

Annex II

SEOJK Number: 2/SEOJK.05/2013

Dated: 27 August 2013

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To

Financial Services Authority

Directorate of Insurance Supervision

Sumitro Djojohadikusumo Building, 14th floor

Jl. Lapangan Banteng Timur 1 - 4

Jakarta - 10710

FINANCIAL STATEMENT

LIFE INSURANCE COMPANY

As Per ... / Quarter ... Year ...

PT XYZ

(Company's Address)

Financial Statement

Life Insurance Company

PT. XYZ

As Per .../ Quarter ... Year ...

- 1 Company Name** :
2 Full Address :
3 Telephone and Fax. :
4 E-mail :
5 Tax ID (NPWP) :
6 No. & Date of License :
7 a. No. of Branch/
Representative :
b. No. of Insured Parties :
8 External Auditor :
9 Shareholders :

Shareholders' Names	Share Ownership	
	Rupiah	Percentage
Total		

10 Directors and Commissioners:

Name of Director	Position	Name of Commissioner	Position

11 PIC of Financial Statement :

Name	Division/Department	Phone No. & ext.	Email

.....,

PT. Insurance

Director's Name

Director

Director's Statement
Regarding
Responsibility for Financial Statement
As Per .../ Quarter ... Year ...
PT XYZ

We, the undersigned, state that:

1. We are responsible for the preparation and presentation of PT XYZ (Company)'s Financial Statement;
2. All information contained in the Company's Financial Statement is presented completely and is in accordance with the actual conditions;
3. Company's Financial Statement does not contain information or facts that are materially inaccurate, and does not omit material information or facts.

This statement has been made truthfully.

.....,

Director of PT XYZ

Name

Position

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Life Insurance Company
PT. XYZ
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