CALIFORNIA EARTHQUAKE INSURANCE PREMIUM, EXPOSURES & POLICY COUNT DATA CALL SIGNATURE PAGE

| California : | Insurance Code |
|--------------|----------------|
| Section | 10089.13(a) |

| Company or Group Name | Company NAIC Code | Group Code |
|-----------------------|-----------------------|------------|
| , , , | | |
| | | |
| Address | City, State, Zip Code | |
| | | |

Please mark the appropriate box:

Our Company did not write these types of property coverage business: Fire, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability), and/or Earthquake business in 2021.

Data Collection Workbook (Excel) is hereby submitted (due no later than March 15, 2022).

Under penalty of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

| Signature of the Officer | Date | |
|---|----------------------------------|------------|
| Name of the Officer (please print) | Phone Number | Fax Number |
| Title of Officer | E-Mail Address of Officer | |
| Name of the Contact Person (please print) | Phone Number | Fax Number |
| Title of Contact Person | E-Mail Address of Contact Person | |