COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE
P. O. BOX 3508 'S' Old San Juan Station
San Juan, Puerto Rico 00904

Circular Letter No. S-2-731-78
February 21, 1978

TO ALL INSURERS AUTHORIZED TO TRANSACT LIABILITY INSURANCE AND MALPRACTICE INSURANCE IN PUERTO RICO

Gentlemen:

Reference is made to our Circular Letter No. S-10-710-77 dated November 25, 1977, calling a meeting to elect the second Board of Directors of the Joint Underwriting Association for Physicians, Surgeons and Hospital Professional Liability Insurance.

Due to unforeseen circumstances, said meeting, which was going to be held on December 27, 1977, was postponed. The same is hereby called to take place on March 14, 1978, at 9:00 A. M. at the Office of the Commissioner of Insurance, Intendente Alejandro Ramírez Building, Second Floor, Paseo Covadonga, Stop 1, San Juan, Puerto Rico.

We enclose a Designation of Authorized Representative form to be executed only if you wish to change the one you already sent to this Office. If this is the case the new Designation must be executed and returned to us before the meeting.

Thank you for your cooperation.

Cordially yours,

Juan Antonio García

Juan Antonio García
Chief Deputy Commissioner
of Insurance

Enclosure

COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE
P.O. BOX 3508 - Old San Juan Station
San Juan, Puerto Rico 00904

Circular Letter No. S-2-731-78

DESIGNATION OF AUTHORIZED REPRENTATIVE

WHEREAS, _____ is an
(Insurer's Name)
insurer duly authorized to write liability and malpractice insurance in the Commonwealth of Puerto Rico and thus is a member of the Joint Underwriting Association for Physicians, Surgeons and Hospital Professional Liability Insurance.

WHEREAS, a meeting shall be held on December 27, 1977, to elect the second Board of Directors of said Association pursuant to Section 41.040(4) of the Insurance Code of Puerto Rico.

THEREFORE, _____ hereby
(Insurer's Name)
appoints and names Mr._____to be its representative and to vote on its behalf at said meeting and upon any question or questions which may come before such meeting.

This _____day of _____1977.

_____
President or Vice President

_____
Secretary or Subsecretary

Corporate Seal

COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE
P.O. BOX 3508 - Old San Juan Station
San Juan, Puerto Rico 00904

Circular Letter No. S-2-731-78

DESIGNATION OF AUTHORIZED REPRENTATIVE

WHEREAS, _____ is an
(Insurer's Name)
insurer duly authorized to write liability and malpractice insurance in the Commonwealth of Puerto Rico and thus is a member of the Joint Underwriting Association for Physicians, Surgeons and Hospital Professional Liability Insurance.

WHEREAS, a meeting shall be held on December 27, 1977, to elect the second Board of Directors of said Association pursuant to Section 41.040(4) of the Insurance Code of Puerto Rico.

THEREFORE, _____ hereby
(Insurer's Name)
appoints and names Mr._____to be its representative and to vote on its behalf at said meeting and upon any question or questions which may come before such meeting.

This _____day of _____1977.

_____
President or Vice President

_____
Secretary or Subsecretary

Corporate Seal

COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE
P. O. BOX 3508 - Old San Juan Station
San Juan, Puerto Rico 00904

Circular Letter S-2-731-78

SWORN STATEMENT

According to our best information, knowledge and belief we the undersigned do declare that the liability and malpractice net premiums written in Puerto Rico during calendar year 1976 by _____ were as follows:
(insurer's name)

Liability Insurance _____
(as defined in Section 4.080(1)
of the Insurance Code of P.R.)

Malpractice Insurance _____
(as defined in Section 4.080(10)
of the Insurance Code of P.R.)

_____ _____
President or Vice President Secretary or Subsecretary

Subscribed and sworn to before me this _____ day of

_____ 1977. My commission expires _____.

_____
Notary Public