

QUARTERLY STATEMENT

OF THE

Mid-American Fire & Casualty Company

of _____ **Loveland**

in the state of _____ **Ohio**

TO THE

Insurance Department

OF THE

STATE OF

FOR THE QUARTER ENDED

June 30, 2002

PROPERTY AND CASUALTY

2002

QUARTERLY STATEMENT



23507200220100102

AS OF June 30, 2002

OF THE CONDITION AND AFFAIRS OF THE

Mid-American Fire & Casualty Company

NAIC Group Code 0111 (Current Period) 0111 (Prior Period) NAIC Company Code 23507 Employer's ID Number 31-0978279

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

Country of Domicile United States

Incorporated: February 29, 1980 Commenced Business: February 29, 1980

Statutory Home Office: 6281 Tri-Ridge Boulevard Loveland, OH 45140

Main Administrative Office: 6281 Tri-Ridge Boulevard Loveland, OH 45140 513-576-3200

Mail Address: 62 Maple Avenue Keene, NH 03431

Primary Location of Books and Records: 6281 Tri-Ridge Boulevard Loveland, OH 45140 513-576-3200

Internet Website Address: N/A

Statement Contact: Natalie A. Ford 603-358-4143
natalie.ford@libertyram.com 603-357-4889
(E-Mail Address) (Fax Number)

Policyowner Relations Contact: 62 Maple Avenue Keene, NH 03431 603-352-3221

OFFICERS

President-CEO Richard Thomas Bell
VP-Secretary Douglas Tucker Jenkins
Treasurer-AVP Stephen Douglas Powell
SVP-Actuary #Thomas Grover Moylan

Vice-Presidents

Philip John Guymont (SVP-CFO)	Mark Edward Fiebrink (EVP)	Anthony Alexander Fontanes (EVP-CIO)	Forrest Howard Johnson (SVP)
Amy Johnston Leddy (SVP)	William George Mersch (SVP)	Charles Bruce Ruzicka (SVP)	Gary Jay Ostrow

DIRECTORS OR TRUSTEES

Richard Thomas Bell	James Paul Condryn, III	Honore Jean Fallon	Mark Edward Fiebrink
Roger Lucien Jean	Forrest Howard Johnson	Dennis James Langwell	Amy Johnston Leddy
Christopher Charles Mansfield	William George Mersch	Charles Bruce Ruzicka	

State of New Hampshire
County of Cheshire ss

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)
Richard Thomas Bell	Douglas Tucker Jenkins	Stephen Douglas Powell
(Printed Name)	(Printed Name)	(Printed Name)
President-CEO	VP-Secretary	Treasurer-AVP

Subscribed and sworn to before me this
9th day of August, 2002

Notary Public (seal)

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	6,447,955		6,447,955	4,507,886
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks				
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 \$ 0 encumbrances)				
4.2 Properties held for the production of income (less \$ 0 encumbrances)				
4.3 Properties held for sale (less \$ 0 encumbrances)				
5. Cash (\$ 0) and short-term investments (\$ 197,986)	197,986		197,986	602,301
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)	6,645,941		6,645,941	5,110,187
10. Agents' balances or uncollected premiums:				
10.1 Premiums and agents' balances in course of collection				
10.2 Premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 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 receivable under high deductible policies				
14. Reinsurance recoverables on loss and loss adjustment expense payments	(2,748)		(2,748)	(1,778)
15. Federal and foreign income tax recoverable and interest thereon (including \$ 167,934 net deferred tax asset)	798,544	630,610	167,934	173,125
16. Guaranty funds receivable or on deposit				
17. Electronic data processing equipment and software				
18. Interest, dividends and real estate income due and accrued	104,584		104,584	69,829
19. Net adjustments in assets and liabilities due in foreign exchange rates				
20. Receivable from parent, subsidiaries and affiliates	607,839		607,839	1,474,472
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				
25. Aggregate write-ins for other than invested assets	500,000	500,000		
26. Total assets excluding protected cell assets (Lines 9 through 25)	8,654,160	1,130,610	7,523,550	6,825,835
27. Protected cell assets				
28. TOTALS (Lines 26 and 27)	8,654,160	1,130,610	7,523,550	6,825,835

DETAILS OF WRITE-INS				
0801.				
0802.				
0803.				
0898. Summary of remaining write-ins for Line 8 from overflow page				
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)				
2501. Other assets	500,000	500,000		
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	500,000	500,000		

LIABILITIES, SURPLUS AND OTHER FUNDS	1	2
	Current Statement Date	December 31, Prior Year
1. Losses (current accident year \$ 0)		
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)		
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7. Federal and foreign income taxes (including \$ 0 on realized capital gains (losses) (including \$ 0 net deferred tax liability)	66,979	
8. Borrowed money \$ 0 and interest thereon \$ 0		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 27,734,600 and including warranty reserves of \$ 0)		
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	104,342	23,130
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	421,876	
21. Liability for amounts held under uninsured accident and health plans		
22. Capital notes \$ 0 and interest thereon \$ 0		
23. Aggregate write-ins for liabilities	78,125	78,127
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	671,322	101,257
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)	671,322	101,257
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	2,500,000	2,500,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus	3,055,585	3,055,585
33. Unassigned funds (surplus)	1,296,643	1,168,993
34. Less treasury stock, at cost:		
34.1 0 shares common (value included in Line 28 \$ 0)		
34.2 0 shares preferred (value included in Line 29 \$ 0)		
35. Surplus as regards policyholders (Lines 27 to 33, less 34)	6,852,228	6,724,578
36. TOTALS	7,523,550	6,825,835

DETAILS OF WRITE-INS		
2301. Other liabilities	78,125	78,127
2302.		
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page		
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	78,125	78,127
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 UNDERWRITING INCOME			
	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
1. Premiums earned:			
1.1 Direct (written \$ 28,552,482)	24,083,477	17,730,533	38,853,567
1.2 Assumed (written \$ 0)			
1.3 Ceded (written \$ 28,552,482)	24,083,477	17,730,533	38,853,567
1.4 Net (written \$ 0)			
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 0):			
2.1 Direct	15,787,617	11,523,624	23,792,133
2.2 Assumed			
2.3 Ceded	15,787,617	11,523,624	23,792,133
2.4 Net			
3. Loss expenses incurred			
4. Other underwriting expenses incurred			
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)			
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)			
INVESTMENT INCOME			
9. Net investment income earned	171,943	211,185	332,394
10. Net realized capital gains (losses)			142,963
11. Net investment gain (loss) (Lines 9 + 10)	171,943	211,185	475,357
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 0 amount charged off \$ 0)			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income			
15. Total other income (Lines 12 through 14)			
16. Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15)	171,943	211,185	475,357
17. Dividends to policyholders			
18. Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17)	171,943	211,185	475,357
19. Federal and foreign income taxes incurred	51,359	73,915	164,975
20. Net income (Line 18 minus Line 19) (to Line 22)	120,584	137,270	310,382
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	6,724,578	6,753,329	6,753,329
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20)	120,584	137,270	310,382
23. Net unrealized capital gains or losses			
24. Change in net unrealized foreign exchange capital gain (loss)			
25. Change in net deferred income tax			891,294
26. Change in nonadmitted assets	7,066	60,326	1,234,079
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		(603,876)	(2,464,505)
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		(49,200)	
37. Change in surplus as regards policyholders (Lines 22 through 36)	127,650	(455,480)	(28,750)
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37)	6,852,228	6,297,849	6,724,579
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.			
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)			
3601. Decrease in valuation of in-force		(49,200)	
3602.			
3603.			
3698. Summary of remaining write-ins for Line 36 from overflow page			
3699. TOTALS (Lines 3601 through 3603 plus 3698) (Line 36 above)		(49,200)	

CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance	81,211	23,130
2. Loss and loss adjustment expenses paid (net of salvage and subrogation)	(970)	(442)
3. Underwriting expenses paid		
4. Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	82,181	23,572
6. Net investment income	139,828	420,315
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		
7.5 Total other income (Lines 7.1 to 7.4)		
8. Dividends to policyholders on direct business, less \$ 0 dividends on reinsurance assumed or ceded (net)		
9. Federal and foreign income taxes (paid) recovered	27,877	(192,927)
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9)	249,886	250,960
Cash from Investments		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds	17,759	3,190,836
11.2 Stocks		
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	421,876	
11.8 Total investment proceeds (Lines 11.1 to 11.7)	439,635	3,190,836
12. Cost of investments acquired (long-term only):		
12.1 Bonds	1,960,469	2,487,006
12.2 Stocks		
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)	1,960,469	2,487,006
13. Net cash from investments (Line 11.8 minus Line 12.7)	(1,520,834)	703,830
Cash from Financing and Miscellaneous Sources		
14. Cash provided:		
14.1 Surplus notes, capital and surplus paid in		
14.2 Capital notes \$ 0 less amounts repaid \$ 0		
14.3 Net transfers from affiliates	866,633	
14.4 Borrowed funds received		
14.5 Other cash provided		
14.6 Total (Lines 14.1 to 14.5)	866,633	
15. Cash applied:		
15.1 Dividends to stockholders paid		
15.2 Net transfers to affiliates		1,502,174
15.3 Borrowed funds repaid		
15.4 Other applications		44,062
15.5 Total (Lines 15.1 to 15.4)		1,546,236
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5)	866,633	(1,546,236)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16)	(404,315)	(591,446)
18. Cash and short-term investments:		
18.1 Beginning of year	602,301	1,193,747
18.2 End of period (Line 17 plus Line 18.1)	197,986	602,301

DETAILS OF WRITE-INS		
7.401		
7.402		
7.403		
7.498 Summary of remaining write-ins for Line 7.4 from overflow page		
7.499 Totals (Lines 07.401 through 07.403 + 07.498) (Line 07.4 above)		

NOTES TO FINANCIAL STATEMENTS

17. c. Wash Sales – The Company did not engage in any wash sales during the quarter.

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 [☒]
- 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 Domicilie, as required by the Model Act?

Yes [☐] No [☒]
- 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 [☒]
- 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 [☐]

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 [☒]
- 5.2

If yes, provide the 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 [☐]

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.

12/31/1999
- 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.

12/31/1999
- 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).

10/24/2001
- 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 [☒]
- 8.2

If yes, give full information

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 [☒]
- 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 [☒]
- 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 [☐] No [☒]
- 13.2

If yes, please complete the following:

	1	2
	Prior Year-End Statement Value	Current Quarter Statement Value
13.21 Bonds	\$	\$
13.22 Preferred Stock	\$	\$
13.23 Common Stock	\$	\$
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)	\$	\$
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 [☒]
- 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 [☒] No [☐]
- 15.1

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

1	2
Name of Custodian(s)	Custodian Address
JP Morgan Chase	3 Chase Metro Tech Center, Brooklyn, NY 11245

- 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	2	3
Name(s)	Location(s)	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 [☒]
- 15.4

If yes, give full and complete information relating thereto:

1	2	3	4
Old Custodian	New Custodian	Date of Change	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	2	3
Central Registration Depository	Name(s)	Address

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?
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 canceled?

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 following schedule:

1 Line of Business	2 Maximum Interest	3 Discount 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
TOTAL										

NONE Schedule A, B, and BA Verification

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 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	7,051,361	95,667	500,000	(1,088)	7,051,361	6,645,940		5,532,498
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	7,051,361	95,667	500,000	(1,088)	7,051,361	6,645,940		5,532,498
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 & Preferred Stock	7,051,361	95,667	500,000	(1,088)	7,051,361	6,645,940		5,532,498

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
8099999Totals	197,986	X X X	197,986	3,792	

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	1,024,613	602,319		1,616,060
2. Cost of short-term investments acquired	2,134,392	95,667		5,069,584
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	2,556,686	500,000		5,661,031
7. Book/adjusted carrying value, current period	602,319	197,986		1,024,613
8. Total valuation allowance				
9. Subtotal (Lines 7 plus 8)	602,319	197,986		1,024,613
10. Total nonadmitted amounts				
11. Statement value (Lines 9 minus 10)	602,319	197,986		1,024,613
12. Income collected during period	6,732	3,792		45,142
13. Income earned during period	5,164	2,091		39,740

NONE	Schedule DB Part F Section 1
NONE	Schedule DB Part F Section 2
NONE	Schedule F

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. Dist. 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	YES	(551)	2,541	1,248	585	337
16. Iowa	IA	YES					
17. Kansas	KS	NO					
18. Kentucky	KY	YES	1,319	1,487	691	282	208
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. No. Carolina	NC	NO					
35. N. Dakota	ND	NO					
36. Ohio	OH	YES	28,551,714	21,589,736	12,340,642	8,336,802	13,435,069
37. Oklahoma	OK	NO					
38. Oregon	OR	NO					
39. Pennsylvania	PA	NO					
40. Rhode Island	RI	NO					
41. So. Carolina	SC	NO					
42. So. 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	YES					
50. Wisconsin	WI	YES					
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) 6	28,552,482	21,593,764	12,340,642	8,338,741	13,435,936	7,948,423

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 thru 5703 plus 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

0111	Liberty Mutual Holding Company Inc.				
			MA	04-3583681	LIBERTY MUTUAL HOLDING COMPANY INC.
			MA	04-3583680	LMHC MASSACHUSETTS HOLDINGS INC.
			MA	04-3583679	LIBERTY MUTUAL GROUP INC.
		23043	MA	04-1543470	LIBERTY MUTUAL INSURANCE COMPANY
		41785	CO	84-0856682	COLORADO CASUALTY INSURANCE COMPANY
		10725	NH	04-3390891	LIBERTY SURPLUS INSURANCE CORPORATION
			MA	04-3128156	LIBERTY ENERGY CORPORATION
			DE	52-2282916	LIBERTY ENERGY HOLDINGS LLC.
		33600	IA	04-3058504	LM INSURANCE CORPORATION
		10337	IL	36-4027414	LIBERTY INSURANCE COMPANY OF AMERICA
		33588	IA	04-3058503	THE FIRST LIBERTY INSURANCE CORPORATION
		11746	MI	38-1742556	LIBERTY PERSONAL INSURANCE COMPANY
			CA		LIBERTY INSURANCE COMPANY OF CANADA
			MA	04-2791584	HELMSMAN MANAGEMENT SERVICES INC.
			MA	04-2433707	HELMSMAN INSURANCE AGENCY INC.
			IL	36-4090511	HELMSMAN INSURANCE AGENCY OF ILLINOIS IN
			DE	04-3025735	LIBERTY MUTUAL PROPERTY-CASUALTY HOLDING
		41939	OR	93-0824674	LIBERTY NORTHWEST INSURANCE CORPORATION
			OR	93-0962676	LIBERTY MANAGEMENT SERVICES INC.
		42404	VT	03-0316876	LIBERTY INSURANCE CORPORATION
		65315	MA	04-6076039	LIBERTY LIFE ASSURANCE COMPANY OF BOSTON
			FL	04-3435394	SUMMIT HOLDING SOUTHEAST INC.
		10701	FL	59-1835212	BRIDGEFIELD EMPLOYERS INSURANCE COMPANY
		10335	FL	59-3269531	BRIDGEFIELD CASUALTY INSURANCE COMPANY
			CA		U.S. EMPLOYERS INSURANCE COMPANY INC.
			FL	59-3107347	SUMMIT HOLDING CORPORATION
			FL	59-3369850	SUMMIT HEALTHCARE HOLDINGS INC.
			FL	59-3385208	HERITAGE SUMMIT HEALTHCARE OF FLORIDA IN
			FL	59-1683711	SUMMIT CONSULTING INC.
			FL	59-1979237	SUMMIT LOSS CONTROL SERVICES INC.
			FL	59-2923618	SUMMIT CLAIMS MANAGEMENT INC.
			FL	59-1838330	COMMERCIAL INSURANCE OF CENTRAL FLORIDA
			FL	59-3426970	TURNKEY RESOURCES INC.
			FL	59-3447183	TURNKEY INSURANCE SERVICES INC.
			WI	39-6074346	WAUSAU SERVICE CORPORATION
		26069	WI	36-3522250	WAUSAU BUSINESS INSURANCE COMPANY
		26042	WI	39-1341459	WAUSAU UNDERWRITERS INSURANCE COMPANY
		26425	WI	36-2753986	WAUSAU GENERAL INSURANCE COMPANY

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

17.1

	UK		WAUSAU INSURANCE COMPANY (U.K.) LTD.
	BE	98-0336015	WAUSAU (BERMUDA) LTD. (BERMUDA)
95587	WI	39-1865651	PREVEA HEALTH INSURANCE PLAN INC.
	MA	04-3217691	LIBERTY MUTUAL MANAGED CARE INC.
	DE	04-2926860	LIBERTY MUTUAL CAPITAL CORPORATION (BOST
10836	CA	33-0763205	GOLDEN EAGLE INSURANCE CORPORATION
10837	CA	33-0763208	SAN DIEGO INSURANCE COMPANY
	MA	04-3119508	LIBERTY MUTUAL EQUITY CORPORATION
	DE	04-3116408	ATLANTIC REAL ESTATE LIMITED PARTNERSHIP
	MA	04-3260640	LIBERTY FINANCIAL COMPANIES INC.
	MA	04-2880152	LIBERTY FINANCIAL SERVICES INC.
	MA	04-3300603	LIBERTY MASSACHUSETTS TRUST
	DE	04-3209289	LIBERTY INTERNATIONAL HOLDINGS INC.
	BE		LIBERTY MUTUAL (BERMUDA) LTD.
	BE		LIBERTY MUTUAL MANAGEMENT (BERMUDA) LTD.
	BE		THE STUART INSURANCE GROUP LTD.
	DE	51-0365934	LIBERTY INTERNATIONAL LATIN AMERICA HOLD
	VE		SEGUROS CARACAS DE LIBERTY MUTUAL S.A.
	CO		LIBERTY SEGUROS S.A.
	BE		LI (COLOMBIA) HOLDINGS LTD.
	BE		LILA (COLOMBIA) HOLDINGS LTD.
	BR		LIBERTY INTERNATIONAL BRASIL LTDA
	AR	22-2195982	LIBERTY ART S.A.
	BR		LIBERTY PAULISTA SEGUROS
	BE	98-0158209	LEXCO LIMITED
	EN	98-0132979	LIBERTY EUROPE (HOLDINGS) LTD.
	UK		LIBERTY CORPORATE CAPITAL LTD
	EN		LIBERTY RE LIMITED
	BE	98-0336014	LIBERTY RE (BERMUDA) LTD.
23035	EN		LIBERTY MUTUAL INSURANCE COMPANY (U.K.)
14613	MA	04-1924000	LIBERTY MUTUAL FIRE INSURANCE COMPANY
	MD	52-0424870	MONTGOMERY MUTUAL INSURANCE COMPANY
	MD	52-1312518	HAREWOOD CORPORATION
16900	MD	52-1315488	MONTGOMERY INDEMNITY COMPANY
14486	PA	23-0867770	MERCHANTS AND BUSINESS MEN'S MUTUAL INSU
	WI		EMPLOYERS INSURANCE OF WAUSAU MUTUAL HOL
21458	WI	39-0264050	EMPLOYERS INSURANCE COMPANY OF WAUSAU
	DE	52-2107018	LIBERTY INSURANCE HOLDING INC
	DE	22-2195982	LIBERTY-USA CORPORATION
27944	IN	35-1287317	NATIONAL INSURANCE ASSOCIATION

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

18333	NY	13-2919779	ATLAS ASSURANCE COMPANY OF AMERICA
	DE	22-2424043	LIH-RE OF AMERICA CORPORATION
	DE	35-1283740	THE NATIONAL CORPORATION
11312	OH	31-4386540	GLOBE AMERICAN CASUALTY COMPANY
10073	IL	36-2678778	AMERICAN AMBASSADOR CASUALTY COMPANY
23515	OH	31-0978280	THE MIDWESTERN IDEMNITY COMPANY
23507	OH	31-0978279	MID-AMERICAN FIRE & CASUALTY COMPANY
19917	NY	13-4916020	LIBERTY INSURANCE UNDERWRITERS INC
36919	WI	39-1321384	TOWER INSURANCE COMPANY
	DE	51-0290450	LIH US P&C CORPORATION
24198	NH	02-0177030	PEERLESS INSURANCE COMPANY
24171	NH	02-0342937	THE NETHERLANDS INSURANCE COMPANY
22659	IN	35-0410010	INDIANA INSURANCE COMPANY
22640	IN	35-6018566	CONSOLIDATED INSURANCE COMPANY
11045	NH	15-0302550	EXCELSIOR INSURANCE COMPANY
	IN	35-0246520	COOLING GRUMME MUMFORD COMPANY INC.
	NH	02-0424648	DIVERSIFIED SETTLEMENTS INC.
12696	NH	58-0953149	AMERICA FIRST INSURANCE COMPANY
	DE		LIBERTY INTERNATIONAL ASIA PACIFIC HOLDI
	HO		LIBERTY INTERNATIONAL (H.K.) LTD.
	TH		KRITIYA TUN CO. LTD.
	TH		TUN KAOKLAI CO. LTD.
	TH		NARAI INTERNATIONAL INSURANCE COMPANY LT
	SI		LIBERTY CITYSTATE HOLDINGS PTE LTD.
	SI		LIBERTY CITYSTATE INSURANCE PTE LTD.
	HO		LIBERTY INTERNATIONAL INSURANCE LTD.
	SI		MARINE INSURANCE SERVICES LTD.
	WA	91-1358276	CASCADE DISABILITY MANAGEMENT INC.
	NO		LIBERTY INFORMATION TECHNOLOGY LTD.
	IR		LIBERTY INTERNATIONAL IRELAND HOLDINGS L
	IR		LIBERTY INTERNATIONAL INSURANCE COMPANY
	AR		LIBERTY SEGUROS ARGENTINA S.A.
	BE		LIBERTY INTERNATIONAL MANAGEMENT (BERMUD
	TX	74-2646138	BERKELEY MANAGEMENT CORPORATION
	TX	74-2963323	LIBERTY LLOYDS OF TEXAS INSURANCE COMPAN
	DE	52-2272555	WAUSAU HOLDINGS INC.
	SP		LIBERTY INSURANCE GROUP COMPANIA DE SEGU
	VE		SEGUROS PAN AMERICAN C.A.
	CO		LIBERTY SUEGUROS DE VIDA
	OR	93-1290774	ACCESS INSURANCE SERVICES COMPANY

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	512,418	421,170	82.2	7.7
2. Allied lines	462,813	165,949	35.9	110.6
3. Farmowners multiple peril				
4. Homeowners multiple peril	7,070,375	5,854,785	82.8	81.8
5. Commercial multiple peril	2,982,650	965,765	32.4	38.3
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	209,428	38,258	18.3	9.1
10. Financial guaranty				
11.1 Medical malpractice-occurrence				
11.2 Medical malpractice-claims made				
12. Earthquake	168,770	1,962	1.2	0.1
13. Group accident and health				
14. Credit accident and health				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability-occurrence	687,938	321,980	46.8	27.6
17.2 Other liability-claims made				
18.1 Products liability-occurrence	603	253	42.0	29.2
18.2 Products liability-claims made				
19.1, 19.2 Private passenger auto liability	4,244,719	3,540,152	83.4	72.7
19.3, 19.4 Commercial auto liability	2,898,951	1,526,253	52.6	71.3
21. Auto physical damage	4,842,167	2,950,815	60.9	65.6
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	2,050	24	1.2	0.1
27. Boiler and machinery	595	251	42.2	31.0
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	24,083,477	15,787,617	65.6	65.0

DETAILS OF WRITE-INS				
3301.				
3302.				
3303.				
3398. Sum. of remaining write-ins for Line 33 from overflow page				
3399. Totals (Lines 3301 through 3303 plus 3398) (Line 33)				

PART 2 - DIRECT PREMIUMS WRITTEN

	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire	273,565	569,809	293,501
2. Allied lines	270,685	628,807	314,522
3. Farmowners multiple peril			
4. Homeowners multiple peril	4,620,990	7,724,101	4,431,943
5. Commercial multiple peril	1,593,283	3,375,136	3,602,430
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine	111,259	226,475	211,912
10. Financial guaranty			
11.1 Medical malpractice-occurrence			
11.2 Medical malpractice-claims made			
12. Earthquake	92,635	188,756	105,084
13. Group accident and health			
14. Credit accident and health			
15. Other accident and health			
16. Workers' compensation			
17.1 Other liability-occurrence	370,171	718,666	404,071
17.2 Other liability-claims made			
18.1 Products liability-occurrence	58	556	365
18.2 Products liability-claims made			
19.1, 19.2 Private passenger auto liability	3,959,611	5,921,571	3,971,341
19.3, 19.4 Commercial auto liability	1,455,554	2,924,696	3,564,273
21. Auto physical damage	3,953,850	6,271,153	4,692,999
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft	543	2,324	768
27. Boiler and machinery		432	555
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	16,702,204	28,552,482	21,593,764

DETAILS OF WRITE-INS			
3301.			
3302.			
3303.			
3398. Sum. of remaining write-ins for Line 33 from overflow page			
3399. Totals (Lines 3301 through 3303 plus 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 + 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 (c) (Cols. 11 + 12)
1. 1999 + Prior													
2. 2000													
3. Subtotals 2000 + prior													
4. 2001													
5. Subtotals 2001 + prior													
6. 2002	X X X	X X X	X X X	X X X			XXX				X X X	X X X	X X X
7. Totals													

8. Prior Year-End's Surplus As
Regards Policyholders 6,725

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

(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 A through E only.

1. 2. 3.

Col. 13, Line 7
Line 8

4.

SUPPLEMENTAL EXHIBITS AND SCHEDULES

INTERROGATORIES

RESPONSES

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:

Our company isn't an alien insurer's U.S. branch.

Our company isn't licensed to write Medical Malpractice Insurance.

BAR CODE:



23507200249000002



23507200245000002

OVERFLOW PAGE FOR WRITE-INS

NONE	Schedule A Part 2 and 3
NONE	Schedule B Part 1 and 2
NONE	Schedule BA Part 1 and 2
NONE	Schedule D Part 3
NONE	Schedule D Part 4
NONE	Schedule DB Part A and B Section 1
NONE	Schedule DB Part C and D Section 1

