



**Name of TPA:**



# **CENTRAL BANK OF BAHRAIN**

## **Appendix BR-13**

### **Sources of Revenue**

**(To be completed by TPAs on annual basis)**

## SOURCES OF REVENUE

(to be completed by all TPAs in accordance with BR-1.1.4 of Volume 5 Ancillary Service Providers)

Name of TPA: \_\_\_\_\_

For the year ended: \_\_\_\_\_

Total Consolidated Gross Revenue for the year (1)	Source of Revenue (Country) in BD		Source of Revenue (by Client) in BD		Nature of Revenue (enter amount in BD)			
	Bahrain (2)	Other (please specify) (3)	Client Name (4)	Amount (5)	Claims Admin (medical) (6)	Claims Admin (motor) (7)	Other (please specify) (8)	Other (please specify) (9)

Note that the totals of columns (2) and 3 should add to column (1) and the totals of column (5) should add to column (1) as well as the totals of columns (6), (7), (8) and (9) should also equal to column (1).