STATE OF ALABAMA
DEPARTMENT OF INSURANCE
PREMIUM TAX STATEMENT
LEGAL SERVICE INSURANCE CORPORATION
On Business in Alabama for the Year Ending December 31, 20______.

Name of Company

_________________________________   _______________________________
City                                 State          Zip Code

1. Direct premiums received in Alabama or elsewhere
   For business done in Alabama $ _________

2. GROSS PREMIUM TAX (Line 1 x ____) $ _________
   Maximum Rate: 3.6% - See Worksheet

3. LESS
   (a) Ad valorem taxes paid for tax year next preceding
       Filing of this return on real estate and improvements
       Thereon in State of Alabama owned and at least 50%
       Occupied by company for full period of such tax year. $ ___________
   (b) 60% of Alabama privilege and franchise taxes paid $ ___________
   (c) All expenses of examination of company by
       Commissioner of Insurance of Alabama $ ___________

4. NET PREMIUM TAX DUE (Line 2 minus Line 3) $ _________

STATE OF ______________________
COUNTY OF _____________________

____________________________________________, President, and
____________________________________________, Secretary of the
Corporation being duly sworn, each for himself, deposes and says, that
they are the above described officers of said Company and that the
foregoing statement of business transacted during such year and showing
the true status of same on December 31, of such year, is full and
correct according to the best of their information, knowledge, and
belief, respectively.

__________________________________, President
__________________________________, Secretary

Subscribed and sworn to before me this _________ day of _________,
20_______.

(Seal)    My Commission Expires ____________
__________________________________
Notary Public