

**ASSESSMENT REPORT**  
**FOR INSURANCE COMPANIES, SELF-INSURERS & GROUP**  
**FUNDS**

STATE OF ALABAMA  
DEPARTMENT OF LABOR  
WORKERS' COMPENSATION DIVISION  
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Please Email Mary Jorgensen [mary.jorgensen@labor.alabama.gov](mailto:mary.jorgensen@labor.alabama.gov) to request your new form which includes individualized data to save you time. Mary may also be reached at 334-353-0430 and can Fax or Mail.

Thank You for your Patience