

RO XX		FCIC REINSURANCE RUN					REIPRT01
COMPANY NAME		STATE RECAP					
		REINSURANCE YEAR - YYYY					
		CURRENT DATE: MM/DD/YYYY HH.MM.SS		CUTOFF DATE: MM/DD/YYYY			
STATE	POOL	PERCENT	LIABILITY	PREMIUMS	LOSSES	LOSS RATIO	
XX							
	COMMERCIAL	99.9	999,999	999,999	999,999	99.9	
	ASSIGN RISK	99.9	999,999	999,999	999,999	99.9	
	SUBTOTAL 1		999,999	999,999	999,999	99.9	
	COMMERCIAL	99.9	999,999	999,999	999,999	99.9	
	ASSIGN RISK	99.9	999,999	999,999	999,999	99.9	
	REVISED SUBTOTAL 1		999,999	999,999	999,999	99.9	
	COMMERCIAL	99.9	999,999	999,999	999,999	99.9	
	ASSIGN RISK	99.9	999,999	999,999	999,999	99.9	
	RETAINED SUBTOTAL 2		999,999	999,999	999,999	99.9	
	COMMERCIAL	99.9		999,999	999,999	99.9	
	ASSIGN RISK	99.9		999,999	999,999	99.9	
	SUBTOTAL 3			999,999	999,999	99.9	
	COMMERCIAL GAIN/LOSS			999,999			
	ASSIGN RISK GAIN/LOSS			999,999			
	STATE GAIN/LOSS			999,999			