



TEXAS AUTOMOBILE INSURANCE PLAN ASSOCIATION

MARGARET ALSOBROOK
OPERATIONS MANAGER

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«COMPANY_NAME_____»
«COMPANY_ALT_NAME_____»
«ATTENTION_NAME_____»
«ADDRESS_ONE_____»
«ADDRESS_TWO_____»
«ADDRESS_THREE_____»
«ADDRESS_FOUR_____»

STATES OF LICENSING

In an effort to update the present assignment system in the Association office, we request that you review the attached chart, showing the states in which your company is licensed and writing automobile liability insurance.

If your company is currently licensed and writing in any other state than the states shown or if you are no longer writing automobile liability insurance in one or more of these states, please amend the chart and return to the undersigned.

If you have any questions, please contact the undersigned at the above telephone number or by internet e-mail datamda@taipa.org.

Sincerely,

Margaret Alsobrook
Operations Manager

MDA:dr

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