Report Name: Escrow Bank Reconciliation Report Exhibit Number: 8-4	Reinsurance Year: Version: Release Date:	Comment
AIP Name Address		
Account Number		
MPCI REINSURED COMPANY	,	
PROVIDENT ESCROW ACCOUNT RECOM	ICILIATION	
Current Date		
BALANCE PER STATEMENT		
AS OF Current Date		
ESCROW REQUESTS IN TRANSIT 0.00)	
TOTAL DEBITS	0.00	
OUTSTANDING CHECKS		
AS OF Current Date	=	
INTEREST (as listed on the bank statement)		
	0.00	
TOTAL CREDITS		0.00
OVERAGE(+)/SHORTAGE(-)		0.00
TOTAL		0.00
		0.00
Reconciliation Preparer		
Date		
Supervisor		
Date		

	Report Name: Escrow Bank Reconciliation Report Exhibit Number: 8-4				ar: 2026 on: Comment te: 3/13/2025
AIP Name					
IN-TRANSIT Current Date	2				
				Optional	Optional
RY	POLICY	CLAIM	AMOUNT	CHECK NUMBER	CHECK DATE
This Tab Sho		the current month the	at most the following criter	ia.	
All outstandi	-		at meet the following criter onth (the month of the reco		
		-	bmitted to RMA in the curr		
	- The funding f	rom KMA was not rec	eived durring the current n	ionth	
	was cashed before Shortage tab as a S		n and funding has still not b	een recieved then the	check should be in the
* If the check Shortage.	x was written in a pi	ior month and still ha	is not been funded it should	be listed on the Over	age and Shortage tab as a

	Report Name: Exhibit Number:	Escrow Bank Reco 8-4	nciliation Report	Reinsurance Year: Version: Release Date:	Comment			
AIP Name								
CHECK REGISTER								
Current Date				Total:				
RY P	OLICY	CLAIM	CHECK#	CHECK DATE				
				udlage if the starture				
This tab should cor	ntain all checks that v	vere written during ti	he current month rega	This tab should contain all checks that were written during the current month regardless if the check was cashed or voided.				

	-	Name: Escrow Bank umber: 8-4	Reinsurance Year: 2026 Version: Comment Release Date: 3/13/2025	
AIP Name OUTSTANE	DING			
Current Date			Total	
RY	POLICY	CLAIM	CHECK#	CHECK DATE
This tab sh	ould contain all outst	anding checks from cu	rrent and previous periods	that have not been cashed by the producer.

i. Send a letter to the insured whose outstanding indemnity check is within 45 days of one year old to inform the insured that the check will be voided if it is not cashed within 45 days. The AIP must also offer to issue a replacement check in the event the insured cannot locate the original check. The insured must be given 45 days to either 1) cash the original check, or 2) request a replacement check.

ii. If the insured requests a replacement check the AIP should void the original check and process a new check.

iii. If the insured does not request a replacement check or cash the original check within the 45 days the AIP should take the following action:

1. Void the insured's original check.

2. Submit to FCIC a listing for all voided checks that includes the related reinsurance year, policy number, claim number, check number, and amount. This list must be accompanied by a check reimbursing FCIC for the full amount of the listed voided checks. AIPs must not make any changes to the loss data submitted through PASS.

3. In the instance the insured requests repayment after the check has been voided, the AIP will issue a new check to the insured and submit to FCIC a manual escrow register with the policy number, claim number, and check information. FCIC will manually fund the escrow account for the reissued check amount.

	Report Name: Exhibit Number:		conciliation Report	Reinsurance Year: Version: Release Date:	Comment
AIP Name					
CLEARED					
Current Date				Total	
					Optional
RY	POLICY	CLAIM	CHECK#	CHECK DATE	CLEARED DATE

		Report Nam hibit Numbo		k Reconciliation Report	Reinsurance Year: Version: Release Date:	Comment
AIP Name VOIDS Current Date					Total	Optional
RY Policy	Claim	Check#	Check Date	Amount Reissued (Y/N)	Reissued Check#	Reissued Check Amount
			hat were voided	in the current month.		

	Report Name: Escrow Bank Reconciliation Repo Exhibit Number: 8-4	ort Reinsurance Year: <mark>2026 Version: Comment Release Date: <mark>3/13/2025</mark></mark>
AIP Name		
MPCI REINSURED		
	DW ACCOUNT RECONCILIATION	
INTEREST Current Date		
DATE DEPOSITED	This should only list the current mon	th's interest (as listed on the bank statement)

	Report Name: Escrow Bank Reconciliation Rep Exhibit Number: 8-4	port Reinsurance Year: 2026 Version: Comment
		Release Date: 3/13/2025
	AIP Name	
	Current Date	
OVERAGES		
RY	Policy # Claim # Desc	cription Amount
Overages consist o	any amounts within the escrow account that are over a 1 Deposits from the AIP to cover am 2 Downward revisions on already pa 3 any other amounts within the acco	nounts not yet funded by RMA,
	Please provid	de a description of why the item is listed as an OVERAGE
		TOTAL OVERAGES
SHORTAGES		
RY	Policy # Claim # Desc	cription Amount
Shortages consist c	2 Checks the insured has cashed in the	led by RMA. This includes: by the AIP in previous months that RMA has not funded, the current month that have not been funded by RMA, he insured that have not been funded by RMA.
	Please provid	de a description of why the item is listed as a SHORTAGE
		TOTAL SHORTAGES
		NET BALANCE

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