



INDUSTRIAL LOAN COMMISSIONER

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER • COMPTROLLER GENERAL

John W. Oxendine, Commissioner

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www.gainsurance.org

INDUSTRIAL LOAN
GID-012-IL NOV08

QUARTERLY INSURANCE AND LOAN REPORT

Licensees must submit return to be in the Commissioner's office by the 20th of the month following end of quarter. Any changes in ownership and/or location of a licensed office must be registered with the Industrial Loan Commissioner. A completed copy of this return must be filed locally at each licensee's office.

NAME ▶	
STREET ▶	
CITY ▶	ZIP ▶

Insurance Agent's Name	Insurance License No
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Type of Insurance	Policies Issued	Premiums Charged	Premiums Refunded	Net Premiums	Claims Paid	Amount Paid	Name of Insuring Company
Credit Life							
Credit A & S							
Household Goods Fire							
Auto Collision							
NRI							
TOTALS							

REPORT OF CHANGES IN LOAN AND INTEREST BALANCES DURING QUARTER ENDING		Month	Year
Cash Basis *	Accrual Basis		
* Shaded areas are not to be filled in if reporting on the cash basis.		GROSS LOANS (NOTE 1)	INTEREST (NOTE 2)
1. Beginning Balance (Same as Line 9 of previous report)		\$	
2. ADD Loans Made During Quarter		+	+
3. ADD Recovered Loans (Previously charged off)		+	+
4. Totals of Lines, 1, 2, and 3		\$	\$
5. SUBTRACT Loans Charged Off As Uncollectible (See Note 3)		-	-
6. SUBTRACT Refunds (See Note 4)		-	-
7. SUBTRACT Loans Sold or Transferred		-	-
8. SUBTRACT Collections (See Note 5)		-	-
9. Ending Balances, Line 4 minus Lines 5, 6, 7 and 8		\$	\$
10. Net Interest Charged During Quarter (Cash Basis Only; Line 4 minus 5 and 6)			\$

COMPUTATION OF INDUSTRIAL LOAN TAX LIABILITY		
11. Gross Tax (Cash Basis: Multiply Line 10 by 3 per cent) (Accrual Basis: Multiply sum of Lines 7 and 8, "Interest" Column, by 3 per cent)		\$
12. Estimated Tax Paid 1 st Month of Quarter _____, 20____		\$
13. Estimated Tax Paid 2 nd Month of Quarter _____, 20____		+
14. Other Credits		-
15. Total Credits (Add Lines 12, 13 and 14)		
16. NET TAX DUE – If Line 15 is less than Line 11, enter difference here and remit in full with this form		
17. PENALTY – (Line 16 times 25%)		
18. TOTALS – (Add Lines 16 and 17)		
19. NET OVERPAYMENT – If Line 15 is greater than Line 11, enter difference here and refund or credit will be made		\$

ATTESTATION

Under penalties of perjury, the below named, affirms that all the foregoing information submitted, including any accompanying documentation, was completed in good faith, is true, complete and correct to the best of my knowledge.

(Name of Attestator)	(Position Title of Attestator)	(Date)
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Make Remittance to John W. Oxendine at above address