



**ALABAMA DEPARTMENT OF INSURANCE**

**REGISTRATION OF COMPANY OFFICIAL  
AUTHORIZED TO APPOINT TEMPORARY PRODUCERS**

NAIC#

Company Name:

Authorized Company Officials:

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Last Name	First Name	Telephone #
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Last Name	First Name	Telephone #
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Last Name	First Name	Telephone #
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Submit:   via email:   Antwionne.Dunklin@insurance.alabama.gov  
          via Fax:       334-240-3282