Report Name: Escrow Register Detail Report

Exhibit Number: 8-1 Version: Approved
Release Date: 7/1/2022

Escrow Register Detail

AIP Name XYZ Insurance Company AIP Code XX Account 1234567890 RY 20XX

Date XX/XX/XXXX

Total Requested Amount \$99,999.00
Previous Requested Amount \$0.00

Payment Amount \$99,999.00

Previous Y-T-D Total \$N/A

Reinsurance Year Total \$99,999.00 **Cumulative Y-T-D Total** \$99,999.00

Reinsurance Year: 2023

State	Policy Issuing Company	Policy Number	Name	Claim Number	Requested Amount	Previous Amount	Payable Amount
10	999	999999	Sample Farms	1234	\$99,999.00	\$0.00	\$99,999.00