ISD - 2013 Report Form A:

Pursuant to California Insurance Code Section 927(b), the information provided below will be made available to the public.



Print Form

Con	pany NAIC/GROUP Number:
AND SERVICE	pany/Group Name:
1019403120	ISSION TYPE: GROUP: Yes INDIVIDUAL COMPANY: Yes
Plea	e provide the requested information below:
1.	oes your company have a supplier diversity policy statement? Yes No
	yes, please provide the supplier diversity policy statement below. Additionally, if the statement is available nline, please provide the link below.
	no, please explain below. Additionally, please include if the company plans to have a supplier diversity policy atement in the next 12 months.
	ease explain/discuss the outreach and communications of your company/group to minority, women, and sabled veteran business enterprises, including:
á	Explain/discuss how the insurer encourages and seeks minority, women, and disabled veteran owned business enterprises to become potential suppliers.

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information.

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	in/discuss how the insurer supports organizations that promote or certify minority, women, and led veteran-owned business enterprises.
	ISD-2013 Workbook A. ISD- 2013 Workbook A consists of two worksheets. The worksheets are Info" and "CoInfo-Part II".
	CoInfo: Please provide your company information and whether you will be reporting as a group or individual company. CoInfo-Part II: If you are reporting as a group, please provide details on which companies or affiliates are part of the group.
Complete	Forms A1 and A2
a.	Provide on Form A1 information about which procurements are made from minority, women, and disabled veteran business enterprises with at least a majority of the enterprise's workforce in California, with each category aggregated separately (to the extent that information is readily accessible).
b.	OPTIONAL: An insurer may also include other relevant information in Form A2 for those enterprise outside of California ("Non-California") or that do not fall under any category in Form A1.
There	is also a text box on the bottom of both Forms A1 and A2 where you may include other relevant

ISD - 2013 Report Form A:



Pursuant to California Insurance Code Section 927(b), the information provided below will be made available to the public.

5. P	Provid	information regarding appropriate contacts at the insurer for interested business enterprises.	
а	ı. C	ntact Name (Optional):	
b		e (Optional):	
С	. Р	one Number:	
d	. E	nail Address:	
е	. M	iling Address:	
f.	V	bsite (Optional):	
If not	ren	tina:	
the ar	rea b	pany does not enter into contracts to procure goods or services in California, please file a statement in low attesting that your company does not enter into procurement contracts in California. This would equirements of California Insurance Code Section 927 et al.	

Insurer Supplier Diversity Data Call Form A1 CALIFORNIA DIVERSE SUPPLIERS

Please Note: For each of the following tables, if you have Collifornia diverse supplier contract(s) valued at less than \$50,000 each and would like to seport that information, please do so in the text box on the bottom of Form A1.

If the requested information is not readily available for any of the following tables, please also note this in the text box of Form A1.

CDI may request additional information to verify reported data.

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Insurer Supplier Diversity Data Call Form A1 CALIFORNIA DIVERSE SUPPLIERS

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Statistical Analysis Division

Insurer Supplier Diversity Data Call Form A2 - OPTIONAL NON-CALIFORNIA DIVERSE SUPPLIERS

Please Note: For each of the following tables, it you have non-California diverse supplier contract(s) valued at less than \$50,000 each and would like to report that information, please do so in the fext box on the bottom of Form A2.

If the requested information is not readily available for any of the following tablos, please also note this in the text box of Form A2.

CDI may request additional information to verify reported data.

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Insurer Supplier Diversity Data Call Form A2 - OPTIONAL NON-CALIFORNIA DIVERSE SUPPLIERS

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- Legend
 1, WBE; Women business enterprise
- 2, MBE: Minority business enterprise
- The Control of Co

- 5. LGBIBE: Letblan, Gay, Bisexual, Transgender business enterprise
 6. Multi-Ethnic: Diverse Supplier represents more than ane attractly
 7. Other Diverse certification type not listed or uncertified diverse vendor.

Additional information If there is other relevent information you wish to provide, please include this in the fext box below.						