



**DEPARTMENT OF INSURANCE  
STATE OF ARIZONA**

*Financial Affairs Division - Compliance Section*  
2910 North 44<sup>th</sup> Street, Suite 210  
Phoenix, Arizona 85018-7269  
Phone: (602) 364-3245  
Fax: (602) 364-3989  
[www.azinsurance.gov](http://www.azinsurance.gov)

**AUDITED FINANCIAL REPORT INTERNAL CONTROL FILINGS TRANSMITTAL FORM  
DUE **AUGUST 1****

**GENERAL INSTRUCTIONS:**

In addition to your Audited Financial Report (AFR), you are required to file with us, additional documents regarding internal controls that are prepared in accordance with the NAIC Annual Financial Reporting Model Regulation.

**THIS E-AFR.IC TRANSMITTAL FORM MUST BE COMPLETED AND ATTACHED TO THE INTERNAL CONTROL DOCUMENTS THAT ARE FILED WITH US BY **AUGUST 1**:**

1. **Communication of Internal Control Related Matters Noted in an Audit** – If no unremediated material weaknesses were noted, your communication must so state.
2. **Management’s Report of Internal Control Over Financial Reporting** – Must comply with Section 16 of the NAIC Annual Financial Reporting Model Regulation.

***A penalty fee of up to \$25 per day may be assessed for any part of your AFR that is filed late. ARS § 20-223.***

**SPECIAL INSTRUCTION FOR COMPANIES FILING CONSOLIDATED REPORTS:**

Each company in the group must separately file a copy of each internal control document with us along with a transmittal **Form E-AFR.IC** attached. A copy must be retained in each Annual Statement filed with us.

**IMPORTANT – ENTER THE CALENDAR YEAR OF THE ATTACHED FILING: \_\_\_\_\_**

Enter the NAIC number and name of the insurance company whose individual AFR is attached or on whose behalf a copy of a Consolidated AFR is attached.

\_\_\_\_\_  
**NAIC #**

\_\_\_\_\_  
**Name of Insurance Company**

**Check the boxes that apply to the attachments:**

- Communication of Internal Control Related Matters Noted in an Audit
- CHECK THIS BOX IF **NO** UNREMIEDIATED MATERIAL WEAKNESSES WERE NOTED
- Management’s Report of Internal Control Over Financial Reporting

\_\_\_\_\_  
Type or Print Name and Title

\_\_\_\_\_  
Telephone Number

Email Address: \_\_\_\_\_