Renewal Form

NOTICE OF PUBLIC HEARING - COLORADO DIVISION OF INSURANCE for CALENDAR YEAR 2007

MAIL WITH YOUR CHECK PAYABLE TO:
(Use this order form)

STATE FORMS CENTER
4999 Oakland Street
Denver, CO 80239
(303) 370-2165

Annual subscription **$60.00** / Start date of January 1 $_____
(Order # 615-82-46-0954)
3 Quarters subscription **$45.00** / Start date of April 1 $_____
(Order # 615-82-46-3958)
2 Quarter subscription **$30.00** / Start date of July 1 $_____
(Order # 615-82-46-2950)
1 Quarter subscription **$15.00** / Start date of October 1 $_____
(Order # 615-82-46-1952)

SUBTOTAL- $_____

Multiply SUBTOTAL x Sales Tax Below:

Choose One:	Denver City & County Tax	7.72%	$_____
	Metro County Tax**	4.1%	$_____
	State Tax	2.9%	$_____
	Out of State	Exempt	

Colorado Tax Exempt # _____

TOTAL AMOUNT ENCLOSED $_____

Ship To: _____

_____

_____State_____Zip_____

Phone_____Fax_____

** Metro Counties include: Adams, Arapahoe, Boulder, Douglas, & Jefferson