

## 2024 DUES PREMIUM REQUEST

Please return this form by Friday, September 8, 2023

Pursuant to the Board's request, please complete this premium request and return to this office so that dues for 2024 can be established and billing completed. Thank you.

Direct property and casualty premiums written in Wisconsin in 2022\* \$ \_\_\_\_\_

Less dividends, if any \$ \_\_\_\_\_

Net direct premiums \$ \_\_\_\_\_

Name of Company: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Date: \_\_\_\_\_

\*This information is typically available in the annual statement either in the "Exhibit of Premium and Losses (Statutory Page 14 Data)-Business in the State of Wisconsin" or the "Schedule T Exhibit of Premiums Written." Please provide a copy of this page with this form.

**Please return this form to one of the following:**  
Please return this form by Friday, September 8, 2023

E-mail to: [kkahl@wisinsalliance.com](mailto:kkahl@wisinsalliance.com)

Wisconsin Insurance Alliance  
44 E. Mifflin St., #901  
Madison, WI 53703

Fax to: 608-255-2178

Questions: 608-255-1749 or 608-220-2750

*If you would like this form sent to someone other than you next year, please send me the name and email address of that person. Thank you. Karla Kahl – [kkahl@wisinsalliance.com](mailto:kkahl@wisinsalliance.com)*