

Attachment 5A-3 Register of Insurance Company Managerial Officers (Company name: _____)

Managerial officer	National ID number	Date of birth	Domicile	Phone	Highest level of education completed	Principal job experience	No. of subscribed shares	Subscribed shares (%)

Note: Please furnish a photocopy of the person's national identification card, passport, or another identification document and synopses of the person's educational qualifications and employment history.