Report Name: CAT Fee Receivable Report
Exhibit Number: 2-4

Reinsurance Year: 2014
Version: Approved
Release Date: 9/27/2018

CAT FEE RECEIVABLE REPORT
REINSURED COMPANY DETAILED REPORT
REINSURANCE YEAR - YYYY

CFE003

COMPANY NAME
C/O Mga Name
CURRENT DATE : MM/DD/YYYY HH.MM.SS CUTOFF DATE : MM/DD/YYYY

TAX ID	ID TYP	PIC	ST	CNTY	POLICY NUMBER	CROP YEAR	CROP CODE	FEES AMOUNT	ADJ AMT	RET CHK AMT	INT AMT	AIP COLL FEE	FCIC COL AMT	BALANCE DUE	CO CAT FEE REDUCT AMT
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00		300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
XXXXXXXXX	XX	XXX			9999999	YYYY	9999	999	0.00	0.00	0.00	0.00	-	300	300
					TOTAL			99,999	99,999	99,999	99,999	99,999	99,999	99,999	99,999