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IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT,
IN AND FOR LEON COUNTY, FLORIDA

IN RE: The Receivership of
SAWGRASS MUTUAL INSURANCE COMPANY.
_____/

CIVIL: 2018-CA-001810

THE FLORIDA DEPARTMENT OF FINANCIAL SERVICES, DIVISION OF REHABILITATION AND LIQUIDATION'S MOTION FOR ORDER APPROVING FINAL CLAIMS REPORT, CLAIMS DISTRIBUTION REPORT, AND DISTRIBUTION AND DISCHARGE ACCOUNTING STATEMENT, AUTHORIZING FIRST AND FINAL DISTRIBUTION, DIRECTING FINAL DISCHARGE, AND AUTHORIZING DESTRUCTION OF OBSOLETE RECORDS

COMES NOW, the Florida Department of Financial Services, as Receiver of Sawgrass Mutual Insurance Company (hereinafter "Department" or "SMIC"), by and through undersigned counsel, and hereby files this Motion for Order Approving Final Claims Report, Claims Distribution Report, and Distribution and Discharge Accounting Statement, Authorizing First and Final Distribution, Directing Final Discharge, and Authorizing Destruction of Obsolete Records and as good grounds therefore states the following:

1. Sawgrass Mutual Insurance Company ["SMIC"] was a property and casualty insurance company previously authorized pursuant to the Florida Insurance Code to transact business in the State of Florida.

2. On October 1, 2018, this Court entered a *Consent Order Appointing the Florida Department of Financial Services as Receiver of Sawgrass Mutual Insurance Company, for Purposes of Liquidation, Injunction and Notice of Automatic Stay.* On March 26, 2021, the First District Court of Appeal upheld a challenge to the above *Consent Order* and issued its mandate.

3. Pursuant to section 631.021(1), Florida Statutes, this Court has jurisdiction over the Receivership and is authorized to enter all necessary and/or proper orders to carry out the purpose of the Florida Insurers Rehabilitation and Liquidation Act, sections 631.001 et seq., Florida Statutes.

4. The Court approved the Receiver's First Interim Claims Report and Recommendation on Claims on October 26, 2022.

5. The Department obtained the Federal Release, and the Court approved the Release Agreement on August 20, 2020.

6. The Department has compiled a Final Claims Report ("FCR") dated December 16, 2022. The FCR reflects the classification of all Class 1 guaranty association filed claims in accordance with section 631.271, Florida Statutes, and this Court's Order Approving Department's Evaluation Plan for Filed Claims dated August 26, 2022. The total amount claimed by Class 1 guaranty association claimants is $429,704.47. The total amount recommended by the Department for Class 1 guaranty association claimants is $429.704.47. The FCR is attached as **Exhibit A**.

7. With the approval of the FCR, the Department is now in a position to make a distribution of receivership assets. These assets will be distributed on a pro-rata basis to the Class 1 guaranty association claimants in accordance with the Claims Distribution Report ("CDR") dated December 13, 2022. The CDR is attached as **Exhibit B**.

8. The Department's Distribution and Discharge Accounting Statement – Projected for December 2022 Distribution and Discharge (the "Distribution and Discharge Accounting") is attached hereto as **Exhibit C**. As shown in the Distribution and Discharge Accounting, the

estimated value of all assets of the SMIC Receivership estate is projected to be $350,699.70 as of November 30, 2022.

9. The Department requests authority to retain $8,165.00 as a reserve for "wind-up" expenses of the receivership, as outlined in more detail in **Schedule B** and **Schedule E** of **Exhibit C.**

10. As outlined above and in more detail in the Department's Distribution and Discharge Accounting Statement, the total amount available to distribute is $342,534.70. The distribution amount represents an approximate 79.7% pro-rata distribution of the recommended claim amount for Class 1 guaranty association claimants. The final pro-rata calculation and the amount distributed may have a slight variance due to rounding at the time of distribution payment processing.

11. The Department recommends that the Final Claims Report, Claims Distribution Report, and the Distribution and Discharge Accounting Statement be approved.

12. The Department requests an order authorizing the Department to remit to the FIGA any surplus expense funds remaining after discharge due to the pro rata distribution being made to the guaranty association until FIGA's class 1 claim is fully paid.

13. Should there be any surplus funds after FIGA's class 1 claim is fully paid as outlined above, the Department further requests an order authorizing the Department to remit such surplus funds to the Regulation Trust Fund [RTF].

14. Upon approval of the Department's request for final discharge, the records of the SMIC receivership estate will no longer be needed, and it will be necessary to dispose of the obsolete company records. The Department will further give notice of its intent to the United States Department of Justice as agreed in the Federal Release Agreement.

15. Although such recovery is unlikely, the Department requests an order authorizing it to remit to FIGA any assets which may be recovered following the discharge of this receivership until FIGA's class 1 claim is fully paid if, in the Department's sole discretion, the value of the recovered assets does not justify the re-opening of this receivership estate.

16. Additionally, although such recovery is unlikely, the Department requests an order authorizing it, should FIGA's class 1 claim be fully paid, to remit to the RTF any assets which may be recovered following the discharge of this receivership if, in the Department's sole discretion, the value of the recovered assets does not justify the re-opening of this receivership estate.

17. The Department requests an Order that all mortgages, notes, judgments, or other liens in favor of SMIC recorded with any Clerk of Circuit or County Court in the state of Florida, that have not been previously assigned, sold, or transferred by the Department are deemed assigned to FIGA.

18. The Department requests an Order that it shall be fully and finally discharged of its responsibilities in this receivership as of 11:59 P.M. on December 29, 2022, subject to the terms stated above.

WHEREFORE the Department of Financial Services as Receiver for SMIC, requests the Court to grant this Motion and enter an Order Approving Final Claims Report, Claims Distribution Report, and Distribution and Discharge Accounting Statement, Authorizing First and Final Distribution, Directing Final Discharge, and Authorizing Destruction of Obsolete Records.

Respectfully submitted this _20th_ day of December 2022.

/s/ Miriam O. Victorian
Miriam O. Victorian, Chief Attorney
Florida Bar No. 355471
Miriam.Victorian@myfloridacfo.com
Florida Department of Financial Services
Division of Rehabilitation and Liquidation
325 John Knox Road
The Atrium, Suite 101
Tallahassee, Florida 32303
Telephone: (850) 413-4408

CERTIFICATE OF SERVICE

IT IS HEREBY CERTIFIED that a true and correct copy of this Motion was electronically filed with the Clerk of Courts by using the ECF system and electronically noticed this 20th_ day of December 2022 to all attorneys of record listed thereon.

/s/ Miriam O. Victorian
Miriam O. Victorian

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION
SAWGRASS MUTUAL
FINAL CLAIMS REPORT
PART B - FOR GUARANTY ASSOCIATION CLAIMANTS

COMPANY: 552	**POLICY NUMBER :**		**INSURED :**			**AMOUNT CLAIMED :**	$399,704.47
ID NO : 100116-1	**CLAIM NUMBER :**		**CLAIMANT :**	FLORIDA INSURANCE GUARANTY ASSOCIATION		**AMOUNT RECOMMENDED**	
PRIORITY : CLASS 1	**INS/CLMT STATE :**					**TO GUARANTY ASSOCIATION :**	$399,704.47
STATUS : EVALUATED	**DATE OF LOSS :**	10/01/2018		PO BOX 14249			
	DATE PROOF FILED :	08/02/2022		TALLAHASSEE,FL	323174249		

COMPANY: 552	**POLICY NUMBER :**		**INSURED :**			**AMOUNT CLAIMED :**	$30,000.00
ID NO : 100116-4	**CLAIM NUMBER :**		**CLAIMANT :**	FLORIDA INSURANCE GUARANTY ASSOCIATION		**AMOUNT RECOMMENDED**	
PRIORITY : CLASS 1	**INS/CLMT STATE :**					**TO GUARANTY ASSOCIATION :**	$30,000.00
STATUS : EVALUATED	**DATE OF LOSS :**	10/01/2018		PO BOX 14249			
	DATE PROOF FILED :	08/02/2022		TALLAHASSEE,FL	323174249		

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.
*** If status is unevaluated, then dollar amounts have been suppressed

FLORIDA DEPARTMENT OF FINANCIAL SERVICES -DIVISION OF REHABILITATION AND LIQUIDATION
SAWGRASS MUTUAL
FINAL CLAIMS REPORT
PART B - FOR GUARANTY ASSOCIATION CLAIMANTS

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED BY GUARANTY ASSOCIATION	$429,704.47
TOTAL AMOUNT RECOMMENDED TO GUARANTY ASSOCIATION CLAIMANTS	$429,704.47
TOTAL NUMBER	2

COUNT OF CLASS 1 CLAIMS :	2	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS BY GUARANTY ASSOCIATION :	$429,704.47	AMOUNT CLAIMED FOR CLASS 7 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 1 CLAIMS TO GUARANTY ASSOCIATION :	$429,704.47	AMOUNT RECMD FOR CLASS 7 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 2 CLAIMS :	0	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 8 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 2 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 8 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 9 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 3 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 9 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS BY GUARANTY ASSOCIATION :	$0.00		
AMOUNT RECMD FOR CLASS 4 CLAIMS TO GUARANTY ASSOCIATION :			
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 11 CLAIMS TO GUARANTY ASSOCIATION CLAIMANTS:	$0.00
AMOUNT RECMD FOR CLASS 5 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 11 CLAIMS TO GUARANTY ASSOCIATION CLAIMANTS :	
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS BY GUARANTY ASSOCIATION :	$0.00		
AMOUNT RECMD FOR CLASS 6 CLAIMS TO GUARANTY ASSOCIATION :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION
SAWGRASS MUTUAL
CLAIMS DISTRIBUTION REPORT

COMPANY:	552	**POLICY NUMBER :**		**INSURED :**		**AMOUNT CLAIMED :**	$399,704.47
ID NO :	100116-01	**CLAIM NUMBER :**		**CLAIMANT :**	FLORIDA INSURANCE GUARANTY ASSOCIATION	**AMOUNT RECOMMENDED :**	$399,704.47
PRIORITY :	CLASS 1	**INS/CLMT STATE :**	FL				
STATUS :	EVALUATED	**DATE OF LOSS :**	10/01/2018		PO BOX 14249		
		DATE PROOF FILED :	08/02/2022		TALLAHASSEE,FL 32317-4249	**AMOUNT DUE GUARANTY ASSOC. :**	$399,704.47

COMPANY:	552	**POLICY NUMBER :**		**INSURED :**		**AMOUNT CLAIMED :**	$30,000.00
ID NO :	100116-04	**CLAIM NUMBER :**		**CLAIMANT :**	FLORIDA INSURANCE GUARANTY ASSOCIATION	**AMOUNT RECOMMENDED :**	$30,000.00
PRIORITY :	CLASS 1	**INS/CLMT STATE :**	FL				
STATUS :	EVALUATED	**DATE OF LOSS :**	10/01/2018		PO BOX 14249		
		DATE PROOF FILED :	08/02/2022		TALLAHASSEE,FL 32317-4249	**AMOUNT DUE GUARANTY ASSOC. :**	$30,000.00

Exhibit B

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION
SAWGRASS MUTUAL
CLAIMS DISTRIBUTION REPORT

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED	$429,704.47
TOTAL AMOUNT RECOMMENDED	$429,704.47
TOTAL NUMBER	2

Secured Claims

COUNT OF SECURED CLAIMS :	0
AMOUNT CLAIMED FOR SECURED CLAIMS :	
AMOUNT RECOMMENDED FOR SECURED CLAIMS :	

Unsecured Claims

COUNT OF CLASS 1 CLAIMS :	2	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS :	$429,704.47	AMOUNT CLAIMED FOR CLASS 7 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 1 CLAIMS :	$429,704.47	AMOUNT RECOMMENDED FOR CLASS 7 CLAIMS :	
COUNT OF CLASS 2 CLAIMS :	0	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS :		AMOUNT CLAIMED FOR CLASS 8 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 2 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 8 CLAIMS :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS :		AMOUNT CLAIMED FOR CLASS 9 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 3 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 9 CLAIMS :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 4 CLAIMS :			
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS :		AMOUNT CLAIMED FOR CLASS 11 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 5 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 11 CLAIMS :	
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 6 CLAIMS :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

Sawgrass Mutual Insurance Company
Distribution and Discharge Accounting
Projected for December 2022 Distribution and Discharge

ESTIMATED ASSETS - November 30, 2022

	Value	Reference
Cash	$ 350,699.70	Schedule A
Total Assets	**$ 350,699.70**	

ESTIMATED FUNDS RETAINAGE

	Value	Reference
Class I - Administrative Claims Retainage for Receiver Expenses Estimate (December 2022)	7,550.00	Schedule B
Discharge Expenses Retainage for records storage, records destruction, tax return prep. & labor (post December 2022)	615.00	Schedule E
Total Proposed Retainage for Discharge	**8,165.00**	
TOTAL AVAILABLE TO DISTRIBUTE	$ 342,534.70	

DISTRIBUTION RECOMMENDATION

	Claims Value	Less Previous Claims Distributions	Value of Claims Outstanding	Apply Adv. Pmts. to Guaranty Assoc.	Recommended Distribution	% Value of Claims Outstanding	% Value of Gross Filed Claims	Total % of Claims Value Distributed
Class I - Administrative Claims-Guaranty Funds	$ 429,704.47	$ -	$ 429,704.47		$ 342,534.70	79.7140%	79.7140%	79.7140%
Class II - Loss Claims-Guaranty Funds	35,000.00	-	35,000.00		-	0.0000%	0.0000%	0.0000%
Class II - Loss Claims-Other	582,576.74	-	582,576.74		-	0.0000%	0.0000%	0.0000%
Class III - Return Premium Claims-Guaranty Funds	1.00	-	1.00		-	0.0000%	0.0000%	0.0000%
Class III - Return Premium Claims-Other	135,991.41	-	135,991.41		-	0.0000%	0.0000%	0.0000%
Class IV - Federal Government Claims	1,459,804.56	-	1,459,804.56		-	0.0000%	0.0000%	0.0000%
Class V - Employee Claims	1.00	-	1.00		-	0.0000%	0.0000%	0.0000%
Class VI - General Creditors Claims	8,203,375.19	-	8,203,375.19		-	0.0000%	0.0000%	0.0000%
Class VII - State & Local Government Claims	-	-	-		-	0.0000%	0.0000%	0.0000%
Class VIII - Late Filed Claims	462,501.00	-	462,501.00		-	0.0000%	0.0000%	0.0000%
Class IX - Surplus/Other Claims	30,000,000.00	-	30,000,000.00		-	0.0000%	0.0000%	0.0000%
Class XI - Shareholder Claims	9,639.28	-	9,639.28		-	0.0000%	0.0000%	0.0000%
Totals	**$ 41,318,594.65**	**$ -**	$ 41,318,594.65	$ -	$ 342,534.70			

Index to Attached Schedules:

Schedule A - Available Cash Projection
Schedule B - Estimated Funds to be Retained by the Receiver for Distribution/Discharge of the Estate
Schedule C - Allocated State Funds Expensed - Contributed Equity
Schedule D - Interest Earnings Projection - Pooled Cash
Schedule E - Receiver Post Discharge Expenses
Schedule F - Contributed Equity

Sawgrass Mutual Insurance Company
Available Cash Projection
Projected for December 2022 Distribution and Discharge

	Cash Bal. as of September, 2022	Oct-22	Nov-22
Beginning Pooled Cash Balance		$ 363,827.17	$ 357,287.70
Direct Receiver Expenses (Estimated)			
Storage & Utilities, Postage, Temp Staff		500.00	500.00
Sub-total		**500.00**	**500.00**
Allocated Receiver Expenses (Estimated)			
Labor & Benefits		6,318.00	6,318.00
Indirect Expenses		70.00	70.00
Sub-total		**6,388.00**	**6,388.00**
Cash Balance Before Interest Earnings		**356,939.17**	**350,399.70**
Interest Earnings			
Pooled Cash:			
Actual SPIA Earnings for September to be credited on 10/01/2022.		348.53	300.00
Ending Pooled Cash Balance	$ 363,827.17	$ 357,287.70	$ 350,699.70

Assumptions for Allocated Receiver Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average.

June Actual	1,711.29
July Actual	6,104.29
August Actual	8,005.14
September Actual	9,453.08
Sub-total	25,273.80
4 mth. actual average (rounded)	6,318.00

[2] Indirect Expenses: This estimate is SMIC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on SMIC's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	0.10%
Estimated Total for the Receiver	$ 70,000.00
Estimated Expense (rounded)	$ 70.00

Sawgrass Mutual Insurance Company

Estimated Funds to be Retained by the Receiver for Administration of the Estate
Estimated from 10/31/2022 through the Projected Discharge Date of December 2022

	October	November	December	Retainage Calculation
Beginning Cash Balance		$ 357,287.70	$ 353,512.70	
Direct Receiver Expenses				
Storage & Utilities, Postage, Temp Staff		50.00	50.00	
Sub-total		**50.00**	**50.00**	$ 100.00
Allocated Receiver Expenses				
Labor & Benefits		3,955.00 [1]	3,955.00	
Indirect Expenses		70.00 [2]	70.00	
Sub-total		**4,025.00**	**4,025.00**	$ 8,050.00
Claims Distribution (Approx.)				
Cash Balance Before Interest Earnings		**353,212.70**	**349,437.70**	
Interest Earnings				
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D).		**300.00**	**300.00**	$ 600.00
Projected Ending Cash Balance	$ 357,287.70	$ 353,512.70	$ 349,737.70	
				$ 7,550.00

Assumptions for Allocated Receiver Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average.

June Actual	1,711.29
July Actual	6,104.29
August Actual	8,005.14
September Actual	9,453.08
Sub-total	15,820.72
4 mth. actual average (rounded)	$ 3,955.00

[2] Ind Indirect Expenses: This estimate is ICA's estimated pro rata share of the Receiver's estimated total indirect expenses. Th The pro rata share calculation is based on ICA's estimated total assets divided by the Receiver's estimated total assets fo for all receiverships.

Estimated Total Asset %	0.10%
Estimated Total for the Receiver	$ 70,000.00
Estimated Expense (rounded)	$ 70.00

Schedule C

Sawgrass Mutual Insurance Company

Allocated State Funds Expensed

Estimated from October 2022 through the Projected Discharge in December 2022

THIS STATEMENT INCLUDED FOR INFORMATION PURPOSES ONLY - AMOUNTS NOT PART OF DISTRIBUTION CALCULATION

	October	November	December	Totals	
Accrued Allocated State of Florida Expenses (Estimated)					
Labor & Benefits	$ 340.00	$ 340.00	$ 340.00	$ 1,020.00	[1]
Indirect Expenses	50.00	50.00	50.00	$ 150.00	[2]
Total	**$ 390.00**	**$ 390.00**	**$ 390.00**	**$ 1,170.00**	

Assumptions for Allocated State of Florida Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average.

June Actual	16.95
July Actual	283.80
August Actual	324.40
September Actual	741.63
Sub-total	1,366.78
4 mth. actual average (rounded)	$ 340.00

[2] Indirect Expenses: This estimate is SMIC's estimated pro rata share of the State's estimated total indirect expenses. The pro rata share calculation is based on SMIC's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	0.10%
Estimated Total for the State	$ 50,000.00
Estimated Expense (rounded)	$ 50.00

[3] **Per current Receiver policies and procedures, these accumulated amounts are recorded directly against estate equity as opposed to a liability account.**

Schedule D

Sawgrass Mutual Insurance Company
Interest Earnings Projection - Pooled Cash
Projected for December 2022 Distribution and Discharge

Interest accrued for October 2022		
Beginning cash balance	$	363,827.17
Ending cash balance		357,287.70
Average cash balance		360,557.44
Assumed SPIA interest rate (Annualized)		1.00%
Subtotal (Annualized)		3,605.57
Accrual for October 2022	**$**	**300.00**
Interest accrued for November 2022		
Beginning cash balance	$	357,287.70
Ending cash balance		353,512.70
Average cash balance		355,400.20
Assumed SPIA interest rate (Annualized)		1.00%
Subtotal (Annualized)		3,554.00
Accrual for November 2022	**$**	**300.00**
Interest accrued for December 2022		
Beginning cash balance	$	353,512.70
Ending cash balance		349,737.70
Average cash balance		351,625.20
Assumed SPIA interest rate (Annualized)		2.00%
Subtotal (Annualized)		7,032.50
Accrual for December 2022	**$**	**600.00**

Sawgrass Mutual Insurance Company
Receiver Discharge Expenses
Projected for December 2022 Distribution and Discharge

Discharge Expenses (Projected for Post December 2022)

Records Storage, Records Destruction, 2022 Final Tax Returns Preparation	$ 615.00
Total	**$ 615.00**

Sawgrass Mutual Insurance Company

Statement of Contributed Equity from Regulatory Trust Fund Estimated Balances
Projected for Discharge December 2022

I. **Contributed Equity Balance as of 9/30/2022**		$	14,831.14
Accrual for September - December 2022 (Estimate from Schedule C)	$ 1,170.00		
Total		$	1,170.00
Projected Contributed Equity Balance as of December 2022		**$**	**16,001.14**