



Vol.I,No.3, SEPTEMBER 1992

RECEIVERSHIP RAMBLINGS

Washington D.C., June

The Retreat for principal members proved worthwhile and pleasant. From it a Roundtable meeting of principal members has been scheduled preceding the NAIC meeting in September, Saturday, September 19th in the headquarters hotel, Omni Netherland Plaza, Fourth Floor, Salon B, 1 - 5 p.m.

For the annual NAIC meeting in December SIR will do another retreat on Saturday preceding the NAIC activities.

Publications Committee you will have received notice but our committee will meet immediately following the Cincinnati Roundtable at 5:00 p.m., same place for thirty minutes maximum.

Just look at what we're doing. See the article herein by Joyce Wainscott, super plaudits to the Education Committee and their first seminar!

HIGHLIGHTS

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SIR members, readers, this may appear elsewhere two or three times in the Newsletter but we can't print what we don't know and the success, the quality and impact of this Newsletter depends upon each of you. Send us articles, suggestions, reminders, we have much of which to be proud and let's tell each other and our industry about it.

THE NEW MODEL ACT THE NEW JERSEY EXPERIENCE

By: Gale P. Simon & Bernard J. Spaulding

When the National Association of Insurance Commissioners was considering a new model Rehabilitation and Liquidation Act, reinsurance companies argued forcefully for a provision therein allowing offsets for reinsurers. When the NAIC recently completed action on the Model Act, such a provision was not included, and the reinsurers vowed to fight for its inclusion and on a state-by-state basis. Recent experience in New Jersey indicated that such battles will be fought at a pitched level. In addition, tangential issues may also develop as a result of this controversy. The New Jersey experience has implications for receivers (this term is used generically hereafter in place of rehabilitators, liquidators, conservators, etc.) in each state where the new Model Act may be considered. *(continued on page 4)*

A WORD FROM THE PRESIDENT

I would like to again welcome aboard all the new members who have joined SIR since our December membership meeting. To date we have doubled our size in seven months to over 200 members world-wide.

SIR has been made an associate group of INSOL International, a world-wide federation of national associations of accountants and lawyers who specialize in the insolvency area ("member professionals"). The Federation was formed in 1982 and its mission is to take the leadership role in international insolvency issues and policies, and also to facilitate and exchange of information and ideas among member professionals and other constituencies affected by the insolvency process.

The retreat for principal members that was held on June 6th, was well received. Seventeen states, England and British Virgin Islands were represented. The group requested that retreats be held more than once a year.

SIR Activities Already Underway:

The Publications Committee under Nelson Burnett's chairmanship is to be congratulated for this their third newsletter.

The Education Committee, chaired by Jeanne Bryant has put together an excellent Training Seminar for the first and second of October, in Denver, Colorado. The Seminar Sub-committee is chaired by Joyce Wainscott. I thank the committee for all its hard work.

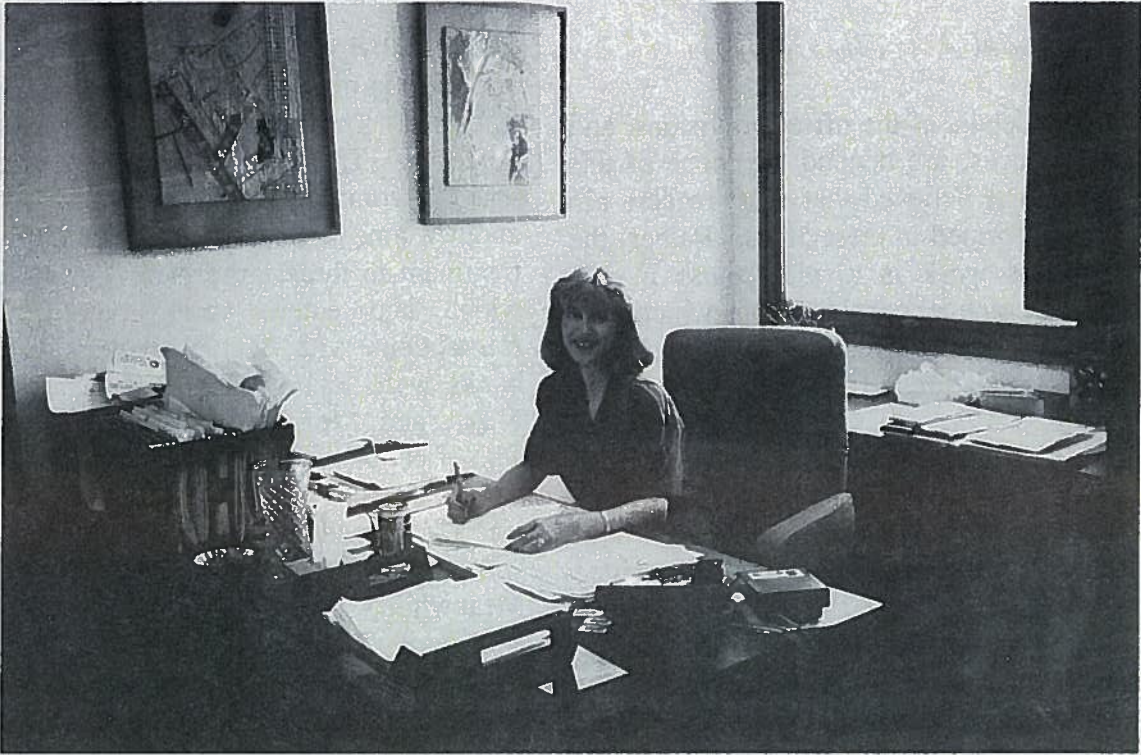
A round table of principal members (only) will be held on Saturday, September 19, 1992 at the time of the NAIC's Zone Meeting in Cincinnati, Ohio.

A retreat for principal members (only) is being planned for Saturday, December 5, 1992, at the time of the NAIC's Winter Meeting in Atlanta.

Three new committees are being formed. They are: 1. Guaranty Associations Committee, 2. Amicus Curiae Brief Committee, and 3. Dingell's Bill H.R. 4900 Committee. If you are interest in serving on any of these committees and are not currently serving on a committee please let me know.

I hope that everyone had a nice summer as we all look towards the fall's busy schedule.

*Sincerely,
Karen Weldin Stewart
President*



**President Karen W. Stewart
in SIR's OVAL Office**



**Retreat SIR vivors
Taken Prior To Obviously**

The New Model Act *Continued from page 1*

The technical details of the offset provisions, and their consequences, are beyond the scope of this article, since it is believed that most readers are already well informed in these areas. Rather, the purpose of this work is to alert those in our Society to the practical considerations which may arise when the Model Act is introduced in the various state legislatures.

Assembly Bill 1338 was introduced on April 30, 1992. It was promptly referred to the Insurance Committee, whose chairperson determined to hold hearings at a later date. The initial committee hearings were held in early May, and they produced a number of surprises. Hearings before the Assembly Insurance Committee were held on May 4, May 7, June 18 and June 29, 1992. Hearings before the Senate Commerce Committee were held on June 1 and June 8, 1992. The Commissioner appeared and testified in support of the bill at almost all of the hearings.

As one veteran Insurance Department observer of the legislature put it, "I don't believe I've ever seen so many lobbyists present for an insurance bill in my life." The Commissioner of Insurance testified that the Department of Insurance supported the bill in its form as the Model Act. Actually, this was very important to the Department. The bill included a provision which would make its effectiveness retroactive to cover rehabilitations already in progress.

The significance of the retroactivity could hardly be understated, since it would provide for a ranking of priorities in the rehabilitation of a life insurance company. The pending rehabilitation of Mutual Benefit Life Insurance Company made the new law critical to the plans taking shape for its rehabilitation.

At the initial hearing on AB-1338, the Assembly Insurance Committee unanimously approved an amendment providing for offsets for reinsurers.

The lobbyists, primarily the Reinsurance Association of America, obviously had been very effective. The major surprise was yet to come, however. The following week it was reported that the committee chairperson was considering another amendment, which would give similar treatment to three large New York banks, all of which had entered into interest rate swap transactions with Mutual Benefit Life. These banks were Bankers Trust Company, Citibank, N.A., and Morgan Guaranty Trust Company. The effect of the amendment under consideration would be to give the banks' claims the same priority as policyholders' claims.

Meanwhile, the New Jersey Senate was considering Senate Bill 719, without the amendment (reinsurance offsets) and proposed amendment (bank priority) that the Department of Insurance found objectionable. SB 719 was introduced on May 7, 1992, and hearings were held on June 1st and 6th. In his testimony before the Senate Commerce Committee, Commissioner Samuel F. Fortunato testified that, "As a matter of social policy and social justice, I do not believe it is right to put banks, reinsurance companies and other institutional creditors on the same footing as policyholders and annuitants." The bill was released from the Senate Commerce Committee on June 8, but in an effort to stall its passage the lobbyists were able to have the bill referred to the Senate Appropriations Committee, although the use of state funds was not indicated by the bill.

The intense lobbying and media war continued for several weeks. Members of the Mutual Benefit rehabilitation team became involved, and ultimately policyholders of the Company began to organize themselves in opposition to the Assembly Version of the bill. On June 29th, the Assembly Insurance Committee met, with several representatives of Mutual Benefit policyholder groups in the gallery, as well as Department of Insurance personnel and other interested parties. Rather than accept statements from anyone in

(Continued on page 5)

The New Model Act Continued from page 4

attendance, including other committee members, the chairperson read a prepared statement. In it, she stated that present law provided adequate protection to policyholders and that she therefore intended to take no action on the bill. Instead, she indicated that a committee substitute bill would be introduced that would remove the retroactivity provision, and that she would then monitor the Mutual Benefit rehabilitation proceedings to assure that they met with the committee's approval. The committee meeting was thereupon summarily adjourned even, though the minority members of the committee had asked the chairwoman to delay action on the bill until they arrived at the meeting. Later press reports painted a picture of ensuing pandemonium, complete with shouting matches in the committee room long after the adjournment.

Fortunately, the parallel action in the Senate was going more smoothly. On June 30th, SB-719 was passed by a vote of 40-0. Thereafter, forces were mobilized to assure ultimate passage of the Senate version of the bill. First, the Department of Insurance made it clear, in its testimony and voluminous written submissions, that it was working feverishly toward a rehabilitation plan for Mutual Benefit that was dependent upon life insurance industry participation. Industry representatives, in turn, made it clear that only the passage of the Senate's bill would assure that there would be any such participation. Policyholder groups flooded legislators with mail and telephone calls in support of the Senate bill. The saga was played out daily in the state's newspapers. Still, the outcome was in doubt.

On July 6th, policyholders staged a demonstration in Trenton, and finally on July 18, the Assembly passed the Senate version amid cheers of busloads of Mutual Benefit constituents who had come for the vote. It should be noted that the Assembly bill is not dead. It remains in committee, where the chairwoman states that she still plans to amend it and bring it to the floor. It is not likely,

however, that the bill will overturn the actions already taken.

What are the lessons of this experience? First, as the scouting axiom goes, Be Prepared. Lobbyists for the reinsurance industry (and others) are certainly already at work in other jurisdictions in preparation for the introduction of the new Model Act. Receivers will want to work closely with their respective Insurance Departments to educate legislators in order to assure passage of the Act without amendments.

The next lesson is that any attempts to amend the Model Act will probably beget other attempts. The banking lobby almost succeeded in achieving a priority with a potential size of over \$100 million. Finally, it should be learned that the process has the potential to produce some strange and awful results.

The views expressed herein are strictly those of authors. The New Jersey Department of Insurance has not approved the contents hereof.

MEET DIRECTOR JOYCE WAINSCOTT

Our feature introducing a director each quarter continues. In issue 1 of our Newsletter we called attention to our international / global composition. You met Philip Singer from London, U.K. in March, Jeanne Bryant by way of Nashville, Tennessee in June and now Joyce Wainscott of Anchorage, Alaska.

Joyce Wainscott brought impeccable credentials to her job in 1990 as Deputy Receiver/ Receiver with the Alaska Insurance Department, having to immediately become an expert on interstate cooperation in the liquidation of Pacific Marine Insurance Company of Alaska and the affiliate Pacific Marine in Washington.

Ms. Wainscott like many of us began her insurance career in claims adjusting commencing

(Continued on page 6)

Joyce Wainscott Continued from page 5

in 1973 with CIGNA, rising to an executive position as Claims Manager and then as an officer in Alaska Pacific Assurance Company. She has been an Assistant Manager of Field Operations for a large insurance company directly responsible for and supervising a large office and territory. She has multi years experience as claims manager for a large workers compensation unit and has in addition to the ultimate position of Claims Manager served ably as a Claims Supervisor/Casualty.

Joyce holds a Bachelors Degree in History/Education from the University of Alaska and has done graduate work at that university. She is a charter member of SIR and is serving with distinction on the first Panel of Directors and plus a full time key player in the Education Committee. Joyce, Jeanne Bryant, Kristine Bean and co-workers are responsible for the first SIR Seminar.

PLAUDITS

SIR is a cosmopolitan group of doers who occasionally do get plaudits. We don't hear of them all, probably miss some of the best but we are proud to salute Patrick Cantilo, Bob Greer, David Kendall, Alexander Bratic and Kristine Bean.

It's a pleasure to note the excellent article, with pictures yet in the Texas Lawyer, May 4, 1992 on our friends, the national law firm of Rubinstein and Perry, Publications Committee stalwart, Patrick Cantilo, Steve Hubbard, Chris Maisel, Karl Rubinstein, et al.

Bob Greer, from West Virginia, Florida, wherever, has accepted further NAIC responsibility as Chair of the Model Act Issues Working Group. Those of you who share membership in this group with Bob know that the long term charge is to recommend amendments and additional provision to the Rehabilitators and

Liquidators Model Act and to identify provisions of the revised Model Act which then should be included in Minimum Standards for Accreditation. This is an ongoing charge and I'm sure you have been solicited by Bob already for input and specifics. Bob has been hard at work, meeting with the working group in San Francisco on August 13 and will have further meetings in Cincinnati in September. He solicits input from each of us prior to his report to the Rehabilitators and Liquidators (EX4) Task Force with a list of identified shortcomings, inconsistencies or problems if any in the current Model Act(s).

Your editor has expressed appreciation to SIR member David Kendall of D.J. Freeman, Solicitors, London, for placing SIR membership upon the mailing list for receipt of the very very good D.J. Freeman Insurance Review. Their publication is an example of what our Newsletter can become. It's hard to get through any given day in this receivership world without some pleasant contact with London/ Lloyds and it's refreshing to "know folks there."

We have in prior issues mentioned the good things that are happening in Pennsylvania in connection with the rehabilitation of Mutual Fire, Marine and Inland Insurance Company, Alexander Bratic, Vince Vaccarello, et al. Mutual Fire is the largest ever insolvency in Pennsylvania, fifth largest in the U.S. and we point with pride to Alexander Bratic having just earned and received the 1992 Pro Bono Award from the Poor Richard's Club for his work as Special Deputy Rehabilitator. Accomplishments of note in this successful rehabilitation include, since 1988, payment of 40% of all large claims and 100% of all claims under \$5,000. Cheers!

It's not difficult but pleasant to have almost every issue of SIR Newsletter acknowledging thanks to Kristine Bean, and her staff, Peterson Consulting, for the quantity and quality of professional assistance rendered in many SIR functions with special acknowledgement now for her work in the first SIR Seminar, the brochure, program arrangement, etc.

TRAINING SEMINAR

SIR proudly presents its' first training seminar for staff members of receiverships on Thursday and Friday, October 1st and 2nd at the Hyatt Regency in Denver, Colorado.

Your Education Committee chose topics of Reinsurance and Claims after reviewing the responses from the questionnaire mailed to the membership earlier this year.

Joyce Wainscott, Seminar Chair and publicist for the Education Committee reports that they have put together an exciting two days of speakers with practical information to help receivership staffs handle the day to day challenge in the reinsurance and claims areas. The program format includes panels and problem solving with participant input.

We go first class. The faculty/speakers in the Claims Sessions include Moderator Doug Hartz, Vice President of Hugh Alexander & Associates. In the claims panel speakers include: Debra Carr, Assistant to Deputy Receiver in the Integrity Liquidation, Angela Del Casale, Claims Specialist in the Integrity Liquidation also. Further Dale Stephenson, President of NCIGF and his able cohort Kevin Harris are both on the program. Then Frank Johann, Claims Consultant currently providing expertise to both the Delaware and Pennsylvania Bureaus of Liquidation and Rehabilitation. Then there is the young upstart Bill O'Bryan, Deputy Receiver for Professional Mutual Insurance Company In Liquidation in Kansas City, an insurance executive

of note, having been President of three insurance companies. Occasionally Bill travels with Bob Deck. Bill "knows all there is to know and Bob knows the rest." Then there are two more lawyers, Mark Richelson, Deputy Attorney General, Los Angeles, California and Stephen Schwab from the firm of Rudnick & Wolfe in Chicago, Illinois and finally SIR President Karen Stewart, Deputy Receiver, Delaware Department.

For the Reinsurance Disciplines at a recent seminar someone, it may have been Mike Miron introduced Leonard Minches as the Mother of all Receivers. He has 20 years with the New York Liquidation Burau, Former Chair of NAIC Rehabilitators and Liquidators Task Force. Lenny presently is an attorney with the international firm of Wilson, Elser, Moskowitz, Edelman & Dicker. We have other SIR memberships from these lawyers. The seminar is worth the time and money if all you get is one session with this gentlemen who is familiar with all "gentlemen's agreements." He's the Moderator. With him, faculty and speakers is James Anastasio, Vice President and Treasurer, American Reinsurance Corporation, Senior Vice President and Treasurer, AM-RE Brokers Inc. Next an associate of Kristine Bean's, Frederick Bingham, Peterson Consulting Ltd., Chicago, Illinois. Earl Davis, Vice President, Claims Executive of San Francisco Reinsurance Company followed by Lauren Kingsmore, Vice

President of Peterson Consulting. Then we return to American Reinsurance for Frank Maffa who is their Director of Statutory Accounting, Regulatory Relations and Training from their Princeton, NJ headquarters. Kevin Oates, Jr. from Chiltington-Omni Services, Inc., Sr. Vice President from Hazlet, New Jersey, John M. Parker, Jr., Esquire, the Law Firm of Sidley & Austin, Chicago, and finally Paul Walther, also from Chiltington-Omni Services, Inc., President, in fact.

Listen folks, Dr. Bob Strain with all his prestige and persuasive powers cannot assemble a better faculty than those above mentioned. Get your people there.

REGISTRATION FORM SIR Training Seminar

Please register me for the seminar, Thursday and Friday, October 1-2, 1992 at the Hyatt Regency Denver.

- Claims Program
 Reinsurance Training
- Enclosed is my check, payable to SIR for:
- \$100. I am a member of SIR.
 \$125. I am a non-member of SIR.

Name _____
Title _____
State/Organization _____
Street _____
City/State/Zip _____
Telephone _____ Fax _____

Please return to:
The Society of Insurance Receivers
801 West 20th Street
Wilmington, DE 19802

FAX (302)577-6050

Room reservations: (303)295-1234

Managing An Actuarial Appraisal In An Insolvency Part II

By: Harry Miller

Introduction

As a Receiver you are often called upon to engage actuaries to perform analyses of an insolvent insurance company. In this two-part article, I will try to shed some light on what actuaries do and how you can make sure you are using your actuaries in an effective and efficient manner.

In Part I of this article, published in the June newsletter, I described three types of actuarial appraisals and gave some general guidance on when to use each type. Here in Part II, I will discuss how to interpret an actuarial appraisal, the impact of key assumptions on appraisals, and some of the common "Rules of Thumb" used to value blocks of business.

Interpreting An Actuarial Appraisal

Congratulations, you have determined you need an actuarial appraisal, contracted for one to be performed, and followed the checklist in Part I of this article for managing an actuarial appraisal. The actuary has sent you the thickest report you have ever seen in your life and is meeting with you tomorrow to go over the report. How do you make heads or tails of all this information?

First realize that actuarial appraisal reports are written primarily for other actuaries and are subject to actuarial standards of practice which

guide what information should be included and how the information is presented. While these standards have helped to make the reports more usable, they also lead to the inclusion of a fair amount of "boiler-plate" text which makes it hard to create concise reports. One solution to this problem is to request a one-page discussion outline of the key issues and assumptions the actuary believes are most important to your understanding of the report. This will allow you to quickly focus on the important issues in the report itself.

Second, realize that an actuarial report typically provides values under a specific set of assumptions. It does not provide the one correct answer. The results of the appraisal are only as good as the assumptions underlying the calculations. Your job in managing the actuarial appraisal is not to judge whether the assumptions chosen are "correct"; rather it is to develop an understanding of:

- (1) How the assumptions were chosen,
- (2) What information was used in selecting the assumptions, and
- (3) Why these particular assumptions were used.

For example, do the assumptions reflect the recent experience of the company or industry average

experience? If they do not reflect recent company experience, why not? Are the assumptions consistent with those a potential bidder for the business might use? How were the unique characteristics of the business and this situation reflected in the assumptions? Asking these types of questions will allow you to understand the basis of the values in the report, any limitations of the values, and whether the appraisal has taken into account all the relevant characteristics of the situation and met the goals you defined for the project.

Impact of Key assumptions on Appraisal Values

Part of the key to understanding the results of an actuarial appraisal is understanding how variations in different assumptions may impact the results. Here is a brief description of the possible impact of a couple of key assumptions.

Investment Earnings Rate: Generally the higher the assumed interest rate the higher the resulting values. However, the impact is not the same for all types of products. For interest sensitive products, i.e., those which have a defined credited interest rate, the assumed spread between the investment earnings and credited interest rates is more critical than the absolute level of rates. For term insurance, health insurance and most property and casualty lines

Managing An Actuarial Appraisal *Continued from Page 8*

the interest rate assumptions is not as critical since these lines do not generate large amounts of investable funds.

Mortality/ Morbidity Rates: The higher the claims cost levels assumed the lower the value. One key to watch for, particularly on health insurance, is whether anti-selection due to high lapses are reflected in these assumptions.

Lapse Rates: The impact of lapse rates is very hard to generalize. There will typically be some type of shock lapse resulting from an insolvency and this should be reflected in the assumptions. This will normally lower the value. Higher lapses will normally lower the value of a block of business. However, if there are large surrender charges on the block or future losses

projected on the block, higher assumed lapses might actually increase the value.

Premium Rates: The pattern and level of future premiums can significantly impact the value. On life and annuity business, the higher the level of continuing premiums the greater the value of the block. The pattern of rate increase on health insurance is particularly important.

Expenses: The higher the unit expenses the lower the value. One key question is whether to use expense levels consistent with current company experience or with the level a potential buyer might use. This is often a good sensitivity test to incorporate in the analysis.

"Rules Of Thumb"

Rules of Thumb look at common measures of value derived from similar blocks of business. They are by their nature approximate and will not necessarily reflect the particular characteristics of a block. They assume that the business has been reasonably well-managed, which is often not the case in insolvencies. They do provide a quick and easy basis for placing a perspective on the values produced by an actuarial appraisal. Some of the typical Rules of Thumb for life, annuity and health business are shown in the following table. Rules of Thumb are not as widely used on property and casualty blocks.

Line of Business	Rule of Thumb Value
Traditional Whole Life Business	100-200% of Annualized Prem. In Force
Term Business	80-110% of Annualized Premium In Force
Paid Up Life Business	20-40% of Statutory Reserves
Universal Life Business	30-100% of Annualized Premium In Force
Single Premium Deferred Annuities	4 - 8% of Accumulation Value
Flexible Premium Deferred Annuities	4 - 10% of Accumulation Value
Group Term Life Business	25-75% of Annualized Premium In Force
Group A&H Business	0 - 15% of Annualized Premium In Force
Individual A&H Business	25-50% of Annualized Premium In Force
Credit Life and A&H	10-30% of Unearned Premium Reserves

In closing, actuaries can be an excellent source of information. Just remember to define your goals and expectations in advance and not to be afraid to ask questions to get the most value from your actuary's work.

RETIREMENT OF WILLIAM S. PRICE CHIEF EXECUTIVE OFFICER OF MISSION LIQUIDATION

By: Geoffrey A. Nicholls

At the end of June, after a distinguished career in the insurance business, Bill Price retired from his final position as Special Deputy Insurance Commissioner and Chief Executive Officer of the Mission Insurance Companies' Trusts.

After completing his education at the University of Southern California, Bill commenced his career with the St. Paul Insurance Companies as a Management Trainee in 1950. He joined Industrial Indemnity in 1951 and, after rising to Sr. Vice President with Industrial, assumed the responsibility of President of First Insurance Company of Hawaii in 1972. He moved to the Crum & Forster organization in 1976 where he served in a number of senior executive posts including Chief Executive Officer of U.S. Insurance Group and Executive Vice President of Crum & Forster Inc., until his first retirement in 1986.

The Mission Insurance Companies were placed in liquidation in February 1987 and Roxani Gillespie, at that time the Insurance Commissioner for California, asked Bill to manage the liquidation operations as Chief Executive Officer. At liquidation, Mission was considered to be the largest insurance insolvency ever. Its book of business consisted of property and casualty risks, much of which was of high exposure with large limits of coverage and was subject to complex reinsurance arrangements placed with reinsurers throughout the world. Mission also assumed reinsurance business ceded to them by other insurance companies and these assumptions were also, in turn, retroceded to the worldwide reinsurance market.

When Bill arrived at Mission, he encountered a situation which was akin to preparation for war in the environment of the hostility of Mission's reinsurers. Lawsuits had been served in 1985 by some members of the Pacific Reinsurance Management Corporations' (a Mission MGA) retrocessional pool and publicity arising from sweeping allegations of misconduct and misrepresentation made in those lawsuits had provided reinsurers of other Mission divisions with an excuse to stop payment of claims. A plan to rehabilitate Mission, which was viable in other respects, had failed due to the refusal of reinsurers to honor their contracts.

The assets of the Mission Companies consist principally of reinsurance recoverables and immediately upon his arrival, Bill set about the establishment of an operation which would be effective in marshalling these assets. Experienced personnel in the areas of reinsurance, claims and accounting were retained and this organization, in concert with the Liquidator's counsel, Rubinstein & Perry and accountants Touche Ross (now Deloitte Touche), applied themselves to the task of reinsurance recovery. Lawsuits were served on all reinsurers which were delinquent in payment of ceded claims and a computer system was established by Deloitte Touche which served the dual purposes of supplying legal counsel with accounting and reserve data needed in litigation and providing Mission's staff with figures required to negotiate with reinsurers commutation of liabilities arising from participation in Mission's reinsurance contracts.

(Continued on page 11)

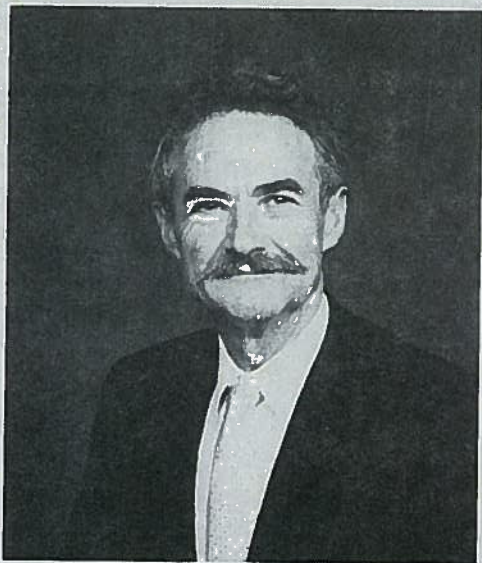
Retirement of William S. Price Continued from page 10

Independent actuaries, Milliman & Robertson, were engaged to project ultimate losses and payout patterns under the reinsurance contracts and appropriate factors were entered into the computer system to provide output, by reinsurer, of IBNR reserves and in the discounting for present value of case reserves and IBNR.

As the litigation activity gathered momentum, Bill and his staff were involved in responses to interrogatories and demands for documents of vast, mind-numbing volume. A number of Mission's staff were obliged to testify at depositions and some of the senior employees were deposed for many days under video camera often in the presence of twenty or so hostile lawyers. Bill Price's management and people skills guided the Mission Liquidation staff through many unique projects and he achieved a high level of morale in circumstances in which the operation and its people were frequently subjected to undue hostility and criticism.

The success of the Mission liquidation is in large measure due to Bill's direction and is reflected in the reinsurance recoveries of \$824 million and total collections of \$1.035 billion achieved through the date of his departure on June 30, 1992.

We wish Pat and Bill Price a long and happy retirement and his colleagues at Mission will undoubtedly miss his inimitable style and his enjoyable and rewarding companionship.



PRESENTING...THE LOQUACIOUS LIQUIDATOR as a young man! Himself gave generous countenance to this letter. "The pictures make it." He says thereby leading me right into his extortionate demand for equal pictorial depiction, just some small acknowledgement of his unpaid, often unsolicited services as informant, critic, commentator and counsel.

RECEIVER RON ROSEN RECUPERATING RAPIDLY

SIR readers share California's delight in Ron Rosen's salutary and speedy return to work. Wellesst Wishes, Ron.

SOCIETY OF INSURANCE RECEIVERS

Volume I, No. 3

September, 1992

Nelson Burnett
Newsletter Editor

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CONTRIBUTORS

Harry Miller is an actuary and consultant with Milliman & Robertson, Inc./ Woodrow Milliman from Houston, Texas. With this issue we proudly announce Harry's joinder of the editorial staff as Contributing Editor.

Geoffrey A. Nicholls succeeds Bill Price as Chief Executive Officer and Special Deputy Insurance Commissioner at the Mission Liquidation in Los Angeles.

Gale P. Simon is the Assistant Commissioner of Insurance of the state of New Jersey. Among her responsibilities are the areas of rehabilitations and liquidations.

Bernard J. Spaulding is the president of Delta Holdings, Inc., an insurance consulting firm. He is currently serving as the Deputy Rehabilitator of New Jersey Life Insurance Company.

THE LOQUACIOUS LIQUIDATOR remembers a time when the County Superintendent of Schools visited the Grade School he was attending in Eastern Kentucky. A little girl was having trouble with commas. The Superintendent sought to reassure her telling her it was not important, that commas don't amount to much. The teacher overheard this and sent the child to the blackboard to write, "The County Superintendent says the teacher is misinformed. Now, Ann, put a comma after Superintendent and another after teacher!" With the new format for our Newsletter, the talkative one tells me he expects all our commas to be in the right places.

This publication of SIR carries notices and articles regarding the activities and interest of the Society of Insurance Receivers. Byline articles herein reflect views of the individual authors and do not necessarily represent the official position or views of the Society of Insurance Receivers.

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Karen Weldin Stewart, President
Society of Insurance Receivers
801 West 20th Street
Wilmington, DE 19802
Telephone: 302•888•7717
FAX: 302•577•3057

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