

STATE OF SOUTH CAROLINA  
**DEPARTMENT OF INSURANCE**

PO Box 100105  
Columbia, SC 29202-3105

Capitol Center, 1201 Main St., Suite 1000  
Columbia, SC 29201

**QUARTERLY TAX RETURN INSTALLMENT FOR JUNE 1, 2007**

**CO CODE:**

**CO NAME:**

**NAIC CODE:**

<b>TOTAL AMOUNT OF TAXES DUE WITH THIS QUARTERLY TAX RETURN</b> Rounded to nearest Dollar (See Instructions)	<b>\$</b> .00
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\_\_\_\_\_  
Person Preparing Quarterly Tax Return

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
(Area Code) Telephone Number and Extension

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Columbia, SC 29201

**QUARTERLY TAX RETURN INSTALLMENT FOR SEPTEMBER 1, 2007**

**CO CODE:**

**CO NAME:**

**NAIC CODE:**

<b>TOTAL AMOUNT OF TAXES DUE WITH THIS QUARTERLY TAX RETURN</b> Rounded to nearest Dollar (See Instructions)	<b>\$</b> .00
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\_\_\_\_\_  
Person Preparing Quarterly Tax Return

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
(Area Code) Telephone Number and Extension

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**QUARTERLY TAX RETURN INSTALLMENT FOR DECEMBER 1, 2007**

**CO CODE:**

**CO NAME:**

**NAIC CODE:**

<b>TOTAL AMOUNT OF TAXES DUE WITH THIS QUARTERLY TAX RETURN</b> Rounded to nearest Dollar (See Instructions)	<b>\$</b> .00
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\_\_\_\_\_  
Person Preparing Quarterly Tax Return

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
(Area Code) Telephone Number and Extension