Reset

Attn: TPA Registration Team
Arizona Department of Insurance
2910 North 44th Street, Suite 210
Phoenix, Arizona 85018-7269

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Form E-100-B: Life and Health Administrator Biographical List

Complete Form E-100-B to report the name and title of each individual counted in Form E-100, Item 13, Section E.

SECTION A: Applicant Identity	Department of Insurance Use:
Applicant Name:	

SECTION B: Biographical Affidavit List - *Type Name, type Title, and check either Add/New, Retain, Remove*		
Name:	Title:	☐ Add/New ☐ Retain ☐ Remove
Name:	Title:	☐ Add/New ☐ Retain ☐ Remove
Name:	Title:	☐ Add/New ☐ Retain ☐ Remove
Name:	Title:	☐ Add/New ☐ Retain ☐ Remove
Name:	Title:	☐ Add/New ☐ Retain ☐ Remove
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