



QUARTERLY STATEMENT

As of March 31, 2002
of the Condition and Affairs of the

STATE AUTO NATIONAL INSURANCE COMPANY

NAIC Group Code..... 175, 175 (Current Period) (Prior Period) NAIC Company Code..... 19530 Employer's ID Number..... 31-1334827

Organized under the Laws of OHIO State of Domicile or Port of Entry OHIO

Country of Domicile US

Incorporated..... October 4, 1991 Commenced Business..... January 10, 1992

Statutory Home Office 518 EAST BROAD STREET COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 518 EAST BROAD STREET COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code) 614-464-5200 (Area Code) (Telephone Number)

Mail Address 518 EAST BROAD STREET COLUMBUS OH 43215 (Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 518 EAST BROAD STREET COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code) 614-464-5000 (Area Code) (Telephone Number)

Internet Website Address STAUTO.COM

Statement Contact CYNTHIA ANN POWELL (Name) 614-464-5000 (Area Code) (Telephone Number) (Extension) cindy.powell@stateauto.com (E-Mail Address) 614-719-0342 (Fax Number)

Policyowner Relations Contact 518 EAST BROAD STREET COLUMBUS OH 43215-3976 (Street and Number) (City or Town, State and Zip Code) 614-464-5000 ext 5017 (Area Code) (Telephone Number) (Extension)

OFFICERS

President ROBERT HARLON MOONE Treasurer STEVEN JUSTUS JOHNSTON Secretary JOHN ROBERT LOWTHER

VICE PRESIDENTS

MARK ALLEN BLACKBURN, SVP TERRENCE LEE BOWSHIER JAMES ELIAS DUEMEY WILLIAM DUANE HANSEN
STEVEN RAY HAZELBAKER TERRENCE PAUL HIGERD NOREEN WILLS JOHNSON STEVEN JUSTUS JOHNSTON, SVP
ROBERT ALAN LETT JOHN ROBERT LOWTHER, SVP NELSON EDWARD MCCANTS JOHN BUCHANAN MELVIN
CATHY BERNATH MILEY RICHARD LEE MILEY JOHN MICHAEL PETRUCCI CYNTHIA ANN POWELL

DIRECTORS OR TRUSTEES

DAVID JAMES D'ANTONI URLIN GILBERT HARRIS, JR. PAUL WILLIAM HUESMAN RAMON LYLE HUMKE
WILLIAM JOHN LHOTA JOHN ROBERT LOWTHER GEORGE ROBERT MANSER ROBERT HARLON MOONE
RICHARD KEITH SMITH, JR.

State of..... OHIO
County of..... FRANKLIN

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

(Signature) (Signature) (Signature)
ROBERT HARLON MOONE JOHN ROBERT LOWTHER STEVEN JUSTUS JOHNSTON
(Printed Name) (Printed Name) (Printed Name)
President Secretary Treasurer

Subscribed and sworn to before me this
.....10TH.....day ofMAY....., 2002
.....

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31, Prior Year Net Admitted Assets
1. Bonds.....	36,090,698	0	36,090,698	30,069,690
2. Stocks:				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$....141,980) and short-term investments (\$....129,655).....	271,634	0	271,634	5,281,109
6. Other invested assets.....	0	0	0	0
7. Receivable for securities.....	1,006	0	1,006	5,688
8. Aggregate write-ins for invested assets.....	0	0	0	0
9. Subtotals, cash and invested assets (Lines 1 to 8).....	36,363,339	0	36,363,339	35,356,487
10. Agents' balances or uncollected premiums:				
10.1 Premiums and agents' balances in course of collection.....	16,471,738	856,744	15,614,994	11,721,389
10.2 Premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
10.3 Accrued retrospective premiums.....	0	0	0	0
11. Funds held by or deposited with reinsured companies.....	0	0	0	0
12. Bills receivable, taken for premiums.....	0	0	0	0
13. Amounts receivable under high deductible policies.....	0	0	0	0
14. Reinsurance recoverables on loss and loss adjustment expense payments.....	1,270,318	0	1,270,318	1,269,072
15. Federal and foreign income tax recoverable and interest thereon (including \$....1,627,549 net deferred tax asset) -	1,378,591	490,577	888,014	936,438
16. Guaranty funds receivable or on deposit.....	51,175	0	51,175	51,175
17. Electronic data processing equipment and software.....	0	0	0	0
18. Interest, dividends and real estate income due and accrued.....	559,250	0	559,250	463,386
19. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0	0	0
20. Receivable from parent, subsidiaries and affiliates.....	2,647,198	0	2,647,198	653,394
21. Amounts due from/to protected cells.....	0	0	0	0
22. Equities and deposits in pools and associations.....	106	0	106	117
23. Amounts receivable relating to uninsured accident and health plans.....	0	0	0	0
24. Other assets nonadmitted.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding protected cell assets (Lines 9 through 25).....	58,741,715	1,347,321	57,394,394	50,451,458
27. Protected cell assets.....	0	0	0	0
28. TOTALS (Lines 26 and 27).....	58,741,715	1,347,321	57,394,394	50,451,458

DETAILS OF WRITE-INS

0801.	0	0	0	0
0802.	0	0	0	0
0803.	0	0	0	0
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0	0	0
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above).....	0	0	0	0
2501.	0	0	0	0
2502.	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

STATE AUTO NATIONAL INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$.....0).....	13,381,816	11,805,006
2. Reinsurance payable on paid losses and loss adjustment expenses.....	0	0
3. Loss adjustment expenses.....	3,132,397	2,924,987
4. Commissions payable, contingent commissions and other similar charges.....	83,000	175,000
5. Other expenses (excluding taxes, licenses and fees).....	185,899	108,224
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	981,392	868,192
7. Federal and foreign income taxes (including \$.....0 on realized capital gains (losses) (including \$.....0 net deferred tax liability).....	0	0
8. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....2,870,464 and including warranty reserves of \$.....0).....	17,186,833	12,932,547
10. Advance premium.....	129,099	84,386
11. Dividends declared and unpaid:		
11.1 Stockholders.....	0	0
11.2 Policyholders.....	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions).....	1,740,945	1,177,322
13. Funds held by company under reinsurance treaties.....	0	0
14. Amounts withheld or retained by company for account of others.....	(20,248)	5,189
15. Remittances and items not allocated.....	0	0
16. Provision for reinsurance.....	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0
18. Drafts outstanding.....	0	0
19. Payable to parent, subsidiaries and affiliates.....	1,863,821	1,437,864
20. Payable for securities.....	0	0
21. Liability for amounts held under uninsured accident and health plans.....	0	0
22. Capital notes \$.....0 and interest thereon \$.....0.....	0	0
23. Aggregate write-ins for liabilities.....	0	0
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23).....	38,664,954	31,518,716
25. Protected cell liabilities.....	0	0
26. Total liabilities (Lines 24 and 25).....	38,664,954	31,518,716
27. Aggregate write-ins for special surplus funds.....	0	0
28. Common capital stock.....	2,400,000	2,400,000
29. Preferred capital stock.....	0	0
30. Aggregate write-ins for other than special surplus funds.....	0	0
31. Surplus notes.....	0	0
32. Gross paid in and contributed surplus.....	12,600,000	12,600,000
33. Unassigned funds (surplus).....	3,729,439	3,932,742
34. Less treasury stock, at cost:		
34.10.000 shares common (value included in Line 28 \$.....0).....	0	0
34.20.000 shares preferred (value included in Line 29 \$.....0).....	0	0
35. Surplus as regards policyholders (Lines 27 to 33, less 34).....	18,729,439	18,932,742
36. TOTALS.....	57,394,394	50,451,458

DETAILS OF WRITE-INS

2301.	0	0
2302.	0	0
2303.	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0
2701.	0	0
2702.	0	0
2703.	0	0
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0
3001.	0	0
3002.	0	0
3003.	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	0	0

STATE AUTO NATIONAL INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year to Date	2 Previous Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....18,886,056).....	13,962,424	7,074,883	31,105,160
1.2 Assumed..... (written \$.....17,729).....	18,146	14,201	0
1.3 Ceded..... (written \$.....2,688,863).....	2,019,934	1,061,514	0
1.4 Net..... (written \$.....16,214,922).....	11,960,636	6,027,570	31,105,160
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....0):			
2.1 Direct.....	9,507,431	4,211,455	21,629,338
2.2 Assumed.....	15,966	8,914	0
2.3 Ceded.....	1,340,586	532,660	0
2.4 Net.....	8,182,811	3,687,709	21,629,338
3. Loss expenses incurred.....	1,445,929	718,509	3,080,707
4. Other underwriting expenses incurred.....	3,882,073	2,257,789	10,031,680
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	13,510,813	6,664,007	34,741,725
7. Net income of protected cells.....	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(1,550,177)	(636,437)	(3,636,565)
INVESTMENT INCOME			
9. Net investment income earned.....	433,790	363,940	1,511,361
10. Net realized capital gains (losses).....	121,620	2,972	61,397
11. Net investment gain (loss) (Lines 9 + 10).....	555,410	366,912	1,572,758
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....25,170 amount charged off \$.....181,700).....	(156,529)	(92,316)	(415,182)
13. Finance and service charges not included in premiums.....	1,216,037	618,662	2,688,291
14. Aggregate write-ins for miscellaneous income.....	1,156	874	4,826
15. Total other income (Lines 12 through 14).....	1,060,664	527,220	2,277,935
16. Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15).....	65,898	257,695	214,128
17. Dividends to policyholders.....	0	0	0
18. Net income after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17).....	65,898	257,695	214,128
19. Federal and foreign income taxes incurred.....	412,327	164,136	327,208
20. Net income (Line 18 minus Line 19) (to Line 22).....	(346,429)	93,559	(113,080)
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 previous year.....	18,932,740	14,071,654	14,071,654
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20).....	(346,429)	93,559	(113,080)
23. Net unrealized capital gains or losses.....	0	0	0
24. Change in net unrealized foreign exchange capital gain (loss).....	0	0	0
25. Change in net deferred income taxes.....	478,355	144,521	427,991
26. Change in nonadmitted assets.....	(335,227)	9,526	(202,948)
27. Change in provision for reinsurance.....	0	0	0
28. Change in surplus notes.....	0	0	0
29. Surplus (contributed to) withdrawn from protected cells.....	0	0	0
30. Cumulative effect of changes in accounting principles.....	0	749,123	749,123
31. Capital changes:			
31.1 Paid in.....	0	0	0
31.2 Transferred from surplus (Stock Dividend).....	0	0	0
31.3 Transferred to surplus.....	0	0	0
32. Surplus adjustments:			
32.1 Paid in.....	0	0	4,000,000
32.2 Transferred to capital (Stock Dividend).....	0	0	0
32.3 Transferred from capital.....	0	0	0
33. Net remittances from or (to) Home Office.....	0	0	0
34. Dividends to stockholders.....	0	0	0
35. Change in treasury stock.....	0	0	0
36. Aggregate write-ins for gains and losses in surplus.....	0	0	0
37. Change in surplus as regards policyholders (Lines 22 through 36).....	(203,301)	996,729	4,861,086
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37).....	18,729,439	15,068,383	18,932,740
DETAILS OF WRITE-INS			
0501.	0	0	0
0502.	0	0	0
0503.	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. SECURITIES LENDING INCOME.....	1,156	874	4,826
1402.	0	0	0
1403.	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	1,156	874	4,826
3601. Lines 23 and 29 from 2000 Annual Statement.....	0	0	0
3602.	0	0	0
3603.	0	0	0
3698. Summary of remaining write-ins for Line 36 from overflow page.....	0	0	0
3699. Totals (Lines 3601 thru 3603 plus 3698) (Line 36 above).....	0	0	0

STATE AUTO NATIONAL INSURANCE COMPANY
CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	12,708,878	31,632,110
2. Loss and loss adjustment expenses paid (net of salvage and subrogation).....	7,845,766	21,716,540
3. Underwriting expenses paid.....	3,783,198	9,500,388
4. Other underwriting income (expenses).....	0	0
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4).....	1,079,914	415,182
6. Net investment income.....	351,078	1,504,637
7. Other income (expenses):		
7.1 Agents' balances charged off.....	(156,529)	(415,182)
7.2 Net funds held under reinsurance treaties.....	0	0
7.3 Net amount withheld or retained for account of others.....	(25,437)	5,189
7.4 Aggregate write-ins for miscellaneous items.....	1,217,204	2,726,213
7.5 Total other income (Lines 7.1 to 7.4).....	1,035,238	2,316,220
8. Dividends to policyholders on direct business, less \$.....0 dividends on reinsurance assumed or ceded (net).....	0	0
9. Federal and foreign income taxes (paid) recovered.....	0	184,435
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9).....	2,466,230	4,420,474
CASH FROM INVESTMENTS		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds.....	1,271,105	5,911,914
11.2 Stocks.....	0	0
11.3 Mortgage loans.....	0	0
11.4 Real estate.....	0	0
11.5 Other invested assets.....	0	0
11.6 Net gains or (losses) on cash and short-term investments.....	0	0
11.7 Miscellaneous proceeds.....	4,682	0
11.8 Total investment proceeds (Lines 11.1 to 11.7).....	1,275,787	5,911,914
12. Cost of investments acquired (long-term only):		
12.1 Bonds.....	7,183,645	9,764,403
12.2 Stocks.....	0	0
12.3 Mortgage loans.....	0	0
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Miscellaneous applications.....	0	5,688
12.7 Total investments acquired (Lines 12.1 to 12.6).....	7,183,645	9,770,091
13. Net cash from investments (Line 11.8 minus Line 12.7).....	(5,907,858)	(3,858,177)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
14. Cash provided:		
14.1 Surplus notes, capital and surplus paid in.....	0	4,000,000
14.2 Capital notes \$.....0 less amounts repaid \$.....0.....	0	0
14.3 Net transfers from affiliates.....	425,957	0
14.4 Borrowed funds received.....	0	0
14.5 Other cash provided.....	0	0
14.6 Total (Lines 14.1 to 14.5).....	425,957	4,000,000
15. Cash applied:		
15.1 Dividends to stockholders paid.....	0	0
15.2 Net transfers to affiliates.....	1,993,804	96,657
15.3 Borrowed funds repaid.....	0	0
15.4 Other applications.....	0	0
15.5 Total (Lines 15.1 to 15.4).....	1,993,804	96,657
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5).....	(1,567,847)	3,903,343
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16).....	(5,009,475)	4,465,640
18. Cash and short-term investments:		
18.1 Beginning of year.....	5,281,109	815,469
18.2 End of period (Line 17 plus Line 18.1).....	271,634	5,281,109
DETAILS OF WRITE-INS		
07.401 FINANCE AND SERVICE CHARGES.....	1,216,037	2,688,291
07.402 MISCELLANEOUS INCOME.....	1,156	4,826
07.403 EQUITY IN POOLS AND ASSOCIATIONS.....	11	(117)
07.498 Summary of remaining write-ins for Line 7.4 from overflow page.....	0	33,213
07.499 Total (Lines 7.401 to 7.403 plus 7.498) (Line 7.4 above).....	1,217,204	2,726,213

STATE AUTO NATIONAL INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies:

A. The accompanying quarterly condensed financial statements of State Auto National Insurance Company (the “Company”) have been prepared on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance. In accordance with the *NAIC Annual Statement Instructions* for quarterly presentation, these financial statements do not include all of the information and footnotes required under an annual presentation. For further information, the reader is referred to the Company’s annual statement filed for the period ended December 31, 2001.

9. Income Taxes:

A. The components of the net deferred tax asset (liability) at March 31, 2002, are as follows:

Description	Amount (\$)
Gross deferred tax assets	2,120,563
Gross deferred tax liabilities	2,437
Net deferred tax assets	2,118,126
Nonadmitted deferred tax assets	490,577
Admitted deferred tax assets	1,627,549
Increase (decrease) in nonadmitted deferred tax assets	114,452

17. Sale, Transfer and Servicing of Financial Instruments and Extinguishments of Liabilities:

C. Wash Sales: Not applicable.

STATE AUTO NATIONAL INSURANCE COMPANY
GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1 Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements? Yes [] No [X]

1.2 If yes, explain:.....

2.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [X] No []

2.2 If yes, has the report been filed with the domiciliary state? Yes [X] No []

3.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

3.2 If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.

4. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
If yes, attach an organizational chart.

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

5.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

6. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []

If yes, attach an explanation.

7.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/1998.....

7.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.12/31/1998.....

7.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).07/13/2000.....

7.4 By what department or departments?..... Ohio

8.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.) Yes [] No [X]

8.2 If yes, give full information:

GENERAL INTERROGATORIES (continued)

INVESTMENT

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

9.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [] No [X]

9.2 If yes, explain:.....

10.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

10.2 If yes, give full and complete information relating thereto:

11. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$.0

12. Amount of real estate and mortgages held in short-term investments: \$.0

13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

13.2 If yes, please complete the following:

	1 Prior Year-End Statement Value	2 Current Quarter Statement Value
13.21 Bonds.....	\$.0	\$.0
13.22 Preferred Stock.....	\$.0	\$.0
13.23 Common Stock.....	\$.0	\$.0
13.24 Short-Term Investments.....	\$.0	\$.0
13.25 Mortgages, Loans or Real Estate.....	\$.0	\$.0
13.26 All Other.....	\$.0	\$.0
13.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26).....	\$.0	\$.0
13.28 Total Investment in Parent included in Lines 13.21 to 13.26 above	\$.0	\$.0
13.29 Receivable from Parent not included in Lines 13.21 to 13.26 above.....	\$.0	\$.0

14.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

14.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
If no, attach a description with this statement.

15. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

15.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Bank One Columbus	1111 Polaris Parkway, Bldg 54101 - 2B, Columbus, OH 43240

15.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation.

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
N/A		

15.3 Have there been any changes, including name changes, in the custodian(s) identified in 15.1 during the current year? Yes [] No [X]

15.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

15.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
N/A		

STATE AUTO NATIONAL INSURANCE COMPANY
GENERAL INTERROGATORIES (continued)
PART 2
PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [] N/A [X]
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]
3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation liabilities tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? Yes [] No [X]
4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
.....0.0	0.0	0.0	0	0	0	0	0	0	0	0
Total.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0

Statement as of March 31, 2002 of the

STATE AUTO NATIONAL INSURANCE COMPANY

SCHEDULE A - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period.....	0	0	0	0
2. Increase (decrease) by adjustment.....	0	0	0	0
3. Cost of acquired.....	0	0	0	0
4. Cost of additions to and permanent improvements.....	0	0	0	0
5. Total profit (loss) on sales.....	0	0	0	0
6. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
7. Amount received on sales.....	0	0	0	0
8. Book/adjusted carrying value at end of current period.....	0	0	0	0
9. Total valuation allowance.....	0	0	0	0
10. Subtotal (Lines 8 plus 9).....	0	0	0	0
11. Total nonadmitted amounts.....	0	0	0	0
12. Statement value, current period (Page 2, real estate lines, current period).....	0	0	0	0

SCHEDULE B - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/recorded investment excluding accrued interest on mortgages owned, beginning of period.....	0	0	0	0
2. Amount loaned during period:				
2.1 Actual cost at time of acquisitions.....	0	0	0	0
2.2 Additional investment made after acquisitions.....	0	0	0	0
3. Accrual of discount and mortgage interest points and commitment fees.....	0	0	0	0
4. Increase (decrease) by adjustment.....	0	0	0	0
5. Total profit (loss) on sale.....	0	0	0	0
6. Amounts paid on account or in full during the period.....	0	0	0	0
7. Amortization of premium.....	0	0	0	0
8. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period.....	0	0	0	0
10. Total valuation allowance.....	0	0	0	0
11. Subtotal (Lines 9 plus 10).....	0	0	0	0
12. Total nonadmitted amounts.....	0	0	0	0
13. Statement value of mortgages owned at end of current period.....	0	0	0	0

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, beginning of period.....	0	0	0	0
2. Cost of acquisitions during period:				
2.1 Actual cost at time of acquisitions.....	0	0	0	0
2.2 Additional investment made after acquisitions.....	0	0	0	0
3. Accrual of discount.....	0	0	0	0
4. Increase (decrease) by adjustment.....	0	0	0	0
5. Total profit (loss) on sale.....	0	0	0	0
6. Amounts paid on account or in full during the period.....	0	0	0	0
7. Amortization of premium.....	0	0	0	0
8. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
9. Book/adjusted carrying value of long-term invested assets at end of current period.....	0	0	0	0
10. Total valuation allowance.....	0	0	0	0
11. Subtotal (Lines 9 plus 10).....	0	0	0	0
12. Total nonadmitted amounts.....	0	0	0	0
13. Statement value of long-term invested assets at end of current period.....	0	0	0	0

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

11

	1 Statement Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Statement Value End of First Quarter	6 Statement Value End of Second Quarter	7 Statement Value End of Third Quarter	8 Statement Value December 31 Prior Year
BONDS								
1. Class 1.....	34,781,649	13,505,650	12,557,067	(13,032)	35,717,200	0	0	34,781,649
2. Class 2.....	503,273	0	0	(120)	503,153	0	0	503,273
3. Class 3.....	0	0	0	0	0	0	0	0
4. Class 4.....	0	0	0	0	0	0	0	0
5. Class 5.....	0	0	0	0	0	0	0	0
6. Class 6.....	0	0	0	0	0	0	0	0
7. Total Bonds.....	35,284,922	13,505,650	12,557,067	(13,152)	36,220,353	0	0	35,284,922
PREFERRED STOCK								
8. Class 1.....	0	0	0	0	0	0	0	0
9. Class 2.....	0	0	0	0	0	0	0	0
10. Class 3.....	0	0	0	0	0	0	0	0
11. Class 4.....	0	0	0	0	0	0	0	0
12. Class 5.....	0	0	0	0	0	0	0	0
13. Class 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	35,284,922	13,505,650	12,557,067	(13,152)	36,220,353	0	0	35,284,922

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Amount of Interest Received Current Quarter	5 Paid for Accrued Interest
8099999. Totals.....	129,655	XXX.....	129,655	0	0

SCHEDULE DA - PART 2 - Verification

Short-Term Investments Owned

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period.....	5,215,231	0	0	764,138
2. Cost of short-term investments acquired.....	6,322,005	0	0	17,496,084
3. Increase (decrease) by adjustment.....	0	0	0	0
4. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
5. Total profit (loss) on disposal of short-term investments.....	0	0	0	0
6. Consideration received on disposal of short-term investments.....	11,407,582	0	0	13,044,991
7. Book/adjusted carrying value, current period.....	129,654	0	0	5,215,231
8. Total valuation allowance.....	0	0	0	0
9. Subtotal (Lines 7 plus 8).....	129,654	0	0	5,215,231
10. Total nonadmitted amounts.....	0	0	0	0
11. Statement value (Lines 9 minus 10).....	129,654	0	0	5,215,231
12. Income collected during period.....	11,835	0	0	42,517
13. Income earned during period.....	4,948	0	0	45,655

Sch. DB-Part F-Section 1

NONE

Sch. DB-Part F-Section 2

NONE

Sch. F

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

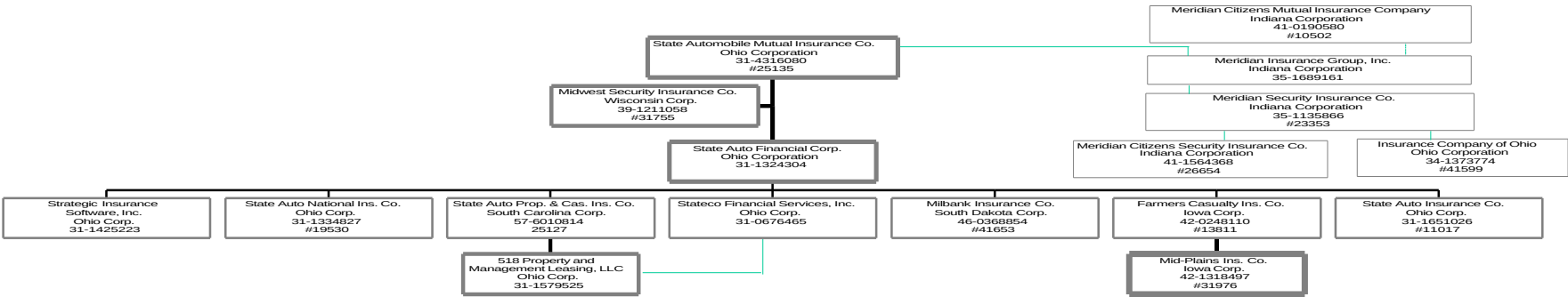
		1 Is Insurer Licensed? (Yes or No)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
States, Etc.								
1.	Alabama.....AL	Invalid...	1,258,672	1,226,021	772,319	245,616	1,596,319	1,995,878
2.	Alaska.....AK	Invalid...	0	0	0	0	0	0
3.	Arizona.....AZ	Invalid...	0	0	0	0	0	0
4.	Arkansas.....AR	Invalid...	829,221	440,557	461,073	219,365	829,143	833,809
5.	California.....CA	Invalid...	0	0	0	0	0	0
6.	Colorado.....CO	Invalid...	0	0	0	0	0	0
7.	Connecticut.....CT	Invalid...	0	0	0	0	0	0
8.	Delaware.....DE	Invalid...	0	0	0	0	0	0
9.	District of Columbia.....DC	Invalid...	0	0	0	0	0	0
10.	Florida.....FL	Invalid...	371,788	0	54,728	0	157,690	0
11.	Georgia.....GA	Invalid...	282,046	308,964	188,995	66,843	534,763	458,444
12.	Hawaii.....HI	Invalid...	0	0	0	0	0	0
13.	Idaho.....ID	Invalid...	0	0	0	0	0	0
14.	Illinois.....IL	Invalid...	250,882	117,686	43,918	(442)	137,485	76,908
15.	Indiana.....IN	Invalid...	170,264	32,218	569,613	0	100,470	11,528
16.	Iowa.....IA	Invalid...	0	0	0	0	0	0
17.	Kansas.....KS	Invalid...	0	0	0	0	0	0
18.	Kentucky.....KY	Invalid...	5,139,714	1,317,791	1,289,773	124,733	2,757,074	1,314,375
19.	Louisiana.....LA	Invalid...	0	0	0	0	0	0
20.	Maine.....ME	Invalid...	0	0	0	0	0	0
21.	Maryland.....MD	Invalid...	198,503	115,545	65,935	27,572	142,579	63,121
22.	Massachusetts.....MA	Invalid...	0	0	0	0	0	0
23.	Michigan.....MI	Invalid...	0	0	0	0	0	0
24.	Minnesota.....MN	Invalid...	1,551,318	630,569	516,915	45,995	1,475,043	722,550
25.	Mississippi.....MS	Invalid...	501,966	453,064	156,056	77,730	418,999	414,847
26.	Missouri.....MO	Invalid...	501,209	214,842	170,446	13,486	289,913	293,635
27.	Montana.....MT	Invalid...	0	0	0	0	0	0
28.	Nebraska.....NE	Invalid...	0	0	0	0	0	0
29.	Nevada.....NV	Invalid...	0	0	0	0	0	0
30.	New Hampshire.....NH	Invalid...	0	0	0	0	0	0
31.	New Jersey.....NJ	Invalid...	0	0	0	0	0	0
32.	New Mexico.....NM	Invalid...	0	0	0	0	0	0
33.	New York.....NY	Invalid...	0	0	0	0	0	0
34.	North Carolina.....NC	Invalid...	0	0	0	0	0	0
35.	North Dakota.....ND	Invalid...	0	0	0	0	0	0
36.	Ohio.....OH	Invalid...	2,160,910	905,717	979,396	158,524	2,472,600	1,440,862
37.	Oklahoma.....OK	Invalid...	0	0	0	0	0	0
38.	Oregon.....OR	Invalid...	0	0	0	0	0	0
39.	Pennsylvania.....PA	Invalid...	1,108,200	886,486	635,055	139,114	1,428,798	785,447
40.	Rhode Island.....RI	Invalid...	0	0	0	0	0	0
41.	South Carolina.....SC	Invalid...	1,675,338	1,580,807	1,071,173	156,758	2,946,964	1,977,211
42.	South Dakota.....SD	Invalid...	29,278	13,691	4,827	2,649	77,576	7,216
43.	Tennessee.....TN	Invalid...	1,545,878	622,755	551,206	154,752	1,262,762	1,456,432
44.	Texas.....TX	Invalid...	0	0	0	0	0	0
45.	Utah.....UT	Invalid...	150,127	90,488	82,270	28,194	164,531	166,583
46.	Vermont.....VT	Invalid...	0	0	0	0	0	0
47.	Virginia.....VA	Invalid...	0	0	0	0	0	0
48.	Washington.....WA	Invalid...	0	0	0	0	0	0
49.	West Virginia.....WV	Invalid...	619,939	274,950	260,402	71,971	698,296	319,457
50.	Wisconsin.....WI	Invalid...	540,806	366,345	450,567	31,502	714,481	253,406
51.	Wyoming.....WY	Invalid...	0	0	0	0	0	0
52.	American Samoa.....AS	Invalid...	0	0	0	0	0	0
53.	Guam.....GU	Invalid...	0	0	0	0	0	0
54.	Puerto Rico.....PR	Invalid...	0	0	0	0	0	0
55.	US Virgin Islands.....VI	Invalid...	0	0	0	0	0	0
56.	Canada.....CN	Invalid...	0	0	0	0	0	0
57.	Aggregate Other Alien.....OT	XXX.....	0	0	0	0	0	0
58.	Totals.....	(a).....0	18,886,056	9,598,496	8,324,666	1,564,361	18,205,486	12,591,709
DETAILS OF WRITE-INS								
5701.		XXX.....	0	0	0	0	0	0
5702.		XXX.....	0	0	0	0	0	0
5703.		XXX.....	0	0	0	0	0	0
5798.	Summary of remaining write-ins for Line 57 from overflow page...	XXX.....	0	0	0	0	0	0
5799.	Totals (Lines 5701 thru 5703 + Line 5798) (Line 57 above).....	XXX.....	0	0	0	0	0	0

(a) Insert the number of yes responses except for Canada and Other Alien.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ORGANIZATIONAL STRUCTURE OF
STATE AUTO HOLDING COMPANY SYSTEM
State Auto Group #175



PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
1. Fire.....	0	0	0.0	0.0
2. Allied lines.....	0	0	0.0	0.0
3. Farmowners multiple peril.....	0	0	0.0	0.0
4. Homeowners multiple peril.....	0	0	0.0	0.0
5. Commercial multiple peril.....	0	0	0.0	0.0
6. Mortgage guaranty.....	0	0	0.0	0.0
8. Ocean marine.....	0	0	0.0	0.0
9. Inland marine.....	0	0	0.0	0.0
10. Financial guaranty.....	0	0	0.0	0.0
11.1. Medical malpractice-occurrence.....	0	0	0.0	0.0
11.2. Medical malpractice-claims made.....	0	0	0.0	0.0
12. Earthquake.....	0	0	0.0	0.0
13. Group accident and health.....	0	0	0.0	0.0
14. Credit accident and health.....	0	0	0.0	0.0
15. Other accident and health.....	0	0	0.0	0.0
16. Workers' compensation.....	0	0	0.0	0.0
17.1. Other liability-occurrence.....	0	0	0.0	0.0
17.2. Other liability-claims made.....	0	0	0.0	0.0
18.1. Products liability-occurrence.....	0	0	0.0	0.0
18.2. Products liability-claims made.....	0	0	0.0	0.0
19.1, 19.2 Private passenger auto liability.....	9,587,112	6,609,055	68.9	58.4
19.3, 19.4 Commercial auto liability.....	0	0	0.0	0.0
21. Auto physical damage.....	4,375,312	2,898,377	66.2	61.8
22. Aircraft (all perils).....	0	0	0.0	0.0
23. Fidelity.....	0	0	0.0	0.0
24. Surety.....	0	0	0.0	0.0
26. Burglary and theft.....	0	0	0.0	0.0
27. Boiler and machinery.....	0	0	0.0	0.0
28. Credit.....	0	0	0.0	0.0
29. International.....	0	0	0.0	0.0
30. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
31. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
33. Aggregate write-ins for other lines of business.....	0	0	0.0	0.0
34. Totals.....	13,962,424	9,507,431	68.1	59.5
DETAILS OF WRITE-INS				
3301.	0	0	0.0	0.0
3302.	0	0	0.0	0.0
3303.	0	0	0.0	0.0
3398. Sum. of remaining write-ins for Line 33 from overflow page.....	0	0	0.0	0.0
3399. Totals (Lines 3301 thru 3303 plus 3398) (Line 33).....	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	0	0	0
2. Allied lines.....	0	0	0
3. Farmowners multiple peril.....	0	0	0
4. Homeowners multiple peril.....	0	0	0
5. Commercial multiple peril.....	0	0	0
6. Mortgage guaranty.....	0	0	0
8. Ocean marine.....	0	0	0
9. Inland marine.....	0	0	0
10. Financial guaranty.....	0	0	0
11.1. Medical malpractice-occurrence.....	0	0	0
11.2. Medical malpractice-claims made.....	0	0	0
12. Earthquake.....	0	0	0
13. Group accident and health.....	0	0	0
14. Credit accident and health.....	0	0	0
15. Other accident and health.....	0	0	0
16. Workers' compensation.....	0	0	0
17.1. Other liability-occurrence.....	0	0	0
17.2. Other liability-claims made.....	0	0	0
18.1. Products liability-occurrence.....	0	0	0
18.2. Products liability-claims made.....	0	0	0
19.1, 19.2 Private passenger auto liability.....	13,436,892	13,436,892	6,361,434
19.3, 19.4 Commercial auto liability.....	0	0	0
21. Auto physical damage.....	5,449,164	5,449,164	3,237,062
22. Aircraft (all perils).....	0	0	0
23. Fidelity.....	0	0	0
24. Surety.....	0	0	0
26. Burglary and theft.....	0	0	0
27. Boiler and machinery.....	0	0	0
28. Credit.....	0	0	0
29. International.....	0	0	0
30. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
31. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
33. Aggregate write-ins for other lines of business.....	0	0	0
34. Totals.....	18,886,056	18,886,056	9,598,496
DETAILS OF WRITE-INS			
3301.	0	0	0
3302.	0	0	0
3303.	0	0	0
3398. Sum. of remaining write-ins for Line 33 from overflow page.....	0	0	0
3399. Totals (Lines 3301 thru 3303 plus 3398) (Line 33).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

19

	1	2	3	4	5	6	7	8	9	10	11	12	13									
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (a) (Cols. 1 + 2)	2002 Loss and LAE Payments on Claims Reported as of Prior Year-End	2002 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2002 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (b) (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 11 + 12)									
1. 1999 + Prior	1,075	240	1,315	53	1	54	1,397	29	56	1,482	375	(154)	221									
2. 2000	1,329	519	1,848	304	33	337	1,503	23	292	1,818	478	(171)	307									
3. Subtotals 2000 + Prior	2,404	759	3,163	357	34	391	2,900	52	348	3,300	853	(325)	528									
4. 2001	7,264	4,302	11,566	2,333	1,100	3,433	4,413	1,120	1,570	7,103	(518)	(512)	(1,030)									
5. Subtotals 2001 + Prior	9,668	5,061	14,729	2,690	1,134	3,824	7,313	1,172	1,918	10,403	335	(837)	(502)									
6. 2002	XXX.....	XXX.....	XXX.....	XXX.....	3,020	3,020	XXX.....	3,755	2,355	6,110	XXX.....	XXX.....	XXX.....									
7. Totals	9,668	5,061	14,729	2,690	4,154	6,844	7,313	4,927	4,273	16,513	335	(837)	(502)									
8. Prior Year-End's Surplus As Regards Policyholders	18,933										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7									
																				1.3.5 %	2.(16.5)%	3.(3.4)%
																				Col. 13, Line 7 Line 8		
																				4.(2.7)%		

(a) Should equal prior year-end Annual Statement; Page 3, Col. 1, Lines 1 + 3.
(b) Should equal Q.S. Page 3, Col.1, Lines 1 and 3.
(c) Should also equal Cols. 6 + 10 less Col. 3 for Lines 1 through 5 only.

STATE AUTO NATIONAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the SVO Compliance Certification be filed with this statement?	YES
2. Will the Trusteed Surplus Statement be filed with the State of Domicile and the NAIC with this statement?	NO
3. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement?	NO

EXPLANATIONS:

BAR CODE:



Overflow Page for Write-Ins

Additional Write-ins for Cash Flow:

	1 Current Year to Date	2 Prior Year Ended December 31
07.404 GUARANTY FUNDS RECEIVABLE.....	0	(51,175)
07.405 ADVANCE PREMIUMS.....	0	84,387
07.497 Summary of remaining write-ins for Line 7.4 from Cash Flow.....	0	33,213

Sch. A-Part 2

NONE

Sch. A-Part 3

NONE

Sch. B-Part 1

NONE

Sch. B-Part 2

NONE

Sch. BA-Part 1

NONE

Sch. BA-Part 2

NONE

SCHEDULE D - PART 3

Show all Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation (a)
Bonds - U.S. Government								
3133ML-H3-2.....	FEDERAL HOME LOAN BANK 6.250% 02/06/12.....	01/28/2002.....	McDonald & Co.....		998,750	1,000,000	0	1PE.....
3134A4-HE-7.....	FEDERAL HOME LOAN MTG C 6.375% 08/01/11.....	03/13/2002.....	Legg Mason.....		495,960	500,000	3,807	1.....
3134A4-JT-2.....	FEDERAL HOME LOAN MTG C 5.750% 01/15/12.....	01/10/2002.....	Morgan Stanley Dean Witter.....		998,570	1,000,000	0	1PE.....
31359M-KF-9.....	FNMA 6.250% 07/19/11.....	03/06/2002.....	Gruntal & Company Inc.....		508,125	500,000	4,167	1PE.....
31359M-MB-6.....	FNMA 6.000% 01/18/12.....	01/25/2002.....	Legg Mason.....		995,000	1,000,000	1,667	1PE.....
3136F1-LD-0.....	FNMA 6.250% 02/06/12.....	01/25/2002.....	Morgan Stanley Dean Witter.....		997,500	1,000,000	0	1PE.....
0399999.	Total - Bonds - U.S. Government.....				4,993,905	5,000,000	9,641	XXX.....
Bonds - Political Subdivisions of States								
Texas								
414004-EA-5.....	HARRIS CNTY TX GO 5.750% 10/01/13.....	01/24/2002.....	Mesirow & Company.....		556,705	500,000	9,424	1PE.....
430686-HM-0.....	HIGHLAND PARK TX GO 5.750% 02/15/13.....	03/07/2002.....	Mesirow & Company.....		587,115	540,000	2,329	1PE.....
	Texas.....				1,143,820	1,040,000	11,753	XXX.....
	United States.....				1,143,820	1,040,000	11,753	XXX.....
2499999.	Total - Bonds - Political Subdivision.....				1,143,820	1,040,000	11,753	XXX.....
Bonds - Special Revenue and Special Assessment								
Ohio								
677632-DV-0.....	OHIO ST UNIVERSITY REV 5.250% 12/01/18.....	02/26/2002.....	McDonald & Co.....		1,045,920	1,000,000	8,750	1PE.....
	Ohio.....				1,045,920	1,000,000	8,750	XXX.....
	United States.....				1,045,920	1,000,000	8,750	XXX.....
3199999.	Total - Bonds - Special Revenue & Special Assessments.....				1,045,920	1,000,000	8,750	XXX.....
6099997.	Total - Bonds - Part 3.....				7,183,645	7,040,000	30,144	XXX.....
6099999.	Total - Bonds.....				7,183,645	7,040,000	30,144	XXX.....
7299999.	Total - Bonds, Preferred and Common Stocks.....				7,183,645	XXX	30,144	XXX.....

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues:.....0.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarte

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Book/Adjusted Carrying Value At Disposal Date	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest on Bonds Received During Year	Dividends on Stocks Received During Year	NAIC Designation (a)
Bonds - U.S. Government																
36205T-JL-8....	GNMA POOL# 399967 8.000% 05/15/26.....	03/01/2002	Paydown.....		118,640	118,640	119,530	118,640	(752)	0	0	0	0	797		1.....
03999999.	Total - Bonds - U.S. Government.....				118,640	118,640	119,530	118,640	(752)	0	0	0	0	797	0	XXX..
Bonds - Political Subdivisions of States																
Michigan																
032879-KK-3....	ANCHOR BAY MI GO 5.500% 05/01/16.....	03/07/2002	Mesirow & Company.....		594,400	540,000	545,605	545,037	(93)	0	0	49,363	49,363	10,808		1PE.....
	Michigan.....				594,400	540,000	545,605	545,037	(93)	0	0	49,363	49,363	10,808	0	XXX..
	United States.....				594,400	540,000	545,605	545,037	(93)	0	0	49,363	49,363	10,808	0	XXX..
24999999.	Total - Bonds - Political Subdivisions.....				594,400	540,000	545,605	545,037	(93)	0	0	49,363	49,363	10,808	0	XXX..
Bonds - Special Revenue and Special Assessment																
Texas																
988170-AR-7...	YSLETA TX REV 5.750% 11/15/19.....	01/24/2002	Mesirow & Company.....		558,065	500,000	485,025	485,808	24	0	0	72,257	72,257	5,910		1PE.....
	Texas.....				558,065	500,000	485,025	485,808	24	0	0	72,257	72,257	5,910	0	XXX..
	United States.....				558,065	500,000	485,025	485,808	24	0	0	72,257	72,257	5,910	0	XXX..
31999999.	Total - Bonds - Special Revenue & Assessment.....				558,065	500,000	485,025	485,808	24	0	0	72,257	72,257	5,910	0	XXX..
60999997.	Total - Bonds - Part 4.....				1,271,105	1,158,640	1,150,160	1,149,485	(821)	0	0	121,620	121,620	17,515	0	XXX..
60999999.	Total - Bonds.....				1,271,105	1,158,640	1,150,160	1,149,485	(821)	0	0	121,620	121,620	17,515	0	XXX..
72999999.	Total - Bonds, Preferred and Common Stocks.....				1,271,105	XXX.....	1,150,160	1,149,485	(821)	0	0	121,620	121,620	17,515	0	XXX..

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues:.....0.

Sch. DB-Part A-Section 1
NONE

Sch. DB-Part B-Section 1
NONE

Sch. DB-Part C-Section 1
NONE

Sch. DB-Part D-Section 1
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	Book Balance at End of Each Month During Current Quarter			8
				5	6	7	
Depository	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories							
National City Bank..... Columbus, OH.....	0.000	0	0	61,349	68,390	68,390	
Park National Bank..... Mt Vernon, OH.....	0.000	0	0	73,590	73,590	73,590	
0199999. Total Open Depositories.....	XXX	0	0	134,939	141,980	141,980	XXX
0399999. Total Cash on Deposit.....	XXX	0	0	134,939	141,980	141,980	XXX
0599999. Total Cash.....	XXX	0	0	134,939	141,980	141,980	XXX

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Overflow Page
NONE

