

representing the Colorado title insurance industry

LTAC MEMBERSHIP DUES CALCULATION FORM

Dues are calculated upon gross revenue. Gross revenue is fees earned by company (including branches) during the preceding calendar year for all title and escrow services, including closing and settlement fees, and shall include fees from abstracts, search and examination of titles, title insurance premiums, title memorandums, foreclosure certificates, title certificates, litigation guarantees, ownership and encumbrances memorandums, and any other services related thereto. This includes any portion of the title insurance premium which is retained by the agent or remitted by the insurer which the respective agent or insurer shall include in its premium calculations. The dues schedule is set forth below.

AGENTS, ABSTRACTERS AND TITLE INSURANCE COMPANIES WITH DIRECT OPERATIONS IN COLORADO

GROSS REVENUE	DUES AMOUNT	GROSS REVENUE	DUES AMOUNT
Less than \$50,000.00	\$300.00	\$300,001.00 - \$400,000.00	\$600.00
\$50,001.00 - \$100,000.00	\$360.00	\$400,001.00 - \$500,000.00	\$660.00
\$100,001.00 - \$150,000.00	\$420.00	\$500,001.00 - \$600,000.00	\$720.00
\$150,001.00 - \$ 200,000.00	\$480.00	\$600,001.00 - \$700,000.00	\$780.00
\$200,001.00 - \$ 300,000.00	\$540.00	\$700,001.00 - \$1,000,000.00	\$960.00

^{**} Where gross revenues are more than \$1,000,000.00, dues are \$960.00 plus \$35.00 for each \$100,000.00 over \$1,000,000.00.

TITLE INSURANCE COMPANIES (UNDERWRITERS) This section of the dues schedule applies to:

- 1. Title Insurance companies that do not have direct operations (independent agents only), in which case dues are based upon the amounts remitted, or accrued, pursuant to the contract/contracts between the concerned title insurance company and the concerned independent agent(s); and,
- 2. Title Insurance companies that have both direct operations and independent agents in Colorado, in which case dues are based upon the amounts remitted, or accrued, pursuant to the contract/contracts between the concerned title insurance company and the concerned independent agent(s) and direct operation(s), except that the title insurance company need not include any premium remitted to it from any direct operation which is a member of LTAC and has paid its dues separately.

CONTRACT REVENUE

DUES AMOUNT

\$0.00 TO \$500,000.00 (Minimum dues)

\$660.00

Where contract revenues are more than \$500,000.00, dues are \$660.00 plus \$35.00 for each \$100,000.00 over \$500,000.00.

ASSOCIATE MEMBER - DUES AMOUNT \$240.00

Associate member is defined as a corporation, professional corporation, limited liability corporation, partnership, limited partnership, or entity other than an individual person. Associate membership is limited to those entities that do not fit into the categories of agents, abstractors, title insurance companies or underwriters in the state of Colorado.

By signing below, I hereby certify that (1) the amount remitted for 2012 dues is based upon 2012 gross revenues as defined herein, and (2) I understand the benefits of my LTAC membership (including the use of LTAC website password and discounts to LTAC events) extend only to employees of my company and its branch offices whose revenues are accounted for in this dues payment.

2013 LTAC Dues: \$		Total Amount Remitted: \$	
SIGNATURE		Please Print NAME legibly	
COMPANY		ADDRESS	
PHONE	FAX	E-MAIL	

Membership dues in LTAC may be tax deductible as an ordinary and necessary business expense. Due to the efforts of the Association to lobby and influence state and federal legislation on your behalf, 49 percent of your membership investment is not deductible. SEND REMITTANCE TO: LAND TITLE ASSOCIATION OF COLORADO, P. O. BOX 102618, Denver, CO 80250 and include completed Member Profile and Branch Office profiles (if applicable).

LAND TITLE ASSOCIATION OF COLORADO

Member Profile

i ype oi iviembersnip:	Agent Insurer A	associate Abstractor Individual	
If Agent, Name of Unde	rwriter:	License No.	
Member Company Nan	ne:		_
County or Counties you	operate in:		
Mailing Address:			
City:	State:	Zip Code	e:
Phone:	Fax:	WEBSITE	
The Lo Please check here	_	o membership directory is available online at <u>ww</u> our company name and contact information appe	_
1. General Membershi _l	p Contact Person:		
Business Address: (if dif	fferent than above)		
City:	State:	Zip Code	2:
Phone:	Fax:	Email:	
State House Representa	ative:	[] State Senator:	[]
Congressperson:		[]	
Home Address:			
(this info	ormation is for the sole purpose of ide	ntifying your state and local representatives, and will remai	n confidential)
2. Education Contact Po	erson:		
Business Address: (if dif	fferent than above)		
City:	State:	Zip Code	e:
Phone:	Fax:	Email:	
State House Representa	ative:	[] State Senator:	[]
Congressperson:		[]	
Home Address:			
(this info	ormation is for the sole purpose of ide	ntifying your state and local representatives, and will remai	n confidential)
3. Legislative and Regu	latory Contact Person:		
	fferent than above)		
Business Address: (if dit			
•	State:	Zip Code	5.
City:		Zip Code Email:	
City:	Fax:	Email:	
City: Phone: State House Representa	Fax: ative:	Email: [] State Senator:	
City: Phone: State House Representa	etive:	Email: [] State Senator:	

We appreciate you taking the time to fill out this member profile so that we can continue to keep the most updated files on our members. Please don't forget to have the Branch Office Profile Form filled out for each branch office of your company. *Thank you.*

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