

FORM NL-6-COMMISSION SCHEDULE

Name of the Insurer: ITI REINSURANCE LIMITED

Registration No. and Date of Registration with the IRDA: 154 dated 30.12.2016

CIN: U74120MH2014PLC257899

Particulars	FOR THE QUARTER ENDED 31.3.2017	UP TO THE QUARTER ENDED 31.3.2017	For the corresponding quarter of the preceeding year	up to the Quarter of the preceeding year
	(Rs.'000)	(Rs.'000)	(Rs.'000)	(Rs.'000)
Commission paid				
Direct	-	-	-	-
Add: Re-insurance Accepted	-	-	-	-
Less: Commission on Re-insurance Ceded	-	-	-	-
Net Commission	-	-	-	-
Break-up of the expenses (Gross) incurred to procure business to be furnished as per details indicated below:				
Agents	-	-	-	-
Brokers	-	-	-	-
Corporate Agency	-	-	-	-
Referral	-	-	-	-
Others (pl. specify)	-	-	-	-
TOTAL (B)	-	-	-	-

Note: The profit/ commission, if any, are to be combined with the Re-insurance accepted or Re-insurance ceded figures.