

## TEXAS DEPARTMENT OF INSURANCE OFFICIAL DOCUMENT REQUEST

[NOTE: Each & every item requested below must be provided.]

	HENCY		
AUDITOR DATE REQUEST TO AGENCY:			
1	List of all escrow bank accounts with the bank na	me and address and account	NOTES
١.	number.	ine and address and account	
2.	Copies of signature cards for each of the escrow accounts.		
3.	For the months of		
	, the bank		
	statements (including canceled checks and deposit tickets), bank reconciliations		
	(including lists of outstanding checks and deposits-in-transit), escrow trial balances, book balances and three-way reconciliations for the following accounts:		
	Bank	Account #	
	i.	Addding	
	ii.		
	iii.		
	iv.		
	V.		
	vi.		
	vii.		
4.	Accounts control ledger for escrow funds in intere	est-bearing accounts.	
5.	List of all operating accounts.		
6.			
	canceled checks) and reconciliations for the last s		
7.	Financial statements of the agency (balance sheet and income statement) for the		
0	most recent accounting period.	obligation about on the agency's	
8.	List showing the interest rate for each debt of balance sheet.	obligation shown on the agency's	
9.	List of all branch offices, licensed escrow officers,	and fee attorneys.	
	. List of all guaranty files with directly issued (home-office issued) policies for the		
	previous six months.	, .	
	Copy of all "Immediately Available Funds Agreem	, ,	
	Copy of statistical report for the most recent report	rting period.	
	Copy of chart of accounts		
	General ledger and subsidiary ledgers and journa		
	Access to invoice files and other supporting docu	mentation for financial statements.	
16.	Other:		
	>		
	>		
	>		
	>		