

Biographical Affidavit Update

A company officer or director for an entity may use this form to notify the Texas Department of Insurance if he/she has changed position and/or company(s). The officer or director must have a biographical affidavit and fingerprints on file with the Texas Department of Insurance. If filing this form for more than one company attach a list of the companies and the positions held to this form.

First Name	Middle Name	Last Name		
Company Name		NAIC Number		
Position with Company				
the record was sealed or expunged		ged, and the affiant has personally verified that e question. If you have any doubt about the e and an explanation provided.		
instrument) filed aga	any pending misdemeanor or felony chainst you in Texas, in any other state or	arges (by indictment, information, or any other by the federal government? offense in Texas, in any other state or by the federal		
government?		offense in Texas, in any other state of by the federal		
state or by the feder	al government?	r or felony charge or offense in Texas, in any other		
d.Have you ever served a by the federal gover		eanor or felony offense in Texas, in any other state or		
Yes	No			
If you answered "Yes" to any of questions 1a -d, you must submit original certified copies of the charging document, indictment, information, or any other charging document, judgment of conviction, and/or deferred adjudication order, probation order, order terminating probation, community supervision and/or parole certificate for each and every crime or offense. If the court states they no longer have the records, please have the court provide us with a letter on their letterhead stating that fact. If you were arrested only and not prosecuted, please provide a records search from the appropriate jurisdiction indicating a final disposition. You must submit a statement describing the circumstances leading to the offense(s). You must include your age at the time(s) of the offense(s). You may provide letters of recommendations from any persons in contact with you that are aware of your criminal past.				
	answer "Yes", please attach copies of d dates, locations, dispositions, or any of	ocumentation and separate pages providing the details ther pertinent information.		
manager, member or partne insurance department, or fin	er, ever been the subject of an admi ancial regulatory agency, or of an action n alleged violations of state or federal	n in which you were a director, officer, shareholder, nistrative or legal action filed by Texas or any other on filed on behalf of Texas or any other state or by the insurance, securities or financial regulatory laws that		

Dated and signed this	day of		, 20	
I hereby certify under penalty o to the best of my knowledge an		am acting on my ow	n behalf, and that the foregoing statements are	e true and correct
Signature of Affiant				
State ofCounty of				
Before me,			, a notary public in and for the state, on	
		, known to me or proved to me on the oath of (description of identity card) to be the person whose name is		
			hat s(he) executed the same for the purpose a	
Given under my hand seal of of	fice this	day of	, 20	
			Notary Public	
			Printed Name	
			My commission expires	