



CALIFORNIA DEPARTMENT OF INSURANCE 2014 GOVERNING BOARD DIVERSITY SURVEY

ADDENDUM A

Each company reporting as part of a group must complete Addendum A and submit it with the **Group Report**.

GROUP NAME: _____
GROUP NAIC NUMBER: _____

1. Company Name: _____
2. Company NAIC Number: _____
3. How many people:
 - a) Serve on this company's Board of Directors? ____
 - b) Of those in "a)," how many identify as:
 - i. Women ____
 - ii. Men ____
 - c) Of those in "a)," how many:
 - i. Are Disabled Veterans? ____
 - ii. Publicly Identify as LGBT (Lesbian, Gay, Bisexual, and/or Transgender)? ____
 - d) Of those in "a)," how many identify as:
 - i. American Indian? ____
 - ii. African American? ____
 - iii. Asian Pacific Islander? ____
 - iv. Hispanic / Latino? ____
 - v. Multi-Ethnic? ____
 - vi. Caucasian? ____
 - vii. Other ____
4. Is this company's governing board comprised solely of internal employees (i.e. senior management) of the insurance company or group?
 Yes No