

## TITLE INSURANCE AGENT AFFILIATED BUSINESS OWNERSHIP REPORT

Reporting period – January 1, \_\_\_\_\_\_ through December 31, \_\_\_\_\_

List all persons or business entities owning a financial interest in the title insurance agency who are known or reasonably believed to be producers, per RCW 48.29.010(3)(g), of title business or associates of producers.

Name	Percent of ownership	Percent of title orders originated

I certify the information provided on this form is complete and true.

Date

Physical address: 5000 Capitol Boulevard, Tumwater, WA 98501 US postal address: PO Box 40255, Olympia, WA 98504 Phone: 360-725-7144 www.insurance.wa.gov