

NAME: _____

INTERNATIONAL ASSOCIATION OF INSURANCE RECEIVERS

CONTINUING EDUCATION REPORTING FORM

TWO-YEAR REPORTING PERIOD ENDED DECEMBER 31, 2012

DESIGNATION	:							
IAIR PROGRAMS: Roundtables, Think Tanks & Issues Forums, Insolvency Workshops, TDS Programs								
Date	Program	Attended (# of Hours)	Presented (Additional 2 Hours)					
01/2011	Insolvency Workshop, New Orleans (10.5 hrs.)							
03/2011	Think Tank, Austin (2.0 hrs.)							
03/2011	Issues Forum, Austin (3.5 hrs.)							
06/2011	TDS Reinsurance, Las Vegas (12.0 hrs.)							
11/2011	Think Tank, National Harbor (1.0 hr.)							
11/2011	Issues Forum, National Harbor (3.5 hrs.)							
01/2012	Insolvency Workshop, San Diego (8.0 hrs.)							
3/2012	Issues Forum (New Orleans. LA) (3.0 hrs.)							
3/2012	Think Tank (New Orleans, LA) (1.0 hrs.)							
6/2012	TDS Central Government. San Diego. CA (9.25 hrs.)							
8/2012	Issues Forum, Atlanta, GA (3.5 hrs.)							
8/2012	Think Tank. Atlanta GA (2.0 hrs)							
11/2012	Issues Forum, National Harbor, MD (3.0 hrs.)							
11/2012	Think Tank, National Harbor, MD (1.0 hr.)							
1/2013	Insolvency Workshop, Savannah, GA (12.0 hrs)							

OTHER PROGRAMS: Please identify (Such as, NAIC, NCIGF, NOLHGA, SOFE, MEALEY'S or ABA)

Total IAIR Session Hours

Date	Program	Attended (# of Hours)	Presented (Additional 2 Hours)		
	Total Other Programs Hours				

Total	Hours	ΑII	Programs:				

To maintain your designation, you must participate in approved continuing education activities of at least forty (40) hours within the two (2) years of your reporting period. Please be sure to review IAIR's requirements and compliance regarding continuing education which is posted on the IAIR website at www.iair.org. Please remit this form to the following address:

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