

STATEMENT AS OF MARCH 31, 2002 OF THE OHIO BAR LIABILITY INSURANCE CO

AMENDED EXPLANATION COVER



QUARTERLY STATEMENT
AS OF MARCH 31, 2002
OF THE CONDITION AND AFFAIRS OF THE
OHIO BAR LIABILITY INSURANCE CO

NAIC Group Code 0000 (Current Period) NAIC Company Code 37176 (Prior Period) Employer's ID Number 31-0947214

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

Country of Domicile US

Incorporated December 5, 1978 Commenced Business September 1, 1979

Statutory Home Office 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204 (Street and Number, City or Town, State and Zip Code)

Main Administrative Office 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204 614-488-7924 (Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address PO BOX 2708, COLUMBUS, Ohio 43216-2708 (Street and Number, City or Town, State and Zip Code)

Primary Location of Books and Records 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204 614-488-7924 (Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.oblic.com

Statement Contact ALBERT G SLAKIS 614-488-7924 (Name) (Area Code) (Telephone Number) (Extension) aslakis@oblic.com 614-488-7936 (E-Mail Address) (Fax Number)

Policyowner Relations Contact (Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number) (Extension)

OFFICERS

President ALBERT G SLAKIS
Secretary LINDA FAYE SAUTTER
Treasurer DENNY L RAMEY

VICE PRESIDENTS

FREDERICK HUNKER

DIRECTORS OR TRUSTEES

JOHN MARSHALL ADAMS
JOHN THOMAS BROWN
JAMES R. JEFFERY
FREDERICK L OREMUS
ALBERT GEORGE SLAKIS
DUKE WINSTON THOMAS

GARY ALAN BANAS
STEPHEN CHAPPELEAR
THOMAS D LAMMERS
DENNY L RAMEY
JOSEPH THOMAS SVETE
MERIDETH ANN TROTT

PAULA LOUISE BROOKS
DON EDGAR FULLER
DOLORIS FINCHER LEARMONTH
DAVID PETER RUPP
THOMAS M TAGGART
JAMES M WILES

State of Ohio SS
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.

ALBERT G SLAKIS President LINDA F SAUTTER Secretary DENNY L RAMEY VP Claims

Subscribed and sworn to before me this 13 day of May, 2002

ASSETS

	Current Statement Date			4 December 31, Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	21,920,892		21,920,892	20,805,829
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	7,477,495	1,045,877	6,431,618	6,414,590
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 9,692) and short-term investments (\$ 1,259,904)	1,269,596		1,269,596	1,647,771
6. Other invested assets				
7. Receivable for securities				
8. Aggregate write-ins for invested assets				
9. Subtotals, cash and invested assets (Lines 1 to 8)	30,667,983	1,045,877	29,622,106	28,868,190
10. Agents' balances or uncollected premiums :				
10.1 Premiums and agents' balances in course of collection	294,545		294,545	341,978
10.2 Premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)				
10.3 Accrued retrospective premiums				
11. Funds held by or deposited with reinsured companies				
12. Bills receivable, taken for premiums				
13. Amounts billed and receivable under high deductible policies				
14. Reinsurance recoverables on loss and loss adjustment expense payments				
15. Federal and foreign income tax recoverable and interest thereon (including \$ 190,941 net deferred tax asset)	322,057	131,116	190,941	165,253
16. Guaranty funds receivable or on deposit				
17. Electronic data processing equipment and software				
18. Interest, dividends and real estate income due and accrued	241,885		241,885	286,075
19. Net adjustments in assets and liabilities due to foreign exchange rates				
20. Receivable from parent, subsidiaries and affiliates				
21. Amounts due from/to protected cells				
22. Equities and deposits in pools and associations				
23. Amounts receivable relating to uninsured accident and health plans				
24. Other assets nonadmitted	50,986	50,986		
25. Aggregate write-ins for other than invested assets				
26. Total assets excluding protected cell assets (Lines 9 through 25)	31,577,456	1,227,979	30,349,477	29,661,496
27. Protected cell assets				
28. TOTALS (Lines 26 and 27)	31,577,456	1,227,979	30,349,477	29,661,496
DETAILS OF WRITE-INS				
0801.				
0802.				
0803.				
0898. Summary of remaining write-ins for Line 8 from overflow page				
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above)				
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				

STATEMENT AS OF MARCH 31, 2002 OF THE OHIO BAR LIABILITY INSURANCE CO

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ 607,500)	4,409,240	4,144,053
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses	1,532,676	1,493,551
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	53,845	41,353
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	14,300	14,300
7. Federal and foreign income taxes, including \$ on realized capital gains (losses) (including \$ net deferred tax liability)		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 488,774 and including warranty reserves of \$)	1,709,485	1,527,640
10. Advance premium	191,162	
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	211,492	211,762
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Payable for securities		
21. Liability for amounts held under uninsured accident and health plans		
22. Capital notes \$ and interest thereon \$		
23. Aggregate write-ins for liabilities	50,000	449,322
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	8,172,200	7,881,981
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)	8,172,200	7,881,981
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	1,000,000	1,000,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus		
33. Unassigned funds (surplus)	21,177,277	20,779,515
34. Less treasury stock, at cost:		
34.1 shares common (value included in Line 28 \$)		
34.2 shares preferred (value included in Line 29 \$)		
35. Surplus as regards policyholders (Lines 27 to 33, less 34)	22,177,277	21,779,515
36. TOTALS	30,349,477	29,661,496
DETAILS OF WRITE-INS		
2301. PREMIUM SUSPENSE ACCT		411,661
2302. CLAIMS SETTLEMENT	50,000	37,661
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page		
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	50,000	449,322
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001.		
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 1,298,568)	1,060,284	1,065,127	4,222,914
1.2 Assumed (written \$)			
1.3 Ceded (written \$ 281,989)	225,550	222,506	894,837
1.4 Net (written \$ 1,016,579)	834,734	842,621	3,328,077
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 607,500):			
2.1 Direct	1,003,992	1,778,214	2,292,203
2.2 Assumed			
2.3 Ceded	513,672	1,294,099	1,477,553
2.4 Net	490,320	484,115	814,650
3. Loss expenses incurred	117,256	117,838	641,175
4. Other underwriting expenses incurred	316,674	250,336	770,857
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	924,250	852,289	2,226,682
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(89,516)	(9,668)	1,101,395
INVESTMENT INCOME			
9. Net investment income earned	305,226	357,956	1,196,584
10. Net realized capital gains (losses)	40,991	15	(68,259)
11. Net investment gain (loss) (Lines 9 plus 10)	346,217	357,971	1,128,325
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income			125
15. Total other income (Lines 12 through 14)			125
16. Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 plus 11 plus 15)	256,701	348,303	2,229,845
17. Dividends to policyholders			
18. Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17)	256,701	348,303	2,229,845
19. Federal and foreign income taxes incurred	87,278	118,423	758,147
20. Net income (Line 18 minus Line 19) (to Line 22)	169,423	229,880	1,471,698
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	21,779,515	20,843,454	20,843,454
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20)	169,423	229,880	1,471,698
23. Net unrealized capital gains or losses	16,231	(181,357)	(372,720)
24. Change in net unrealized foreign exchange capital gain (loss)			
25. Change in net deferred income tax	(196,972)	59,435	34,747
26. Change in nonadmitted assets	227,612	(291,023)	(346,481)
27. Change in provision for reinsurance			
28. Change in surplus notes			
29. Surplus (contributed to) withdrawn from protected cells			
30. Cumulative effect of changes in accounting principles	191,173		191,173
31. Capital changes:			
31.1 Paid in			
31.2 Transferred from surplus (Stock Dividend)			
31.3 Transferred to surplus			
32. Surplus adjustments:			
32.1 Paid in			
32.2 Transferred to capital (Stock Dividend)			
32.3 Transferred from capital			
33. Net remittances from or (to) Home Office			
34. Dividends to stockholders			
35. Change in treasury stock			
36. Aggregate write-ins for gains and losses in surplus	(9,705)	(9,000)	(42,356)
37. Change in surplus as regards policyholders (Lines 22 through 36)	397,762	(192,065)	936,061
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37)	22,177,277	20,651,389	21,779,515
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1401. MISCELLANEOUS INCOME			125
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)			125
3601. LOSS IN SURPLUS	(6,705)		(11,356)
3602. STOCK REDEMPTION	(3,000)	(9,000)	(31,000)
3603.			
3698. Summary of remaining write-ins for Line 36 from overflow page			
3699. TOTALS (Lines 3601 through 3603 plus 3698) (Line 36 above)	(9,705)	(9,000)	(42,356)

CASH FLOW

	1 Current Year To Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance	1,063,742	3,365,592
2. Loss and loss adjustment expenses paid (net of salvage and subrogation)	303,264	1,635,825
3. Underwriting expenses paid	304,182	752,239
4. Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	456,296	977,528
6. Net investment income	414,610	1,317,579
7. Other income (expenses):		
7.1 Agents' balances charged off		
7.2 Net funds held under reinsurance treaties		
7.3 Net amount withheld or retained for account of others		
7.4 Aggregate write-ins for miscellaneous items		125
7.5 Total other income (Lines 7.1 to 7.4)		125
8. Dividends to policyholders on direct business, less \$ dividends on reinsurance assumed or ceded (net)		
9. Federal and foreign income taxes (paid) recovered		(675,000)
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9)	870,906	1,620,232
Cash from Investments		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds	1,058,308	9,411,941
11.2 Stocks		1,943,488
11.3 Mortgage loans		
11.4 Real estate		
11.5 Other invested assets		
11.6 Net gains or (losses) on cash and short-term investments		
11.7 Miscellaneous proceeds		
11.8 Total investment proceeds (Lines 11.1 to 11.7)	1,058,308	11,355,429
12. Cost of investments acquired (long-term only):		
12.1 Bonds	2,476,256	10,994,252
12.2 Stocks	6,351	3,471,144
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Miscellaneous applications		
12.7 Total investments acquired (Lines 12.1 to 12.6)	2,482,607	14,465,396
13. Net cash from investments (Line 11.8 minus Line 12.7)	(1,424,299)	(3,109,967)
Cash from Financing and Miscellaneous Sources		
14. Cash provided:		
14.1 Surplus notes, capital and surplus paid in		
14.2 Capital notes \$ less amounts repaid \$		
14.3 Net transfers from affiliates		
14.4 Borrowed funds received		
14.5 Other cash provided	175,218	
14.6 Total (Lines 14.1 to 14.5)	175,218	
15. Cash applied:		
15.1 Dividends to stockholders paid		
15.2 Net transfers to affiliates		
15.3 Borrowed funds repaid		
15.4 Other applications		586,286
15.5 Total (Lines 15.1 to 15.4)		586,286
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5)	175,218	(586,286)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16)	(378,175)	(2,076,021)
18. Cash and short-term investments:		
18.1 Beginning of year	1,647,771	3,723,792
18.2 End of period (Line 17 plus Line 18.1)	1,269,596	1,647,771
DETAILS OF WRITE-INS		
7.401 MISCELLANEOUS INCOME		125
7.402		
7.403		
7.498 Summary of remaining write-ins for Line 7.4 from overflow page		
7.499 Totals (Lines 7.401 through 7.403 plus 7.498) (Line 7.4 above)		125

NOTES TO FINANCIAL STATEMENTS

Note 9 Income Taxes

- A. The components of the net deferred tax asset/(liability) at March 31, 2002 are as follows:
- (1) Total all deferred tax assets (Admitted & nonadmitted)
Current Year-\$333,553, Prior Year End- \$523,832.
 - (2) Total all DTL's.
Current Year- \$11,496, Prior Year End- \$10,358.
 - (3) Total DTA's nonadmitted in accordance with SSAP No 10.
Current Year-\$131,116, Prior Year End- \$348,222.
 - (4) Total Deferred tax assets.
Current Year-\$190,941, Prior Year End-\$165,252.
 - (5) Change in deferred tax assets
Current Year-\$(217,106), Prior Year End-\$348,222.
- B. Not Applicable.
- C. The significant components of income taxes incurred are:

The main components of the 1st Qtr 2002 deferred tax assets are as follows:

	2002
Deferred Tax Assets	
Book over Tax Reserves	114,604
Fixed Assets	2,233
Accrued Expenses	64,649
Capital Loss Carryforward	35,823
Unearned Premiums	116,245
Unrealized Losses	109,049
Total Deferred Tax Assets	333,554
Non Admitted Deferred Tax Assets	131,116
Admitted Deferred Tax Asset	202,437
Bond Investments	10,358
Total Deferred Tax Liabilities	11,496
Net Admitted Deferred Tax Assets	190,941

Note 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities.

- C. Wash Sales. Not Applicable.

Note 22 Reinsurance

- A. Unsecured Reinsurance Recoverables. None.
- Reinsurance Recoverables in Dispute. None.

B. Reinsurance Assumed and Ceded.

1.	Assumed		Ceded		Net	
	Reinsurance		Reinsurance		Reinsurance	
	Prem.		Prem.		Prem.	
	Reserve	Comm.	Reserve	Comm.	Reserve	Comm.
a. Affiliates	\$N/A	\$N/A	\$N/A	\$N/A	\$	\$
b. All others	\$	\$	\$488,774	\$70,498	\$488,774	\$ 70,498
c. Total	\$N/A	\$N/A	\$488,774	\$70,498	\$488,774	\$ 70,498
d. Direct Unearned Premium Reserve	\$1,220,771					

Note 24 Change in Incurred Losses and Loss Adjustment Expenses

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years have been decreased or increased as a result of reestimation of unpaid losses and loss adjustment expenses, as additional information becomes known regarding individual claims.

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 () No (X)

2.2 If yes, has the report been filed with the domiciliary state? Yes () 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 has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 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 () N/A (X)
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. 08/03/1998

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. 12/31/1997

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). 08/21/1998

7.4 By what department or departments?
Ohio Department of Insurance
.....
.....

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 - Line 5.2 (continued)

¹ Name of Entity	² NAIC Company Code	³ State of Domicile
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GENERAL INTERROGATORIES (continued)

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

INVESTMENT

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: \$

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

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

13.2 If yes, please complete the following:

	¹ Prior Year-End Statement Value	² Current Quarter Statement Value
13.21 Bonds	\$	\$
13.22 Preferred Stock	\$	\$
13.23 Common Stock	\$ 3,264,178	\$ 3,291,193
13.24 Short-Term Investments	\$	\$
13.25 Mortgages, Loans or Real Estate	\$	\$
13.26 All Other	\$	\$
13.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26)	\$ 3,264,178	\$ 3,291,193
13.28 Total Investment in Parent included in Lines 13.21 to 13.26 above	\$	\$
13.29 Receivable from Parent not included in Lines 13.21 to 13.26 above	\$	\$

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
Paine Webber	Arlington Gate Dr, Columbus OH
Merrill Lynch	10 West Second St 4th Fl, Dayton, OH 45402
.....

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)
.....
.....
.....

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 Identifiy all investment advisors, brokers/dealers or individuals acting on behalf of brokers/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
.....
.....
.....

GENERAL INTERROGATORIES - Line 15.1 (continued)

¹ Name of Custodian(s)	² Custodian Address
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GENERAL INTERROGATORIES - Line 15.2 (continued)

¹ Name(s)	² Location(s)	³ Complete Explanation(s)
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GENERAL INTERROGATORIES - Line 15.4 (continued)

¹ Old Custodian	² New Custodian	³ Date of Change	⁴ Reason
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GENERAL INTERROGATORIES - Line 15.5 (continued)

¹ Central Registration Depository	² Name(s)	³ Address
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GENERAL INTERROGATORIES
(continued)

PART 2
PROPERTY AND CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.

Yes () No () N/A ()
2.

Has the reporting entity reinsured any risk with any other reporting 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?
If yes, attach an explanation.

Yes () No ()
- 3.1

Have any of the reporting entity's primary reinsurance contracts been cancelled?

Yes () No ()
- 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 ()
- 4.2

If yes, complete the Discount Schedule.

NONE

GENERAL INTERROGATORIES - LINE 4.2

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

Page 10

Schedule A, Verification
NONE

Schedule B, Verification
NONE

Schedule BA, Verification
NONE

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

	1	2	3	4	5	6	7	8
	Statement Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Statement Value End of First Quarter	Statement Value End of Second Quarter	Statement Value End of Third Quarter	Statement Value December 31 Prior Year
BONDS								
1. Class 1	22,443,355	2,482,607	1,058,308	(677,166)	23,190,488			22,443,355
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	22,443,355	2,482,607	1,058,308	(677,166)	23,190,488			22,443,355
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	22,443,355	2,482,607	1,058,308	(677,166)	23,190,488			22,443,355

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Amount of Interest Received Current Quarter	Paid for Accrued Interest
8099999 Totals	1,259,904	X X X	1,259,904	6,143	

SCHEDULE DA - PART 2 - VERIFICATION

Short-Term Investments Owned

	1	2	3	4
	First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	Prior Year Ended December 31
1. Book / adjusted carrying value, beginning of period	1,637,526			3,695,477
2. Cost of short-term investments acquired				
3. Increase (decrease) by adjustment				
4. Increase (decrease) by foreign exchange adjustment				
5. Total profit (loss) on disposal of short-term investments				
6. Consideration received on disposal of short-term investments	377,622			2,057,951
7. Book / adjusted carrying value, current period	1,259,904			1,637,526
8. Total valuation allowance				
9. Subtotal (Line 7 plus Line 8)	1,259,904			1,637,526
10. Total nonadmitted amounts				
11. Statement value (Line 9 minus Line 10)	1,259,904			1,637,526
12. Income collected during period	6,143			159,075
13. Income earned during period	5,897			154,793

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Sch. DB, Pt. F, Sn. 1, Summary Replicated (Syn.) Assets Open
NONE

Page 14

Sch. DB, Pt. F, Sn. 2, Reconciliation Replicated (Syn.) Assets
NONE

Page 15

Schedule F - Ceded Reinsurance
NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, etc.	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
1. Alabama	AL	No					
2. Alaska	AK	No					
3. Arizona	AZ	No					
4. Arkansas	AR	No					
5. California	CA	No					
6. Colorado	CO	No					
7. Connecticut	CT	No					
8. Delaware	DE	No					
9. District of Columbia	DC	No					
10. Florida	FL	No					
11. Georgia	GA	No					
12. Hawaii	HI	No					
13. Idaho	ID	No					
14. Illinois	IL	No					
15. Indiana	IN	No					
16. Iowa	IA	No					
17. Kansas	KS	No					
18. Kentucky	KY	No					
19. Louisiana	LA	No					
20. Maine	ME	No					
21. Maryland	MD	No					
22. Massachusetts	MA	No					
23. Michigan	MI	No					
24. Minnesota	MN	No					
25. Mississippi	MS	No					
26. Missouri	MO	No					
27. Montana	MT	No					
28. Nebraska	NE	No					
29. Nevada	NV	No					
30. New Hampshire	NH	No					
31. New Jersey	NJ	No					
32. New Mexico	NM	No					
33. New York	NY	No					
34. North Carolina	NC	No					
35. North Dakota	ND	No					
36. Ohio	OH	Yes	1,298,568	1,355,211	228,060	61,720	4,919,985
37. Oklahoma	OK	No					
38. Oregon	OR	No					
39. Pennsylvania	PA	No					
40. Rhode Island	RI	No					
41. South Carolina	SC	No					
42. South Dakota	SD	No					
43. Tennessee	TN	No					
44. Texas	TX	No					
45. Utah	UT	No					
46. Vermont	VT	No					
47. Virginia	VA	No					
48. Washington	WA	No					
49. West Virginia	WV	No					
50. Wisconsin	WI	No					
51. Wyoming	WY	No					
52. American Samoa	AS	No					
53. Guam	GU	No					
54. Puerto Rico	PR	No					
55. U.S. Virgin Islands	VI	No					
56. Canada	CN	No					
57. Aggregate Other Alien	OT	X X X					
58. Totals	(a) 1	1,298,568	1,355,211	228,060	61,720	4,919,985	6,495,506
DETAILS OF WRITE-INS							
5701.	X X X						
5702.	X X X						
5703.	X X X						
5798. Summary of remaining write-ins for Line 57 from overflow page	X X X						
5799. TOTALS (Lines 5701 through 5703 plus Line 5798)(Line 57 above)	X X X						

(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

NONE

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				
2. Allied lines				
3. Farmowners multiple peril				
4. Homeowners multiple peril				
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine				
10. Financial guaranty				
11.1 Medical malpractice-occurrence				
11.2 Medical malpractice-claims made				
12. Earthquake				
13. Group accident and health				
14. Credit accident and health				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability-occurrence				
17.2 Other liability-claims made				
18.1 Products liability-occurrence	35,235			
18.2 Products liability-claims made	1,025,049	1,003,992	97.9	171.4
19.1, 19.2 Private passenger auto liability				
19.3, 19.4 Commercial auto liability				
21. Auto physical damage				
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft				
27. Boiler and machinery				
28. Credit				
29. International				
30. Reinsurance-Nonproportional Assumed Property	X X X	X X X	X X X	X X X
31. Reinsurance-Nonproportional Assumed Liability	X X X	X X X	X X X	X X X
32. Reinsurance-Nonproportional Assumed Financial Lines	X X X	X X X	X X X	X X X
33. Aggregate write-ins for other lines of business				
34. TOTALS	1,060,284	1,003,992	94.7	166.9
DETAILS OF WRITE-INS				
3301.				
3302.				
3303.				
3398. Summary of remaining write-ins for Line 33 from overflow page				
3399. Totals (Lines 3301 through 3303 plus Line 3398) (Line 33)				

PART 2 - DIRECT PREMIUMS WRITTEN

	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire			
2. Allied lines			
3. Farmowners multiple peril			
4. Homeowners multiple peril			
5. Commercial multiple peril			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine			
10. Financial guaranty			
11.1 Medical malpractice-occurrence			
11.2 Medical malpractice-claims made			
12. Earthquake			
13. Group accident and health			
14. Credit accident and health			
15. Other accident and health			
16. Workers' compensation			
17.1 Other liability-occurrence	35,235	35,235	27,388
17.2 Other liability-claims made	1,263,333	1,263,333	1,327,823
18.1 Products liability-occurrence			
18.2 Products liability-claims made			
19.1, 19.2 Private passenger auto liability			
19.3, 19.4 Commercial auto liability			
21. Auto physical damage			
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft			
27. Boiler and machinery			
28. Credit			
29. International			
30. Reinsurance-Nonproportional Assumed Property	X X X	X X X	X X X
31. Reinsurance-Nonproportional Assumed Liability	X X X	X X X	X X X
32. Reinsurance-Nonproportional Assumed Financial Lines	X X X	X X X	X X X
33. Aggregate write-ins for other lines of business			
34. TOTALS	1,298,568	1,298,568	1,355,211
DETAILS OF WRITE-INS			
3301.			
3302.			
3303.			
3398. Summary of remaining write-ins for Line 33 from overflow page			
3399. Totals (Lines 3301 through 3303 plus Line 3398) (Line 33)			

PART 3 (000 Omitted)
LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	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 plus 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 plus 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 plus 8 plus 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 plus 7 minus Col. 1)	Prior-Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 plus 8 plus 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency(c) (Cols. 11 plus 12)
1. 1999 + Prior	1,899	63	1,962	48		48	1,832		63	1,895	(19)		(19)
2. 2000	1,466	108	1,574	65		65	1,330		100	1,430	(71)	(8)	(79)
3. Subtotals 2000 + prior	3,365	171	3,536	113		113	3,162		163	3,325	(90)	(8)	(98)
4. 2001	1,713	389	2,102	187		187	1,438		322	1,760	(88)	(67)	(155)
5. Subtotals 2001 + prior	5,078	560	5,638	300		300	4,600		485	5,085	(178)	(75)	(253)
6. 2002	X X X	X X X	X X X	X X X	3	3	X X X	640	217	857	X X X	X X X	X X X
7. Totals	5,078	560	5,638	300	3	303	4,600	640	702	5,942	(178)	(75)	(253)
8. Prior Year-End's Surplus As Regards Policy-holders	21,779,515										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. (13.4)%	3. (4.5)%
													Col. 13 , Line 7 Line 8
													4. %

(a) Should Equal Prior Year-End Annual Statement; Page 3, Column 1, Lines 1 plus 3
(b) Should Equal Quarterly Statement Page 3, Column 1, Lines 1 and 3
(c) Should Also Equal Columns 6 plus 10 less Column 3 for Lines A through E only

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.

RESPONSES

1. Will the SVO Compliance Certification be filed with this statement?

Yes

EXPLANATION:

.....

.....

BARCODE:

Document Identifier 470:

2. Will the Trusted Surplus Statement be filed with the state of domicile and the NAIC with this statement?

No

EXPLANATION:

.....

.....

BARCODE:

2. Document Identifier 490:



3. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement?

No

EXPLANATION:

.....

.....

BARCODE:

3. Document Identifier 450:



Page E01

Sch. A, Pt. 2, Real Estate Acquired
NONE

Sch. A, Pt. 3, Real Estate Sold
NONE

Page E02

Schedule B, Part 1, Mortgage Loans Acquired
NONE

Schedule B, Part 2, Mortgage Loans Sold
NONE

Page E03

Sch. BA, Pt. 1, Other Long-Term Invested Assets Acquired
NONE

Sch. BA, Pt. 2, Other Long-Term Invested Assets Sold
NONE

SCHEDULE D - PART 3

Show All Long-term Bonds and Stock Acquired by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation (a)
Bonds - Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions								
3133F0-LW-7	FHLMC	02/12/2002	Paine Webber		800,000	800,000		1
31359M-LS-0	FNMA	02/11/2002	Paine Webber		1,046,256	1,050,000	12,385	1
3136F1-UY-4	FNMA	03/15/2002	Merrill Lynch		630,000	630,000		1
3199999	Subtotal - Bonds - Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions				2,476,256	2,480,000	12,385	
6099997	Subtotal - Bonds - Part 3				2,476,256	2,480,000	12,385	
6099999	Subtotal - Bonds				2,476,256	2,480,000	12,385	
Common Stock - Industrial and Miscellaneous								
922908-10-8	Vanguard 500 Index Fund Admiral Shares	03/22/2002	The Vanguard Group	59.941	6,351			
6899999	Subtotal - Common Stock - Industrial and Miscellaneous				6,351			
7099997	Subtotal - Common Stock - Part 3				6,351			
7099999	Subtotal - Common Stock				6,351			
7199999	Subtotal - Preferred and Common Stock				6,351			
7299999	TOTALS				2,482,607		12,385	

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

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
CUSIP Identif- ication	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 Designa- tion (a)
Bonds - Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																
3133M5-QB-9	FHLB	02/11/2002	Paine Webber	1,058,308	1,025,000.00	1,025,000.00	981,684	1,006,165	(11,153)			40,991	40,991	21,450		1
3199999	Subtotal - Bonds - Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions			1,058,308	1,025,000.00	1,025,000.00	981,684	1,006,165	(11,153)			40,991	40,991	21,450		
6099997	Subtotal - Bonds - Part 4			1,058,308	1,025,000.00	1,025,000.00	981,684	1,006,165	(11,153)			40,991	40,991	21,450		
6099999	Subtotal - Bonds			1,058,308	1,025,000.00	1,025,000.00	981,684	1,006,165	(11,153)			40,991	40,991	21,450		
7299999	TOTALS			1,058,308			981,684	1,006,165	(11,153)			40,991	40,991	21,450		

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

Page E06

Schedule DB, Part A, Section 1
NONE

Schedule DB, Part B, Section 1
NONE

Page E07

Schedule DB, Part C, Section 1
NONE

Schedule DB, Part D, Section 1
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository		2	3	4	Book Balance at End of Each Month During Current Quarter			8
		Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	5	6	7	*
Name	Location and Supplemental Information				First Month	Second Month	Third Month	
Open Depositories								
Key Bank- Reg Checking		Beechcroft, Columbus, Ohio			19,147	27,157	8,720	
Key Bank-Div Checking		Tremont Rd., Columbus, Ohio			895	884	872	
0199999	TOTAL - Open Depositories				20,042	28,041	9,592	
0399999	TOTAL Cash on Deposit				20,042	28,041	9,592	
0499999	Cash in Company's Office				100	100	100	
0599999	TOTALS				20,142	28,141	9,692	



SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL MALPRACTICE PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

The type of health care providers reported on this page is:

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama AL								
2. Alaska AK								
3. Arizona AZ								
4. Arkansas AR								
5. California CA								
6. Colorado CO								
7. Connecticut CT								
8. Delaware DE								
9. District of Columbia DC								
10. Florida FL								
11. Georgia GA								
12. Hawaii HI								
13. Idaho ID								
14. Illinois IL								
15. Indiana IN								
16. Iowa IA								
17. Kansas KS								
18. Kentucky KY								
19. Louisiana LA								
20. Maine ME								
21. Maryland MD								
22. Massachusetts MA								
23. Michigan MI								
24. Minnesota MN								
25. Mississippi MS								
26. Missouri MO								
27. Montana MT								
28. Nebraska NE								
29. Nevada NV								
30. New Hampshire NH								
31. New Jersey NJ								
32. New Mexico NM								
33. New York NY								
34. North Carolina NC								
35. North Dakota ND								
36. Ohio OH								
37. Oklahoma OK								
38. Oregon OR								
39. Pennsylvania PA								
40. Rhode Island RI								
41. South Carolina SC								
42. South Dakota SD								
43. Tennessee TN								
44. Texas TX								
45. Utah UT								
46. Vermont VT								
47. Virginia VA								
48. Washington WA								
49. West Virginia WV								
50. Wisconsin WI								
51. Wyoming WY								
52. American Samoa AS								
53. Guam GU								
54. Puerto Rico PR								
55. U.S. Virgin Islands VI								
56. Canada CN								
57. Aggregate Other Alien OT								
58. Totals								
DETAILS OF WRITE-INS								
5701.								
5702.								
5703.								
5798. Summary of remaining write-ins for Line 57 from overflow page								
5799. Totals (Lines 5701 through 5703 plus Line 5798) (Line 57 above)								



PROPERTY AND CASUALTY SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2002
OF THE U.S. BRANCH OF THE OHIO BAR LIABILITY INSURANCE CO

TRUSTEED SURPLUS STATEMENT

AFFIDAVIT OF U.S. MANAGERS, GENERAL AGENTS OR ATTORNEYS

_____ being duly sworn, says that he/she is the _____ of the
OHIO BAR LIABILITY INSURANCE CO, a corporation organized under the laws of _____,
entered to transact business in the United States through the State of _____, that this trustee statement
together with its related schedules appended hereto is a true statement of the trustee surplus of said corporation, that the
several items of assets, as hereinafter enumerated, are the absolute property of said corporation, free and clear from any liens
or claims thereon, except as hereinafter stated, and that each and all of the hereinafter mentioned assets are held in the United
States by Insurance Departments and Officers of the various States of the United States and Trustees as hereinafter indicated,
and that the assets, liabilities and deductions therefrom reported in this statement are in accordance with the instructions
accompanying this statement.

Subscribed and sworn to before me this
_____ day of _____ A.D., 2002

AFFIDAVIT OF TRUSTEE - SCHEDULE B

_____ being sworn, say that it is the Trustee of the OHIO BAR LIABILITY INSURANCE CO,
a corporation organized under the laws of _____, entered to transact business in the
United States through the State of _____, located at _____,
that the assets listed in Schedule B of the following statement are held by it as such Trustee within the United States, and that
the said assets are subject to no other claims than those of policyholders and creditors within the United States.

NONE

Subscribed and sworn to before me this
_____ day of _____ A.D., 2002

AFFIDAVIT OF TRUSTEE - SCHEDULE C

_____ being sworn, say that it is the Trustee of the OHIO BAR LIABILITY INSURANCE CO,
a corporation organized under the laws of _____, entered to transact business in the
United States through the State of _____, located at _____,
that the assets listed in Schedule C of the following statement are held by it as such Trustee within the United States, and that
the said assets are subject to no other claims than those of policyholders and creditors within the United States.

Subscribed and sworn to before me this
_____ day of _____ A.D., 2002

AFFIDAVIT OF TRUSTEE - SCHEDULE D

_____ being sworn, say that it is the Trustee of the OHIO BAR LIABILITY INSURANCE CO,
a corporation organized under the laws of _____, entered to transact business in the
United States through the State of _____, located at _____,
that the assets listed in Schedule D of the following statement are held by it as such Trustee within the United States, and that
the said assets are subject to no other claims than those of policyholders and creditors within the United States.

Subscribed and sworn to before me this
_____ day of _____ A.D., 2002

TRUSTEED SURPLUS STATEMENT (Continued)
ASSETS

1	2	3	4	5
Line Number	Description	Admitted Asset Value	Par Value	Fair Value

NONE

TRUSTEED SURPLUS STATEMENT (Continued)

LIABILITIES AND TRUSTEED SURPLUS		1 Current Quarter
1. Total Liabilities		
ADDITIONS TO LIABILITIES:		
2. Ceded Reinsurance Balances Payable		
3. Agents' Credit Balances		
4. Aggregate Write-ins For Other Additions to Liabilities		
5. Total Additions (Line 2 plus Line 3 plus Line 4)		
6. Total (Line 1 plus Line 5)		
DEDUCTIONS FROM LIABILITIES:		
7. Reinsurance Recoverable on Paid Losses and Loss Adjustment Expenses:		
7.1 Authorized Companies		
7.2 Unauthorized Companies		
8. Special State Deposits, not exceeding net liabilities carried in this statement on business in each respective state:		
8.1 Special State Deposits (submit schedule)		
8.2 Accrued interest on Special State Deposit:		
9. Agents' balances or uncollected premiums not m		
10. Unpaid Reinsurance Premiums Receivable, not ex		
10.1 Authorized Companies		
10.2 Unauthorized Companies		
11. Aggregate write-ins for other deductions from liabilities		
12. Total Deductions (Lines 7 through 11)		
13. Total Adjusted Liabilities (Line 6 minus Line 12)		
14. Trusteed Surplus		
15. Total		
DETAILS OF WRITE-INS		
0401.		
0402.		
0403.		
0498. Summary of remaining write-ins for Line 4 from overflow page		
0499. Totals (Lines 0401 through 0403 plus Line 0498) (Line 4 above)		
1101.		
1102.		
1103.		
1198. Summary of remaining write-ins for Line 11 from overflow page		
1199. Totals (Lines 1101 through 1103 plus Line 1198) (Line 11 above)		

NONE