

# Data Transmittal Memorandum State Certification Work-Product

**Username** \_\_\_\_\_

**Password** \_\_\_\_\_

**Existing Plan Name** \_\_\_\_\_

**Existing Plan ID** \_\_\_\_\_

## **New Valuation Only**

### **Plans and Addressees**

Unless otherwise indicated, use the presently stored data with respect to Addressees and Plans.

### **Valuations**

**Valuation Number** \_\_\_\_\_

**Subject Plan Year: Beg. Month** \_\_\_\_\_ **End Month** \_\_\_\_\_

**Prior Year Run-Out Claims** \_\_\_\_\_

**Claim Reserve % Year End** \_\_\_\_\_

### **Beginning Assets**

**Cash and Allocated Assets** \_\_\_\_\_

**Separate Plan Investments** \_\_\_\_\_

**Other Plan Assets** \_\_\_\_\_

### **Income and Outgo**

**Total Plan Contributions** \_\_\_\_\_

**Interest Credited** \_\_\_\_\_

**Stop-Loss Recoveries**

**Specific Stop-Loss**

\_\_\_\_\_

**Aggregate Stop-Loss**

\_\_\_\_\_

**Other Income**

\_\_\_\_\_

**Increase in Separate Invest**

\_\_\_\_\_

**Paid Claims**

\_\_\_\_\_

**Administrative Fees**

\_\_\_\_\_

**Stop-Loss Premiums**

**Specific Stop-Loss**

\_\_\_\_\_

**Aggregate Stop-Loss**

\_\_\_\_\_

**Consulting Fees**

\_\_\_\_\_

**Insurance Premiums**

\_\_\_\_\_

**Other Outgo**

\_\_\_\_\_

**Decrease in Separate Invest.**

\_\_\_\_\_

**Ending Assets**

**Cash and Allocated Plan Assets**

\_\_\_\_\_

**Separate Plan Investments**

\_\_\_\_\_

**Other Plan Assets**

\_\_\_\_\_

**Accrual Adjustments**

**Plus Claim Reserve (Incd. Not Paid)**

\_\_\_\_\_

**Less Stop-Loss Claims Recoverable**

\_\_\_\_\_

**Plus Stop-Loss Premiums Due and Unpaid**

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**Plus Other Plan Payables**

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**Less Other Plan Receivables**

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