
				N PAN	
COUN	TERPARTIES				
19.	Does the insurer evaluate and review the of a lf "YES", provide details of evaluation of the "NO", provide details.				
20.	If "YES", what is the aggregate exposure to each counterparty.				
	If "NO", provide details.				
NFOR	MATION, ACCOUNTING AND ADMINISTR	RATION			
21.	21. Were there any changes to accounting policies?  If "YES", indicate the effect in rands and provide particulars of changes.				
	ltem	Period under review R'000	Previous period (restated figures for comparative purposes) R'000		
	Balance sheet	0		ត្ត	
	Income statement	0		0	
22.	Are transfers to and from reserves fully disc • If "NO", provide details.	closed in the attached fina	ancial statements?		

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	STATEMENT G3 RISK REPORT ISSUED BY MANAGEMENT OF ABC LIMITED as at the end of financial period 30/06/2008	N S
23.	Were any significant problems experienced with regard to the information/accounting/administrative systems during the reporting period?  If "YES", provide particulars.	
24.	Is a business continuance plan in place?  If "YES",  Is the plan in writing.  When was it last fully tested.  If "NO", provide an explanation.	
25. •	Are underwriting, financial and investment results which can be relied upon for making management decisions, available to management when needed and do they indicate: How frequently these results are available?  Whether these results are generally available within one month after the reporting period?  If "NO", provide an explanation.	
CAPIT	AL AND FUNDS	
26.	Did the issued share-capital change during the reporting period?  • If "YES", provide details.	
27.	Did the insurer Issue preference shares, debentures or mortgages or other debt instruments during the period under review?  • If "YES", provide details.	
28.	Is the issuing of redeemable preference shares to supplement capital, during the following financial period, under consideration?	
29.	Is the issuing of redeemable preference shares, by subsidiaries, to supplement capital, during the following financial period, under consideration?	
30.	Is the issuing of debt instruments to supplement capital, during the following financial period, under consideration?	
31.	Did the insurer issue a securitised insurance instrument (e.g. catastrophe bond) during the financial period under review?  * If "YES", provide details.	
32. •	Is the issuing of guarantees or similar undertakings under consideration in respect of: Subsidiaries/related party(ies)? Any other person?  If "YES", provide particulars and procedures.	

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FINAL PE	KINTOUT DATE	CONFIDE	NTIAL STATEMENT NOT	AVAILABL	E TO PUBLIC 2008/07/16 09:25
		STATEMENT G3 DRT ISSUED BY MA of ABC LIMITED and of financial perior			
33.	Are dividends on preference shares, issued likely to be in arrears during the following fine of "YES",  State the (likely) amount in arrears in Attach particulars of how and when the	ancial period? <i>R'000</i> .			
34.	Were preference shares, issued by the insur preference shares be likely not to be redeem redemption must take place?  If "YES",				
	State the (likely) amount not redeeme     Attach particulars of how and when the		ed/addressed.		
35.	Are any payments (interest and capital) on debt instruments, issued by the insurer, in arrears or will any payments on a debt instrument be likely to be in arrears during the following reporting period?  If "YES",  State the (likely) amount in arrears in R'000.  Attach particulars of how and when the position will be rectified/addressed.				
36.	Do holders of preference shares get voting ri  If preference dividends are in arrears?  If their shares are not redeemed on do  If "YES", provide details.	)			·:
37.	What is the proportion of preference share v	oting rights in relation to	total issued shares?		
ASSET	rs				
38.	Did the insurer purchase a securitised insurar period under review?  • If "YES", provide details.	nce instrument (e.g. ca	tastrophe bond) during the		
SYSTE	M OF CONTROL				
39.	Is the system subject to:  • internal reviews?  • external reviews?	Y/N	Frequency	0	months months
40.	Were any material weaknesses reported? • If "YES", provide particulars.				
OUTS	DURCING				
41.	Have any business activities been outsource If "YES", provide full details and attach of		√arrangements.		

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FINAL PRINTOUT DATE

# CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 09:25

# STATEMENT G3 RISK REPORT ISSUED BY MANAGEMENT of ABC LIMITED

# as at the end of financial period 30/06/2008

# DISTRIBUTION CHANNELS

42. Which distribution channels are used and what percentage is the contribution of each to the total gross premium?

Description	% of gross premium			
Description	Personal lines	Commercial lines	Corporate lines	Other
Mail marketing	0.0%	0.0%	0.0%	0.0%
In-house agents	0.0%	0.0%	0.0%	0.0%
Independent brokers	0.0%	0.0%	0.0%	0.0%
Direct marketing (excluding Tele-sales)	0.0%	0.0%	0.0%	0.0%
Tele-sales	0.0%	0.0%	0.0%	0.0%
Underwriting managing administrators	0.0%	0.0%	0.0%	0.0%
Other method: specify	0.0%	0.0%	0.0%	0.0%
•	0.0%	0.0%	0.0%	0.0%
•	0.0%	0.0%	0.0%	0.0%
•	0.0%	0.0%	0.0%	0.0%
TOTAL	0.0%	0.0%	0.0%	0.0%

#### MICRO-INSURANCE

What percentage of the gross premiums written is attributable to business sold to the low income market (Living Standards Measure (LSM) 1-5)

Business Class	% of total Gross Premium
Property	0.0%
Motor	0.0%
Transportation	0.0%
Accident & Health	0.0%
Guarantee	0.0%
Miscellaneous	0.0%
Total	0.0%

44. Please provide the following information with regard to:

Credit Life Insurance

Net Premiums - R'000	Net Claims - R'000	Commission - R'000	Expense - R'000

Claims settled and rejected

Description	Number of claims	R'000
Claims Received		
Claims rejected		
Claims Paid		

Primary reasons for claims - Indicate percentage distribution

 Death	Unemployment	Disability	Total
			0%

### MANAGEMENT

- Were there any changes in senior management, including the CEO, during the period under \* If "YES":-45.
  - - Attach particulars of the changes.
      Indicate the (possible) impact on the insurer.
- 46. This report has been/will be submitted to the audit committee on

CHAIRMAN	DIRECTOR
PUBLIC OFFICER	DATE
AUDITORS (initial)	

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SHEET REFERENCE NUMBER

CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 09 25

FINAL PRINTOUT DATE	CONFID
Statement G4.1 L. CROSS BORDER OPERATIONS - S of ABC LIMITED as at the end of financial period	

	as at the end of financial period 30/06/	/2008	
Informat	tion on an off-shore subsidiary company of the registered South African insurer conducting	insurance business in one or mo	ore SADC jurisdictions
1.	Does the insurer have an off-shore branch in a SADC jurisdiction ?		
2.	State the total number of branches		
3.	State whether the branch(es) is/are subject to regulatory supervision		
4.	Name of branch:		
5.	Host jurisdiction where in operation:		
6.	Date when branch was established:		
7.	Name of the applicable regulatory body in host jurisdiction:		
8.	Address of branch in host jurisdiction:		
0.	Address of branch in post jurisdiction.		
_	Description	R'000	
9.	Total assets in respect of the branch  Total liabilities in respect of the branch		
	Total gross premium income in respect of the branch		
	Total net premium income in respect of the branch Regulatory capital adequacy requirement ( as per home jurisdiction) in respect of the branch		
	Regulatory capital adequacy requirement ( as per host jurisdiction) in respect of the branch		
11.	Describe the Board of the insurer's assessment of the overall financial position of the branch.		
			- <del></del>
		•	
	· · ·	<u>:</u>	·
12.	Has the branch been subject to regulatory inspection or investigation and if, please furnish full de	etalis?	
		• •	

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SHEET REFERENCE NUMBER

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CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 08:25

A 200 CO 200	A Charles	Statement	CAMPAGA	C BRANCH
		Omfortibilt.		
: CROS	S BORDER	OPERATION	JNS - SAD	C BRANCH
		FARRITH	TEN	
1947 4 7 652		II ADO LIII		
as i	at the end	of financial	period 30/	08/2008

	Statement G4.1 GROSS BORDER OPERATIONS: SA of ABC LIMITED as at the end of financial period	
13.	State the scope of the activities of the branch and its role within the insurance group.	
14.	Indicate whether the host jurisdiction requires that the branch be subject to external audit, that is different to the audit firm of the insurer undertakes the audit and also provide name	Please be specific whether or not an audit firm of that audit firm.
		-
	CHAIR	DIRECTOR
	PUBLIC OFFICER	DATE
	AUDITORS (Initial)	

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SHEET REFERENCE NUMBER

G4.2-99-A

FINAL PRINTOUT DATE CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 09:25

# Statement G4:2 CROSS BORDER OPERATIONS -SADC SUBSIDIARY of ABC LIMITED as at the end of financial period 30/06/2008 Information on an off-shore subsidiary company of the registered South African insurer conducting insurance business in one or more SADC jurisdictions 1. Does the insurer have a subsidiary company in another SADC jurisdiction that conducts insurance business? 2. State the total number of SADC subsidiaries 3. State whether the subsidiary(ies) is/are subject to regulatory supervision 4. Name of the subsidiary company: 5. Host jurisdiction where in operation: Date when subsidiary was established/acquired: 7. Name of the applicable regulatory body in host jurisdiction: 8. Address of subsidiary in host jurisdiction: Description R'000 9. Total assets in respect of the branch Total liabilities in respect of the branch Total gross premium income in respect of the branch Total net premium income in respect of the branch Regulatory capital adequacy requirement ( as per home jurisdiction) in respect of the branch Regulatory capital adequacy requirement ( as per host jurisdiction) in respect of the branch Broadly describe the branch's internal controls, Including comprehensive and regular reporting between the branch and its head office and indicate the Board of the insurer's assessment of the overall effectiveness of these control systems. 11. Describe the Board of the insurer's assessment of the overall financial position of the subsidiary. 12. Has the subsidiary been subject to regulatory inspection or investigation and if, please furnish full details.

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SHEET REFERENCE NUMBER

G4.2-98-A

AVAILABLE TO PUBLIC	IDENTIAL STATEMENT
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IAL P	RINTOUT DATE	CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 09:25
	CROSS BORDE	Statement G4.2 R OPERATIONS SADC SUBSIDIARY of ABC LIMITED nd of financial period 30/06/2008
13.	State the scope of the activities of the subsidiary and its role w	within the Insurance group.
14.	Indicate whether the host jurisdiction requires that the subsidia an audit firm which is different to the audit firm of the insurer a	ary be subject to external audit and, where it is, whether the audit is undertaken by and, whether the audit work is sufficiently thorough.
	CHAIR_	DIRECTOR
	PUBLIC OFFICER_	DATE

AUDITORS (initial)

6.

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G4,3-99-A SHEET REFERENCE NUMBER CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC FINAL PRINTOUT DATE Statement G4.3 CROSS BORDER OPERATIONS - SADC OTHER OPERATIONS of ABC LIMITED as at the end of financial period 30/06/2008 Cross Border Operations other than branch business or business conducted in a subsidiary that is operated in the SADC region Has the Insurer provided cross border Insurance services to persons other than a SADC branch office or SADC subsidiary In one or more SADC jurusdictions? (if yes, please provide full detail in 2 below) Name of the SAD Country Total liabities in respect of Total assets in respectof the business written Total gross premium income of the business Total net premium income where person(s) is/are the business written of the business written located R'000 R'000 written R'000 3. Has the business referred to in 2 above been placed directly with the insurer or was it sourced through independent intermediaries or through the insurer's own marketing force? (please give full details) Has the insurer provided cross border insurance services other than those provided through a branch office or subsidiary to insurers (i.e. inwards reinsurance business) in another SADC country? (If yes, please provide full detail in 5 below) Name of the SAD Country where person(s) is/are Total liabities in respect of the business written the business written Total gross premium income of the business Total net premium income 5. of the business written R'000 R'000 R'000 R'000 located

Has the business referred to in 5 above been placed directly with the insurer independent intermediaries or through the insurer's own marketing force? (please give full details)	r or was it sourced through

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CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC 2008/07/16 09:25

			Statement G4.3 RATIONS - SADC OTHER of ABC LIMITED of financial period 30/06		
	Has your company placed rein (if yes, please provide full det		surer in another SADC count	try	
	Name of the SAD Ccountry where insurer(s) Is/are located	Name of the insurer/reinsurer	Type of Reinsurance (Proportional or Non- Proportional)	Premium Amount Ceded R'000	Reinsurer's exposure amount R'000
		·			
ŀ					
ŀ					
l					
į					
	Has your company provided o		surer in another SADC countr	ry ?	
	(if yes, please provide full deta	all in 10 below)			
	Name of the SADC countrilocat		Give a description of the outsourcing services being provided		
	Has your company made use	of outsourcing services prov	rided by an insurer, a person	or any other entity located	
	in another SADC country? (if yes, please provide full deta	all in 12 below)			
	Name of the SADC country ventity is/are		Give a description	of the outsourcing services the	at has been acquired
				<del></del>	
				<del></del>	
			l		
	Confirm whether or not 25% o				
	in your company, is owned by (if yes, please provide full deta		cated in another SADC count	гу	
Γ	Name of person or entity ho	olding 25% or more of the	Name the person or entity	holding 25% or more of the	Name of SADC country
ŀ	Name	%	Name	%	where the person or entity is
					· .
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AL PRIN	TOUT DATE		CON	IFIDENTIAL STATEMENT N	OT AVAILABLE TO PUBLIC 2008/07/16 09:25
		A PART OF THE PART	Statement G4.3 RATIONS - SADC OTHER of ABC LIMITED of financial period 30/06/		
15.	Does your company directly insurer located in another So (If yes, please provide full directly some second		5% of the shares or any other	interest in a foreign	·
16.	Name of person or entity	holding 25% or more of the	Name the person or entity	holding 25% or more of the	Name of SADC country
	Name	<b>%</b>	Name	<u>%</u>	where the person or entity is
				* * *	
					. V. S
					4/200
				,	- N
		-		· .	
				·	
17.	Is your company party to a j	oint venture with an insurer loc etall in 18 below)	ated in another SADC country	n	
18.					
		CHAIR		DIRECTOR	
		PUBLIC OFFICER		DATE	
		AUDITORS (initial)			

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	ERENGE NUMBER	G4.4-99-A CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC
FINAL PRIN	Statement G4.4 CROSS BORDER OPERATIONS NON S Of ABC LIMITED as at the end of financial period 30	ADC BRANCH
Informat that do r	ion on off-shore branch business conducted by the registered insurer within on ot form part of the SADC region	e or more jurisdictions
1.	Does the insurer have an off-shore branch in a country that does not form part of the SADC region?	
2.	State the total number of branches	
3.	State whether the branch(es) is/are subject to regulatory supervision	
4.	Name of branch:	
5.	Host jurisdiction where in operation:	
6.	Date when branch was established:	
7.	Name of the applicable regulatory body in host jurisdiction:	
8.	Address of branch in host jurisdiction:	
	,	
9.	Description	R'000
₹.	Total assets in respect of the branch  Total flabilities in respect of the branch	
	Total gross premium income in respect of the branch Total net premium income in respect of the branch	
	Regulatory capital adequacy requirement ( as per home jurisdiction) in respect of the	
10.	Regulatory capital adequacy requirement (as per host jurisdiction) in respect of the Broadly describe the branch's internal controls, including comprehensive and regular and indicate the Board of the insurer's assessment of the overall effectiveness of the	reporting between the branch and its head office
<b>†1</b> .	Describe the Board of the insurer's assessment of the overall financial position of the	branch.
12.	Has the branch been subject to regulatory inspection/investigation and if, please furni	ish full details.

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SHEET REFERENCE NUMBER

G4.5-99-A

FINAL PRIN	TOUT DATE	CONFIDENTIAL STATEMENT NO	2008/07/18 09:25
	Statement G4.5 GROSS BORDER OPERATIONS ® NON-SADO of ABC LIMITED ( as at the end of financial period 30/0	The state of the state of the state of	
Information part of t	tion on an off-shore subsidiary company of the insurer conducting insurance business in the SADC region	in one or more jurisdictions that do n	ot form
1.	Does the insurer have a subsidiary company in a country other than In SADC jurisdiction that conducts insurance business?		
2.	State the total number of NON - SADC subsidiaries		
3.	State whether the subsidiary(les) is/are subject to regulatory supervision		
4.	Name of the subsidiary company:		
5.	Host jurisdiction where in operation:		
6.	Date when subsidiary was established/acquired:		
7.	Name of the applicable regulatory body in host Jurisdiction:		
8.	Address of subsidiary in host jurisdiction:		
	Description	R'000	
9.	Total assets in respect of the subsidiary's business		<del></del>
	Total liabilities in respect of the subsidiary's business		
	Total gross premium income of the subsidiary		
	Total net premium income of the subsidiary		
	Regulatory capital adequacy requirement as per home jurisdiction		
	Regulatory capital adequacy requirement as per host jurisdiction		
10.	Broadly describe the subsidiary's internal controls, including comprehensive and regular reportant and indicate the Board of the insurer's assessment of the overall effectiveness of these controls.		у сопірану
11.	Describe the Board of the insurer's assessment of the overall financial position of the subsidi	iary, 	
12.	Has the subsidiary been subject to regulatory inspection / investigation and if, please furnish	fuil details.	

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Statement G4.5

CROSS BORDER OPERATIONS - NON-SADC SUBSISDIARY

of ABC LIMITED

Seat the order of ABC LIMITED

	of ABC LIMITED as at the end of financial period 30/06/2008	MAC PROPERTY.
13.	State the scope of the activities of the subsidiary and its role within the insurance group.	
14.	Indicate whether the host jurisdiction requires that the subsidiary be subject to external audit and, who an audit firm which is different to the audit firm of the insurer and, whether the audit work is sufficiently	
	· _	
	CHAIR	DIRECTOR
	PUBLIC OFFICER	DATE
	AUDITORS (initial)	

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SHEET R	REFERENCE NUMBER			CONFIDENTIAL STATEM	G4.6-99-A ENT NOT AVAILABLE TO PUBLIC
FINAL PI	RINTOUT OATE		Statement G4.6		2008/07/16 09:25
	Part of the second seco		ERATIONS - NON SADC OTHER of ABC LIMITED and of financial period 30/08/2		
Inform	nation on cross border operations o	other than branch business or	business conducted in a subsidia	ry in another country than a SA	DC country
1.	Has the insurer provided cross bord persons in another country than a (if yes, please provide full detail in 2	SADC country?	n a non-SADC branch and non-SAD	C subsidiary to	
2.	Name of the country where person(s)	Total liabities in respect of the	Total assets in respect of the business written	Total gross premium income of the business	Total net premium income of the
	is/are located	business written R'000	R'000	written R'000	business written R'000
				··	
3.	Has the business referred to in 2 ab insurer's own marketing force? (please give full details)	ove been placed directly with the	e insurer or was it sourced through in	dependent intermediaries or thro	ugh the
					:
				•	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
4.			n those in non-SADC brench or non-	SADC subsidiary) to insurers	
	(i.e. inwards reinsurance business) (if yes, please provide full detail in 5		country?		
5.	Name of the	Total liabities in	Total assets in respect	Total gross premium	Total net premium
	country where insurer(s) is/are located	respect of the business written	of the business written	income of the business written	income of the business written
	-	R'000	R'000	R'000	R'000
					<u> </u>
					<del> </del>
			<u> </u>		
			•		
6.	Has the business referred to in 5 ab own marketing force? (pleasa give full details)	ove been placed directly with the	e insurer or was It sourced through in	dependent intermediaries or thro	ugh the insurer's
					-
7.	Has your company placed reinsura (if yes, please provide full detail in 8		another country other than a SADC	country?	
8.	Name of the	Name of the	Type of	Premium Amount	Reinsurer's
	country where insurer(s) is/are located	insurer/ reinsurer	Reinsurance (Proportional or	Ceded	exposure emount
			Non-Proportional)	R'000	R'000
	l I				,
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		·		·	

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	REFERENCE NUMBER			CONFIDENTIAL STATEME	G4.699-A NT NOT AVAILABLE TO PUBLIC
FINAL PE	RINTOUT DATE		Statement G4.6 RATIONS - NON SADC OTHE of ABC LIMITED		2008/07/16 09:25
		as at the	and of financial period 30/06/2	008	
9.	Has your company provided outse (if yes, please provide full detail in	ourcing services to an insurer in a co	ountry other than a SADC country	?	
10.		country where rentity is/are located		Give a description of the outsourcin services being provided	g
				<u>.</u>	
		·			
11.	Has your company made use of o country that is not a SADC country (if yes, please provide full detail in	r	insurer, a person or any other enti	ly located in another	
12.		country where r entity is/are located		Give a description of the outsourcin sarvices being provided	g
13.	a foreign person or entity located i	ore of the shares or any other intere		company, is owned by	
	(if yes, please provide full detail in	-			
14.		ty holding 25% or more rest directly in the insurer	of the shares or any in	tity holding 25% or more nterest <b>indirectly</b> in the urer	Name of country where the person entity is located
	Name	<u> </u>	Name	%	
					·
					.,
				:	
15.	Does your company directly or ind country that is not a SADC country (if yes, please provide full detail in		nares or any other interest in e fore	ign insurer located in another	
16.	25% or more of the sha	nich your company holds res or any other interest actly	holds 25% or more of	In which your company the shares or any other indirectly	Name of SADC country where the insurer is located
	Name	%	Name	%	
	-			· <u>· · · · · · · · · · · · · · · · · · </u>	
	Is your company party to a joint ve (if yes, please provide full detail in		ountry that is not a SADC country?		
18.					
					<u>.</u>
		CHAIR		DIRECTOR	
		PUBLIC OFFICER		DATE	

AUDITORS (initial)

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SHEET REFERENCE NUMBER **PUBLIC STATEMENT** 8/07/16 09:25 STATEMENTH REPORT BY THE AUDITORS IN TERMS OF SECTION 19(7) OF THE ACT of ABC LIMITED as at the end of financial period 30/06/2008

### INDEPENDENT AUDITOR'S REPORT OF ABC LIMITED TO THE REGISTRAR OF SHORT-TERM INSURANCE

We have audited the following statements of the Short-term insurance Statutory Return (the Return ) of [insert name of short-term insurer) (the Insurer) for the year ended [insert date], in compliance with section 19(7) of the Short-term insurance Act, 1998 (the Act)

- Statements B1 to 85 (total columns only)
- Statements C1 to C3 Statement C4
- Statement D1 (total only)
- Statement D2 to D3
- Stetements E1 to E10
- Statement F1 to F2
- Statement I (Confidential statement Not available to the public)

Our opinion on the Return extends only to that information and those statements included in the return as indicated above. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone, other than the Registrar of Short-term Insurance, for our work, for this report, or for our opinion expressed.

### Director's Responsibility for the Return

The directors are responsible for the preparation of the Return derived from information contained in the accounting records of the Insurer. This responsibility includes: ensuring that the Return is prepared in terms of the Act, related Regulations and Board Notices; in terms of the guidance manual for the completion of the Return; as well as applicable Directives issued by the Financial Services Board.

### Auditor's Responsibility

Our responsibility is to express an opinion on the Return based on our audit. We conducted our audit in accordance with International Standards of Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain sufficient appropriate audit evidence that the amounts and disclosures in the statements of the Return listed in the firstperagraph of this report are in compliance with the provisions of the Act, related Regulations and Board Notices; the guidance manual for the completion of the Return; as wall as the applicable Directivas issued by the Financial Services Board

An audit involvas performing procedures to obtain audit evidence about the amounts and disclosures in the Return. The procedures selected depend on the auditor's judgament, including the assessment of the risks of material misstatement of the Return, whether due to fraud or error. In making those risk essessment, the auditor considers internal controls relevant to the entity's preparation and presentation of the Return in order to design audit procedures that ere appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal controls. An audit elso includes evaluating the appropriateness of accounting policies used end the reesanableness of accounting estimates made by management, as well as evaluating the presentation of the

For the purposes of clarity we confirm that our audit included the following procedures and such other procedures as

- Agreed the information contained in the statements of the Return listed in the first paragraph of this report to the books and records of the insurer.
- Determined, through inspection of appropriate documentation and enquiry of management of the Insurer, whether the information contained in the statements of the Return listed in the first paragraph of this report was prepared in accordance with the provisions of sections 29, 30,31,32,33; Schedules 1 and 2; as well as Regulations 2 and 3 to the Act.

We believe that the audit evidence we have obtained as pert of our audit of the annual financial statements for the year ended *finsert date* ) together with edditional evidence obtained as part of our audit of the Return is sufficient and appropriate to provide a basis for our audit opinion.

In our opinion, the above information and Schedules included in the Return of [insert name of short-term insurer] has been properly prepared, in all meterial respects, in accordance with the provisions of the Act, related Regulations and Board Notices; the guidance manual for the completion of the Return; as well as the applicable Directives issued by the Financiel Services Board.

### Regulatory Matters

We have complied with the provision of section 19(5) of the Act.\*

### Restriction on Distribution or Use of the Auditor's Report

Our report is presented solely for the purposes set out in the first paragraph of the report and for the information of the Registrar of Short Term Insurance, and is not to be used for any other purpose, nor to be distributed to any other parties without our prior written permission. Our report reletes only to the information and statements included in the Return specified above, and does not extend to the annual statements of the insurer, taken es a whole

Name of au	ıditor(s):		Name of au	uditor(s):
Address:		Registered Accountant and Auditor	Address;	Registered Accountant and Auditor
Date:			Date:	
Signatura:			Signature:	

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### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

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	SEP SEAD	C LIMITED .			
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	as ar mis end of mis	ancial period solvoiz	UVO		
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1. Summary of cell arrangements

	"Cell" arrangements	Current year		Previous year	
		Number	GWP (R'000)	Number	GWP (R'000)
1	Active: 1 <sup>st</sup> party	0	0	0	0
2	3 <sup>rd</sup> party	0	0	0	0
3	Combined	0	0	0	0
4	Dormant (in run-off)	0	0	0	. 0
5	Total	0	0	0	0

2. Five biggest 1st Party Cells

	Name of cell owner	Kind(s) of policy(ies)	GWP (R'000)	Operating ratio %	Statutory surplus assets (R'000)
6 [				0.00%	0
7			0	0.00%	0
8			0	0.00%	Ō
9 [			0	0.00%	0
10 [			0	0.00%	0

3. Five biggest 3rd Party Cells

	Name of cell owner	Kind(s) of policy(ies)	GWP (R'000)	Operating ratio %	Statutory surplus assets (R'000)
11			0	0.00%	0
12			0	0.00%	0
13			0	0.00%	. 0
14				0.00%	0
15			0	0.00%	0

4. Five biggest Combined Cells

	Name of cell owner	Kind(s) of policy(ies)	GWP (R'000)	Operating ratio %	Statutory surplus assets (R'000)
16			0	0.00%	0
17			0	0.00%	0
18 [			0	0.00%	0
19			0	0.00%	0
20 [			0	0.00%	0

5. Details on 1st party cells

		Statutory surpl	us assets ratio
	Cells %		Statutory surplus /
	Cells 70	No of cells	(Shortfall of assets)
			(R'000)
21	>100%	0	. 0
22	76% - 100%	0	0
23	51% - 75%	0	0
24	26% - 50%	0	0
25	15% - 25%	Ō	0
26	<15%	0	0

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### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

FINAL PRINTOUT DATE 2008/07/16 09:25 STATEMENT **CELL CAPTIVE INSURERS** of ABC LIMITED as at the end of financial period 30/06/2008

	6. Details on 3rd party cells				
		Statutory surpl	us assets ratio		
	Cells %	No of cells  Statutory surplus / (Shortfall of assets) (R'000)			
27	>100%	0	0		
28	76% - 100%	0	0		
29	51% - 75%	0	0		
30	26% - 50%	0	. 0		
31	15% - 25%	0	0		
32	<15%	0	0		

7. Details on combined party cells

	7. Dotalis on combined party cons			
		Statutory surplus assets ratio		
	Calla 0/		Statutory surplus /	
	Cells %	No of cells	(Shortfall of assets)	
			(R'000)	
33	>100%	0	0	
34	76% - 100%	0	0	
35	51% - 75%		0	
36	26% - 50%	0	0	
37	15% - 25%	0	0	
38	<15%	0	0	

39 8. General	
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1. Have any requests to recapitalize any cell not been complied with during the year under review? If "YES", give full details.

AUDITORS	
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SHEET REFERENCE NUMBER

J01-99-A CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

FINAL PRINTOUT DATE

### STATEMENT J1 SHORT-TERM REINSURANCE SUPERVISION QUESTIONNAIRE of ABC LIMITED as at the end of financial period 30/06/2008

### 1. Overall reinsurance strategy

Each company must provide a detailed reinsurance strategy document, signed off by the board. The strategy must be a descriptive document containing explanations and details on at least the following:

- Company's key objective when placing reinsurance (e.g. gain access to capital, protection of 1. statutory solvency etc.)
- 2. How reinsurers are selected (e.g. capital, ratings, maximum exposure across the program, other approved processes)
- Factors considered in determining whether reinsurance is required (i.e. how did the company decide 3. on the net retentions, retentions on proportional programmes, automatic capacity, amount of catastrophe cover to purchase etc.)
- The maximum loss that the board would be willing to accept from any one-loss event and the criteria 4. that were used to determine this amount.

Any further issues that are considered relevant to the company's strategy should also be included in the document.

### 2. Additional questions

Answers to the following questions need to be provided in addition to the reinsurance strategy document. Where appropriate you may refer to your reinsurance strategy document.

### 2.1. Reinsurer exposure

	Do you make use of reinsurance brokers to facilitate placing your reinsurance programme?  If Yes, please provide their name/(s)
2.	Provide details of any caps that might exist on the total exposure that can be ceded to any one reinsurer (e.g. no more than R1bn on your programme as a whole)
3.	Please provide details on how you monitor your total exposure per reinsurer
4.	Give details on the collateral required on foreign reinsurance arrangements (where foreign reinsurer refers to any reinsurer that is not registered in South Africa)
Re	insurance systems and controls
1.	Currently facultative reinsurance is placed  Centrally at head office only Branch level
	Other If Other please provide details of the procedure

**ST2008** Page 85 of 97

FINAL F	RINTOUT DATE 2008/07/16 09:25
2	STATEMENT J1 SHORT-TERM REINSURANCE SUPERVISION QUESTIONNAIRE of ABC LIMITED as at the end of financial period 30/06/2008 The decision to place facultative insurance is based on
-	Insufficient proportional treaty capacity The quality of the individual risk Other If Other please provide details of how the decision will be made
3	Provide details of the procedures you have in place to ensure that facultative placements are made when required?
4	Provide details of the procedures that you have in place to ensure that you do not write business that falls outside the scope of your treaties (e.g. treaty exclusions, territorial limits etc.)
5	Do you have a computerised reinsurance system that is fully integrated with your policy administration and financial systems (i.e. it automatically cedes premiums and signal recoveries when appropriate and meet all the reporting requirements for your financials)?
	If No, please provide details on the nature of your reinsurance system and how you ensure that all risks are ceded and reinsurance recoveries made where appropriate.
2.3. C	atastrophe reinsurance
1.	Your decision on the amount of catastrophe cover to purchase on your property, motor and engineering  Simple rules  Detailed catastrophe modelling (DFA)  Reinsurance broker advice  Reinsurer advice
	Other  Please provide full details of the process
2.	The frequency with which you review the adequacy of the amount of catastrophe cover purchased is  Annually at renewal only Half-yearly Other If Other, please provide details
3.	Do you have event limits on your proportional programmes?
	If Yes, please provide full details of the limits and the reinsurance programmes to which they apply
4.	Should the event limit on your proportional programme be exceeded, the excess claims will be  Covered by your catastrophe programme  Retained for your net account  Covered by a reinsurance programme purchased especially for this purpose  Other  If Other, please provide full details

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STATEMENT J1

in a	SHORT-TERM REINSURANCE SUPERVISION QUESTIONNAIRE of ABC LIMITED
2.4.	as at the end of financial period 30/06/2008 Reinsurance programme
	. Changes to your reinsurance programme in the last financial year related mainly to
	Retention levels
	Automatic capacity Amount of catastrophe cover purchased
	Reinsurer mix
	☐ Other ☐ No changes have been made
	If changes have been made please provide details of the changes and the reasoning behind them
2	. To analyse you reinsurance needs and the adequacy of your reinsurance programme you make use of
	☐ Dynamic Financial Analysis (DFA) ☐ Scenario testing
	Other (e.g. independent consultants)
	If Other, please provide details, including the name of the consultant where relevant
3	. Do you have any reinsurance contracts that contain any one of the following provisions:
	* A limitation on the payment of claims when the primary insurer is in financial difficulty (curatorship or liquidation).
	* A unilateral reduction in cover
	If Yes, please provide details of your strategy in this regard
4	If you have any business where 100% of the risk is ceded to a third party (i.e. where no risk is retained), please provide details on your strategy with regards to this business and how much of it you wrote in the previous financial year
5	Provide details of any Alternative Risk Transfer (ART) kinds of treaties (contracts) entered into, not indicated in statement G3 (e.g., securitization, financial reinsurance, committed capital).
6	Provide details of any whole account protections e.g. stop loss or spread loss arrangements
. Cu	rrent reinsurance position
	Information on your company's current reinsurance position needs to be provided as per the attached statements.

3.

<b>AUDITORS</b>		

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J02-99-A

### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

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			STATEMENT J SPREAD OF REINSU of ABC LIMITE end of financial per	IRERS D			
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	Reinsurer Name	Foreign or Domestic	Total Proportional Treaty Premium	Total Catastrophe Non-Proportional Treaty premium	Total Non- Catastrophe Non- Proportional Treaty Premium	Facultative Premium	Collateral required (Y/N)	% of total Reinsurance Premium
	<u></u>		R'000	R'000	R'000	R'000		
1 📙			0	0	0			0.0%
2			0	0	0			0.0%
³ ├			0	0	0			0.0%
4			0	0	0			0.0%
5 ⊢			0	0	0			0.0%
<u> </u>			0		0			0.0%
'.⊢			0		0			0.0%
્રે⊢			0		0			0.0%
.3.⊢			0		0			0.0%
10				- 0		-		0.0%
12		+	0	<u> </u>	0			0.0%
13			0	- 0				0.0%
14			-	- 0	0	1		0.0%
15			0	0				0.0%
16			0	- <u>ö</u>				0.0%
17	· · · · · · · · · · · · · · · · · · ·			0	0	-		0.0%
18			- 0	0	0			0.0%
19	<del></del>		0	0				0.0%
20			0	0				0.0%

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J03-99-A

### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

STATEMENT J3

CATASTROPHE REINSURANCE

of ABC LIMITED

as at the end of financial period 30/06/2008

### **ALL BUSINESS**

Combined Cresta exposure for all classes

Cresta	a Zone	Total Number of Risks	Total Sum Insured Exposure in R'000	Total EML Exposure in R'000	Gross Net Premium Income in R'000
	1	0	0	0	• • • • • • • • • • • • • • • • • • •
	2	0	Ø	:0	0
	3	0	Ø	<u></u>	0
	4	0	0	::::::::::::::::::::::::::::::::::::::	0
	5	<b>0</b>	Ø	:0	0
- 6	3	0	Ø:	· · · · · · · · · · · · · · · · · · ·	0
	7	0.	O.	0	0
	3	0	0	· · · · · · · · · · · · · · · · · · ·	0
9	9	0	0	0	0
1	0	0	0	0	0
1	1	0	0	0	0
1	2	0	0	0	0
1	3	0	0	0	0
1	4	0	0	0	0
1	5	0	0	0	0
1	6	0	0	0	0

	Class of business	PROPERTY
17	Maximum unprotected net retention per event (R'000)	
18	Total amount of catastrophe cover purchased (R'000)	·

Cresta exposure for this class (net of any proportional covers and before non-proportional excess of loss

	Create Zene	Total Mumber of Dieks	Total Sum Insured	Total EML Exposure	Gross Net Premium
	Cresta Zone	Total Number of Risks	Exposure in R'000	in <i>R'000</i>	Income in R'000
19	1	0	0	. 0	0
20	2	0	0	0	0
21	3	0	0	0	0
22	4	0	0	0	0
23	5	0	0	0	0
24	6	0	0	0	. 0
25	7	0	0	.0	- 0
26	8	0	0	0	0
27	9	0	0	0	0
28	10	0	0	0	0
29	11	0	0	_ 0	0
30	12	0	0	0	0
31	13	0	0	0	0
32	14	0	0	0	0
33 [	15	0	0	0	0
34	16	0	0	0	0

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## J03-99-A CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

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		STATEMENT J3		
	CATAS	TROPHE REINSURA	INCE	
	a de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	of ABC LIMITED		
	as at the end	l of financial period	30/06/2008	
of containing the state of the	7,7		Y 45-347-Y Y	
1	2	3	4	5

	Class of business	MOTOR			
35	Maximum unprotected net retention per event (R'000)				
36	Total amount of catastrophe cover purchased (R'000)	_			
Cresta exposure for this class (net of any proportional covers and before non-proportional excess					

	and any properties and properties and properties and percent from properties and any properties and percent properties and any properties and percent properties and properties and percent properties and properties and percent properties and properties and percent properties and percent properties and percent properties and percent properties and percent properties and percent percent properties and percent perc						
	Cresta Zone	Total Number of Risks	Total Sum Insured	Total EML Exposure	Gross Net Premium		
	Oresta 2.0ne	Total Number of Kisks	Exposure in R'000	in <i>R'000</i>	Income in R'000		
37	1	0		0	0		
38	2	Ō	0	0	0		
39	3	0	0	0	0		
40	4	0	0	0	0		
41	5	Ö	0	0	0		
42	6	0	0	0	0		
43	7	0	0	0	. 0		
44	8	0	0	0	0		
45	9	O	0	. 0	0		
46	10	0	0	0	. 0		
47	11	0	0	0	Ö		
48	12	0	0	0	0		
49	13	0	0	0	0		
50	14	0	0	0	0		
51	15	0	0	0	0		
52	16	0	0	0	0		

	Class of business	ENGINEERING
53	Maximum unprotected net retention per event (R'000)	
54	Total amount of catastrophe cover purchased (R'000)	
	Cresta exposure for this class (net of any proportional covers and	before non-proportional excess of loss

	Oz-ata 7aza	Total Number of Risks	Total Sum Insured	Total EML Exposure	Gross Net Premium
	Cresta Zone	Total Number of Risks	Exposure in R'000	in <i>R'000</i>	Income in R'000
55	1	0	0	0	0
56	2	0	0	0	0
57	3	0	0	0	0
58	4	0	. 0	0	0
59	5	0	0	0	0
60	6	0	0	0	0
61	7	0	0	0	0
62	8	0	0	0	0
63	9	0	0	0	0
64	10	0	0	0	0
65	11	.0	0	0	0
66	12	0	0	0	0
67	13	0	0	0	0
68	14	0	0	0	0
69	15	0	0	0	0
70	16	0	0	0	0

AUDITORS	
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NAL PRINTOUT DATE					2008/07/16 09:25
		STATEMENT J4 E DETAILS REGARD of ABC LIMITED nd of financial perio			
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	A. EXPOSURE TO THE NET ACCOUNT	R'000
1	Maximum Unprotected Net Retention Per Risk	0
2	Maximum Protected Net Retention Per Risk	0
	B. AUTOMATIC CAPACITY	R'000
3	Maximum Amount of Non-Proportional Risk Capacity Purchased	0
4	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0
5	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)	
6	Minimum EML % without reference to the lead reinsurer	0

## C. PEAK EXPOSURES

	Five larges	st risks						
		Brief description of the Risk	Total Sum Insured	Estimated Maximum Loss (EML)	Annual Premium charged on the risk	% Facultatively reinsured	Lead Reinsurer	% Participation
			R'000	R'000	R'000	remsureu —		, and the second
7	1		0	0	0	0.0%		0.0%
8	2		0	0		0.0%		0.0%
9	3		0	0	0	0.0%		0.0%
10	4		0	_ 0	0	0.0%		0.0%
11	5		0	0	0	0.0%		0.0%

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### FINAL PRINTOUT DATE STATEMENT J5 REINSURANCE DETAILS REGARDING TRANSPORTATION of ABC LIMITED as at the end of financial period 30/06/2008 3

	A. EXPOSURE TO THE NET ACCOUNT	Any one Conveyance	Any one Location	Any one Hull
		R'000	R'000	R'000
1	Maximum Unprotected Net Retention Per Risk	0	0	0
2	Maximum Unprotected Net Retention Per Event	0	0	0
3	Maximum Protected Net Retention Per Risk	0	0	0

### B. AUTOMATIC CAPACITY

		Any one Conveyance	Any one Location	Any one Hull	Ĺ
		R'000	R'000	R'000	ĺ
4	Maximum Amount of Non-Proportional Risk Capacity Purchased	0	0	0	ı
5	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0	0	0	Ĺ
6	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)				Ĺ

### C. CATASTROPHE COVER

- Maximum Amount of Catastrophe cover purchased
- Please comment on the number of reinstatements on this treaty and their sufficiency

### D. PEAK EXPOSURES

		Brief description of the Risk	Total Sum Insured	Annual Premium charged on the risk R'000	% Facultatively reinsured	Lead Reinsurer	% Participation
10	1		. 0	0	0.0%		0.0%
11	2		0	0	0.0%		0.0%
12	3		0	0	0.0%		0.0%
13	4		0	0	0.0%		0.0%
14	5		0	0	0.0%		0.0%

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J06-99-A

### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

FINAL PRINTOUT DATE

# STATEMENT J6 REINSURANCE DETAILS REGARDING MOTOR of ABC LIMITED

as at the end of financial period 30/06/2008

1 1 2

	A. EXPOSURE TO THE NET ACCOUNT	Own Damage <i>R'000</i>	Third Party Liability R'000
1	Maximum Unprotected Net Retention Per Risk	 0	0
2	Maximum Protected Net Retention Per Risk	 0	0

	B. AUTOMATIC CAPACITY	Own Damage	Third Party Liability
		R'000	R'000
3	Maximum Amount of Non-Proportional Risk Capacity Purchased	0	0
4	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0	0
5	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)		

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J07-99-A

	CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC
FINAL PRINTOUT DATE	2008/07/16 09:25

STATEMENT J7 REINSURANCE DETAILS REGARDING ACCIDENT AND of ABC LIMITED as at the end of financial period 30/06/2008	HEALTH	
	4	

	A. EXPOSURE TO THE NET ACCOUNT	Any one Life R'000	Any known accumulation <i>R'000</i>
1	Maximum Unprotected Net Retention Per Risk	0	0
2	Maximum Unprotected Net Retention Per Event	.0	0
3	Maximum Protected Net Retention Per Risk	0	0

	B. AUTOMATIC CAPACITY	Any one Life	Any known accumulation <i>R'000</i>
		7,000	7,000
4	Maximum Amount of Non-Proportional Risk Capacity Purchased	0	0
5	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0	0
6	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)		

### C. CATASTROPHE COVER

- 7 Maximum Amount of Catastrophe cover purchased
- 8 Please comment on the number of reinstatements on this treaty and their sufficiency

9

<b>AUDITORS</b>	

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J08-99-A

### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

SHEET REFERENCE NUMBER

FINAL PRINTOUT DATE 2008/07/16 09:25 STATEMENT J8 REINSURANCE DETAILS REGARDING GUARANTEE of ABC LIMITED as at the end of financial period 30/06/2008 5

	A. EXPOSURE TO THE NET ACCOUNT	R'000
1	Maximum Unprotected Net Retention Per Risk	0
2	Maximum Protected Net Retention Per Risk	0
	B. AUTOMATIC CAPACITY	R'000
3	Maximum Amount of Non-Proportional Risk Capacity Purchased	0
4	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0
	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)	

### C. CATASTROPHE COVER

- 7 Maximum Amount of Catastrophe cover purchased
- 8 Please comment on the number of reinstatements on this treaty and their sufficiency

9

### C. PEAK EXPOSURES

	1 140 1001	gootheno					
		Brief description of the Risk	Total Sum Insured	Annual Premium charged on the risk <i>R'<u>0</u>00</i>	% Facultatively reinsured	Lead Reinsurer	% Participation
10	1		0	0	0.0%		0.0%
11	2		0	0	0.0%	•	0.0%
12	3		0	0	0.0%		0.0%
13	4		0	0	0.0%		0.0%
14	5		0	0	0.0%		0.0%

AUDITORS	

SHEET REFERENCE NUMBER

### J09-99-A CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

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### FINAL PRINTOUT DATE

		REINSURANCE DET	TEMENT J9 AILS REGARDING L BC LIMITED inancial period 30/00			
1	2	] 3	4	5	6	7

	A. EXPOSURE TO THE NET ACCOUNT	R'000
1	Maximum Unprotected Net Retention Per Risk	0
2	Maximum Protected Net Retention Per Risk	0

	B. AUTOMATIC CAPACITY	Own damage (R'000)
4	Maximum Amount of Non-Proportional Risk Capacity Purchased	0
5	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0
6	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)	
7	Treaties on losses occurring or claims made basis	_

8 If on losses occurring, please comment on your ability to purchase cover in the future and any precautionary measures you have taken:

9

### C. CATASTROPHE COVER

- 10 Maximum Amount of Catastrophe cover purchased
- 11 Please comment on the number of reinstatements on this treaty and their sufficiency

12

### C. PEAK EXPOSURES

_		3					
		Brief description of the Risk	Total Sum Insured	Annual Premium charged on the risk <i>R'000</i>	% Facultatively reinsured	Lead Reinsurer	% Participation
13	1	•	0	0	0.0%		0.0%
14	2		- 0	0	0.0%		0.0%
15	3		0	0	0.0%		0.0%
16	4		0	0	0.0%		0.0%
17	5		0	0	0.0%		0.0%

SHEET REFERENCE NUMBER

J10-99-A
CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

STATEMENT J10

REINSURANCE DETAILS REGARDING ENGINEERING
of ABC LIMITED

as at the end of financial period 30/06/2008

	A. EXPOSURE TO THE NET ACCOUNT	R'000
1	Maximum Unprotected Net Retention Per Risk	0
2	Maximum Protected Net Retention Per Risk	0

	B. AUTOMATIC CAPACITY	R'000
4	Maximum Amount of Non-Proportional Risk Capacity Purchased	0
5	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0
6	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)	
7	Minimum EML % without reference to the lead reinsurer	0

### C. PEAK EXPOSURES

	I IVC IDI	gest liaka						
	,	Brief description of the Risk	Total Sum insured	Estimated Maximum Loss (EML) R'000	Annual Premium charged on the risk R'000	% Facultatively reinsured	Lead Reinsurer	% Participation
8 [	1		0	0	0	0.0%		0.0%
9 [	2		0	0	0	0.0%		0.0%
10	3			0	0	0.0%		0.0%
11	4		0	0	0	0.0%		0.0%
12	5		0	0	0	0.0%		0.0%

AUDITORS	

SHEET REFERENCE NUMBER

### CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

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FINAL PRINTOUT DATE		_			2008/07/16 09:25
REIN	SURANCE DETAILS of A	TEMENT J11 REGARDING MISC BC LIMITED nancial period 30/00			
1 2	3	4	5	6	7

	A. EXPOSURE TO THE NET ACCOUNT	R'000
1	Maximum Unprotected Net Retention Per Risk	0
2	Maximum Protected Net Retention Per Risk	0

	B. AUTOMATIC CAPACITY	Own damage (R'000)
4	Maximum Amount of Non-Proportional Risk Capacity Purchased	. 0
5	Maximum Amount of Proportional Treaty Capacity Automatically available (incl. Auto Fac)	0
6	Nature of this Proportional Capacity (Surplus, Quota Share or AutoFac)	
7	Treaties on losses occurring or claims made basis	

If on losses occurring, please comment on your ability to purchase cover in the future and any precautionary measures you have taken:

9

### C. CATASTROPHE COVER

- 10 Maximum Amount of Catastrophe cover purchased
- 11 Please comment on the number of reinstatements on this treaty and their sufficiency

12

### C. PEAK EXPOSURES

	1110 14	igest risks					
		Brief description of the Risk	Total Sum Insured	Annual Premium charged on the risk <i>R'000</i>	% Facultatively reinsured	Lead Reinsurer	% Participation
13	11		0	0	0.0%		0.0%
14	2		0	0	0.0%	·	0.0%
15	3	· · _	0	0	0.0%		0.0%
16	4		0	0	0.0%		0.0%
17	5		0	0	0.0%		0.0%

### **ANNEXURE B**

FINANCIAL SERVICES BOARD - REGISTRAR OF SHORT-TERM INSURANCE

### SHORT-TERM INSURANCE QUARTERLY RETURN IN TERMS OF SECTION 35 OF THE SHORT-TERM INSURANCE ACT, 1998

THE PRESCRIBED RETURN MUST BE SUBMITTED BY ALL INSURERS REGISTERED TO TRANSACT SHORT-TERM INSURANCE BUSINESS IN TERMS OF THE SHORT-TERM INSURANCE ACT, 1998.

FOR THE SAKE OF CONSISTENCY AND COMPLETENESS OF STATISTICAL INFORMATION COMPILED FROM THE RETURNS, IT IS ESSENTIAL THAT INSURERS COMPLETE ALL ITEMS WHICH SHOULD OR CAN BE COMPLETED. NO ITEMS MAY BE DELETED AND OTHER ITEMS INSERTED IN THE PLACE THEREOF.

### **DISCLAIMER:**

This spreadsheet was designed by the Financial Services Board and it may be copied.

However, the Financial Services Board accepts no responsibility for any loss or damage arising from its use, nor for any decision made by the insurer based on information or calculations made by, or obtained from the spreadsheet.

### INFORMATION REGARDING THE QUARTERLY RETURN

Reinsurers need not complete this return.

### HOW TO COMPLETE AND SUBMIT THE QUARTERLY SPREADSHEET:

- 1. The spreadsheets must be completed in Excel.
- 2. The return is cumulative from the start of the insurer's financial year to the latest quarter end.
- 3. This return consists of four sheets with "Prudential" relating to financial matters, "Spreading of assets" relating to the kind and spread of assets as contemplated in Section 30 of the Act and " Directors, Officers and Auditors" to the statutory information on the directors, executive management, public officer and the auditors.
- 4. Income and expenditure figures should exclude value added tax (VAT).
- 5. All figures should be rounded off to the nearest thousand rand.
- 6. An originally signed copy of the return must be submitted, even if it is a nil return, to Insurance Prudential Department, Financial Services Board, Rigel Park, Rigel Avenue South, Erasmus Rand South 0181
- 7. The electronic copy of the return must be e-mailed to: prudential@fsb.co.za
- 8. This information page need not be printed.

### NOTE:

ONLY SHADED AREAS, 6	.g.
REQUIRE FIGURES OR INFO	RMATION TO BE ENTERED
WHERE APPLICABLE. ALL	OTHER AREAS (PROTECTED
CELLS) WILL CONTAIN AUT	OMATIC CALCULATIONS,
INFORMATION OR DATA OF	R MUST REMAIN BLANK.
NO CHANGES MAY BE EFFE	ECTED TO THESE PROTECTED
AREAS (CELLS).	

THE RETURN MUST BE PRINTED AND SUBMITTED, EVEN IF NIL.

FINANCIAL SER	VICES BOARD.				SHORT-TER	M INSURANCE ACT 1998 (ACT) - SECTION		
	NAME OF INSURER:						#VALL	JEI
RETURN FOR TI	HE PERIOD				TO		adababababababababababababab	communicated at a test at
Prepared by :						Telephone No. and ext.		
OPERATING ST	ATEMENT - TOTAL				R'000		This	Previous
						_	quarter	quarter
Gross premiums							end	end
	Domestic					ASSETS	R'000	R'000
ľ	Foreign				::::::::::::::::::::::::::::::::::::::		100000000000000000000000000000000000000	<u>:::::::::::::::::::::::::::::::::::::</u>
Reinsurance					0		1-1-1-1-1-1-1-1-1-1-01	:-:-::0
Į.	Proportional				Q	Balances with banks	:::::::::::::::::0:	0
1	Non-proportional				0	Gilts	0	, · · · · · · · · · · · · · · · · · · ·
Net premiums wri	itten				C	Outstanding premiums	::::::::::::::::::::::::::::::::::::::	
	Domestic				0	n - '	0:	0
	Foreign					Long term policies-linked	0	
	roreign	0%		Retained		Long term policies-non linked	o o	
	Premiums eamed	076		Retailled			0	
<b>.</b>					o			
То	{ LESS: Claims incurred				Q		0.	
agree	{ Commissions					Debtors		
with	Expenses incurred				0	Shares - Quoted	<u></u>	0
B,C,D	(				_	- Unquoted		0
totals	{ Underwriting surplus				0	o into in arms a moto		
ľ						Land & buildings	-:-:-:::::::::::::::::::::::::::::::::	0
1	ADD: Investment income				· · · · · · · · · · · · · · · · · · ·	Fixed assets	·:-:::::::::::::::::::::::::::::::::::	0
	Realised investment surplus					Other assets	· · · · · · · · · · · · · · · · · · ·	
Sub total :		0%		of n.p.w.	0	(1) TOTAL ASSETS	0	(
Unrealised invest	tment surplus				0	Foreign Asset (Included in total assets)	: : : : : : : : : : : : : : : : : : :	
Any other income					· · · · · · · · · · · · · · · · · · ·			
	erve decrease/(incr.)				D		7	
Contingency rest	orve decrease/(mor.)					- LIADIEITIES		
D-4 tti							_	
Before taxation	(0:					Hanarand aremium provinian	***************************************	·····
LEGG. EST. taxatio	on (Current + def.)				0		0.1	<del></del>
	Dividends declared							
						IBNR	0	
INCREASE/(DEC	R.) IN SURPLUS ASSETS				0		0.	
						Unexpired risk provision	0	·····•••••••••••••••••••••••••••••••••
1						Due to insurers & reinsurers		Φ
NET UNDERWRI	ITING RESULTS PER CLASS - I	3'000				Reinsurance deposits	0	0
						Bank overdrafts	O.	0
	(A) (B)	(C)	(D)	(E)	(F)	Provision for taxation	0.	0
	Premiums Retention	Claims	Commission	Expenses	Underwr.	Provision for deferred tax		ò
	written %	incurred			surplus	Contingent liabilities	· · · · · · · · · · · · · · · · · · ·	o
	WILLOW   70	mounted			_ ourpido	Other (Specify):	0:	
Property	:::::::::::::::::::::::::::::::::::	1-1-1-1-1-1-1-10-1	· · · · · · · · · · · · · · · · · · ·	:-:-:::::::::::::::::::::::::::::::::::	::::::::::::::::::::::::::::::::::::::	Carlor (opcony).	0	·····
Transportation	0 0%		· · · · · · · · · · · · · · · · · · ·				0:	
Motor	D: 0%		o l	· · · · · · o				
		ŏ	o o	· · · · · · · · · · · · · · · · · · ·			0	
Accident & Health						4- /		
Guarantee	D.	0				Foreign liabilities incl in total liabilities	:::::::::::::::::::::::::::::::::::::::	.·.· <u>·.·</u>
Liability	D:							
Engineering	D:::::0%		0:			ASSET COVER - DOMESTIC + FOREIG	IN (WORLD WIDE	)
Miscellaneous	0: 0%	······································			0			
TOTALS	0 0%	0	0	0	0	Premium income, less		
						all reinsurance:		
Note: Net premi	iums earned = (C)+(D)+(E)+(F)					(3) 12 months preceeding		
	(-, (-, (-,					previous financial year end	:::::::::::::::::::::::::::::::::::::::	:·:·::::::::::::::::::::::::::::::::::
			%	%	%	(4) 12 months immediately		_
AUTOMATIC		%						
AUTOMATIC		% Claims		Expenses/		preceding the calculation		0
CALCULATIONS:	:	Claims	Commission/	Expenses/ written	Underwr. surplus/	preceding the calculation	0	:::::::::::::::::::::::::::::::::::::::
CALCULATIONS: Percentages to	:			Expenses/ written	surplus/			0
CALCULATIONS:		Claims incurred/	Commission/			(5) Greater of (3)or(4)	0	(
CALCULATIONS: Percentages to premiums>	:	Claims incurred/ earned	Commission/ written	written	surplus/ written	(5) Greater of (3)or(4) (6) 15% of (5)		(
CALCULATIONS: Percentages to premiums> Property	:	Claims incurred/ earned	Commission/ written	written 0.0%	surplus/ written	(5) Greater of (3)or(4) (6) 15% of (5)	0	(
CALCULATIONS: Percentages to premiums> Property Transportation	:	Claims incurred/ earned 0.0% 0.0%	Commission/ written	0.0%	surplus/ written 0.0% 0.0%	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2)	0	(
CALCULATIONS: Percentages to premiums →> Property Transportation Motor	:	Claims incurred/ earned  0.0%  0.0%  0.0%	Commission/ written  0.0%  0.0%  0.0%	0.0% 0.0% 0.0%	surplus/ written 0.0% 0.0% 0.0%	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of	0 0	(
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health		Claims incurred/ earned 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0%	surplus/ written 0.0% 0.0% 0.0%	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million	0	(
CALCULATIONS: Percentages to premiums>  Properly Transportation Motor Accident/Health Guarantee	:	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0%  0.0%  0.0%  0.0%  0.0%  0.0%	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3,000
CALCULATIONS: Percentages to premiums>  Property Transportation Motor Accident/Health Guarantee Liability		Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million Net surplus assets	0 0	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer		Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	(5) Greater of (3)or(4) (6) 15% of (5)  (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets }	3,000 3,000	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets (7) to premiums (5) }	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer		Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets (7) to premiums (5) }	3,000 3,000	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC	3,000 3,000	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all	3,000 3,000	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance	3,000 3,000	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance (8) 12 months preceding previous	0 0 0 3,000 -3,000	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end	3,000 3,000	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding	3,000  -3,000  -3,000	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end	0 0 0 3,000 -3,000	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding	0 0 0 3,000 3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding	3,000  -3,000  -3,000	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous		Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation	0 0 0 3,000 3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS	r	Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation	0 0 0 3,000 3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS	r 	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer c	r <u>sets</u> surrently comply with the kinds ar	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 3,000 0%	3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of If yes furnish the fe	sets currently comply with the kinds ar ollowing information:	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months innediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000
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CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of fyes furnish the frotal domestic Ast Total domestic liability	sets zurrently comply with the kinds ar ollowing information: sets	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of tyes furnish the for Total domestic As: Total domestic liat Individual excess	sets surrently comply with the kinds ar following information: sets bilities	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW  R'000 0 3,000 0	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of the spreading of the service	s <u>ets</u> currently comply with the kinds ar ollowing information: sets bilities	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000
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CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of the spreading of the service	s <u>ets</u> currently comply with the kinds ar ollowing information: sets bilities	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of the spreading of the service	s <u>ets</u> currently comply with the kinds ar ollowing information: sets bilities	Claims incurred/ earned  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Contract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of the spreading of the service	sets currently comply with the kinds ar ollowing information: sets bilities admitted assets over total dome:	Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5)  (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC  Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW  R'000  0 3,000 0 -3,000	0 0 0 3,000 -3,000 0%	3,000 -3,000 0%
CALCULATIONS: Percentages to premiums> Property Transportation Motor Accident/Health Guarantee Liability Ontract/Engineer Miscellaneous OF TOTALS  Spreading of Ass Does the insurer of the spreading of the service	s <u>ets</u> currently comply with the kinds ar ollowing information: sets bilities	Claims incurred/ earned	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0%	surplus/ written  0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.	(5) Greater of (3)or(4) (6) 15% of (5) (7) Surplus assets (1-2) LESS: The greater of (6) or R 3 million  Net surplus assets % of surplus assets } (7) to premiums (5) }  ASSET COVER - DOMESTIC Domestic premium income less all Reinsurance (8) 12 months preceding previous financial year end (9) 12 months imediately preceding the calculation  Surplus domestic asset % of Dom NPW	0 0 0 3,000 -3,000 0%	3,000 -3,000 -3,000

		SPRE	PPEAD OF DOMESTIC ASSETS (RICLUDING FOREIGN ASSETS DEEMED TO BE DOMESTIC)	ESTIC ASS	ETS (RYCLU	DING FORE	IGN ASSET	SOEEMED	TO BE DON	estic)	
						1900/01/00					
-	2	3	4	2	9	7	8	ത	9	=	12
Domestic assets must exceed the following:	000'8	Domestic asserts and	ADD Assets	LESS		Maximum	Maximum admissible for each item of this statement	or each item it	Admitted for	NOTE - ITEMS 4 + 5, 13 + 14 :	
		foreign assets	of asset- holding	excesses excesses	Subtotals: Assets held	Per	Percentages	Total	each item (the lesser	Admitted values are the lesser of the individual or the total amounts	
Domestic liabilities, including additional asset 1 requirement		3.000 be domestic		debtors,	less			domestic liabilities *	of the	in the previous column	8,000
2 Asset-holding intermediaries' liabilities	0	Ĕ	linked	investments		Per reg. 3 to	Dispensatio	greater of	column or		
3 Total domestic liabilities	3,000	statement	_	property		the Act	ns given	the 2	subtotal)	Items 4+5: Individual	0
4 10		F'000	R'000	R'000	R'000	%	%	R'000	R'000	Total Admitted	00
		0	0	0	0	%0.0	%0.0	0	0	Items13+14: Individual	0
7 2. Debentures -non convertible		0	0	0	0	%0.0	%0.0	0	0	Total	0
		0		0	0	0.0%	0.0%	0	0	Admitted	0
9 Sub total		0	0	0	0	25.0%	0.0%	750	0		
	ures - Domestic				٥	20.0%	0.0%	1,500	0	CALCUI ATION OF FURTHER EXCESSES AND FINAL ADMITTED	
		٥		0	٥	40.0%	%0.0	1,200	0	VALUES	
12 Sub total		0	0	o	0	65.0%	%0.0	1,950	٥		R'000
	d to be Dom.	o		0	o	15.0%	0.0%	450	0	1 if Items 6+14+18+20 exceed 15% of liabilities, the excess is	0
-		0	٥	ō	0	•		0	٥		
		٥	0	0	0	10.0%	0.0%	300	0	2 if the admitted value of items 1 to 12	
		٥	0	0	٥	2.0%	%0.0	150	0	exceeds 70.0%	
		0	0	0	0	2.0%	0.0%	150	0	of total domestic liabilities, the excess is	0
		٥	0	0	0	2.5%	0.0%	75	0		
19 12, investment policies-non linked		0	0	0	0	-		0	0		
20 Total of Items 1 to 19		0	0	o	0	70.0%	0.0%	3,825	0	3 Overall admitted assets:  Total of the previous column, less 1 and 2 above	0
24 42 Marris december Demonstr		•		-	•	200	200	24		Committee of the state of the s	000
•	rita de la composition della c	0	7		5 6	2.070	800	ני ער		- 1	200'5
23 Sub total	Dolleson	5 6			9	2.0.0	8 6	27			
					5	2.5	800	2			
24 15, Cash		٥	0	0	ō			0	0		
25 16. Krugerrands		0	0	0	0	10.0%	%0:0	300	0		
		0	0 0	0	0		,	0	0		
	hed to be Dom.	٥		0	0	15.0%	0.0%	450	٥		
		0		0	0			0	٥	DATE OF ANY DISPENSATION GRANTED FROM	
29 20. Securities - Foreign, deemed to be Domestic	estic	0			0	15.0%	%0:0	450			
30 Total of items 21 to 29		0	0	0	0			_	0		
31 Overall total		0	0	0	0			_	0		

REPORTING PERIOD	[6] TO [6] [6] [6] [6] [6] [6] [6] [6] [6] [6]				
Full Names & Surname	Date appointed	Date resigned	Identity/ Passport Number	Position held	
1	2	3	4	5	
DIRECTORS					
<del></del>					
	**************************************				
Alternate Directors	[Particle Particle Pa			400000000000000000000000000000000000000	
			ninininininininininininininininininini		
			<u>andranananananananananananananananananan</u>		
Managing Executives	[1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,			111.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
Public Officer					
ials and surname					
(including area code)	**************************************				
ephone (including area code) ( (including area code) Iphone					
nail					
Auditor 1					
Responsible Partner					
Auditor 2					
Auditor 2 Reponsible Partner					
reponsible rattilet	<u>runututanunun<sub>u</sub>nanunununutunutunutu</u>	<u></u>		Ŀ	

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