

**QUARTERLY STATEMENT**

**OF THE**

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**of** \_\_\_\_\_

**in the state of** \_\_\_\_\_

**TO THE**

**Insurance Department**

**OF THE**

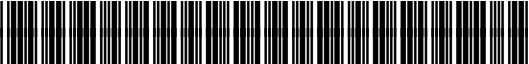
**STATE OF**

**FOR THE QUARTER ENDED  
September 30, 2002**

**PROPERTY AND CASUALTY**

**2002**

QUARTERLY STATEMENT



11312200220100103

AS OF September 30, 2002  
OF THE CONDITION AND AFFAIRS OF THE

Globe American Casualty Company

NAIC Group Code 0111 0111 NAIC Company Code 11312 Employer's ID Number 31-4386540  
(Current Period) (Prior Period)

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

Country of Domicile United States of America

Incorporated: July 5, 1951 Commenced Business: September 1, 1951

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

Main Administrative Office: 350 East 96th Street Indianapolis, IN 46240 317-816-3400

Mail Address: P.O. Box 6070 Indianapolis, IN 46206-6070

Primary Location of Books and Records: 350 East 96th Street Indianapolis, IN 46240 317-816-3400

Internet Website Address: N/A

Statement Contact: Kevin J. Kirschner 317-816-3400 00000  
kevin.kirschner@goamericaautoins.com 317-816-3567  
(E-Mail Address) (Fax Number)

Policyowner Relations Contact: 350 East 96th Street Indianapolis, IN 46240 317-816-3400 00000

OFFICERS

President John C. Robinson  
Secretary Mike DiRusso  
Treasurer Stephen D. Powell  
Actuary Thomas G. Moylan

Vice-Presidents

David B. Andrzejewski	Mike DiRusso	Mark E. Fiebrink	A. Alex Fontanes
Philip J. Guymont	Forrest H. Johnson	Kevin J. Kirschner	Amy J. Leddy
William G. Mersch	Thomas G. Moylan	Gary J. Ostrow	Charles B. Ruzicka

DIRECTORS OR TRUSTEES

Honore J. Fallon	Mark E. Fiebrink	Roger L. Jean	Forrest H. Johnson
Dennis J. Langwell	Amy J. Leddy	William G. Mersch	John C. Robinson
Charles B. Ruzicka			

State of Indiana  
County of Hamilton 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)
John C. Robinson	Mike DiRusso	Stephen D. Powell
(Printed Name)	(Printed Name)	(Printed Name)
President	Secretary	Treasurer

Subscribed and sworn to before me this  
day of , 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	14,230,892		14,230,892	8,899,699
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 ( \$ (1,558,928) ) and short-term investments ( \$ 89,536 )	(1,469,392)		(1,469,392)	2,017,960
6. Other invested assets				
7. Receivable for securities	22,543		22,543	
8. Aggregate write-ins for invested assets				
9. Subtotals, cash and invested assets (Lines 1 to 8)	12,784,043		12,784,043	10,917,659
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				
15. Federal and foreign income tax recoverable and interest thereon (including \$ 0 net deferred tax asset)				
16. Guaranty funds receivable or on deposit				
17. Electronic data processing equipment and software				
18. Interest, dividends and real estate income due and accrued	112,236		112,236	97,535
19. Net adjustments in assets and liabilities due in foreign exchange rates				
20. Receivable from parent, subsidiaries and affiliates	2,666,955		2,666,955	6,855,433
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				
26. Total assets excluding protected cell assets (Lines 9 through 25)	15,563,234		15,563,234	17,870,627
27. Protected cell assets				
28. TOTALS (Lines 26 and 27)	15,563,234		15,563,234	17,870,627

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.				
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)				

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)	43,303	15,253
8. Borrowed money \$ 0 and interest thereon \$ 0	435,755	3,157,424
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 8,486,141 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)		
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others	47,935	2,079
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		3,552
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		
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	526,993	3,178,308
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)	526,993	3,178,308
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	2,000,000	2,000,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus	10,857,109	10,857,109
33. Unassigned funds (surplus)	2,179,132	1,835,210
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)	15,036,241	14,692,319
36. TOTALS	15,563,234	17,870,627

DETAILS OF WRITE-INS		
2301.		
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)		
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 \$ 23,111,408 )	26,141,893	36,013,588	46,284,073
1.2 Assumed (written \$ 0 )			
1.3 Ceded (written \$ 23,111,408 )	26,141,893	36,013,588	46,284,073
1.4 Net (written \$ 0 )			
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 0 ):			
2.1 Direct	15,894,579	25,274,486	35,449,361
2.2 Assumed			
2.3 Ceded	15,894,579	25,274,486	35,449,361
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	478,921	536,333	681,609
10. Net realized capital gains (losses)	11,485	157,485	162,346
11. Net investment gain (loss) (Lines 9 + 10)	490,406	693,818	843,955
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)	490,406	693,818	843,955
17. Dividends to policyholders			
18. Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17)	490,406	693,818	843,955
19. Federal and foreign income taxes incurred	146,484	242,836	296,535
20. Net income (Line 18 minus Line 19) (to Line 22)	343,922	450,982	547,420
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	14,692,319	14,144,899	14,144,899
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20)	343,922	450,982	547,420
23. Net unrealized capital gains or losses			
24. Change in net unrealized foreign exchange capital gain (loss)			
25. Change in net deferred income tax			30,100
26. Change in nonadmitted assets			
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		(30,100)	(30,100)
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			
37. Change in surplus as regards policyholders (Lines 22 through 36)	343,922	420,882	547,420
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37)	15,036,241	14,565,781	14,692,319
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.			
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)			

CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance		
2. Loss and loss adjustment expenses paid (net of salvage and subrogation)		
3. Underwriting expenses paid		
4. Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)		
6. Net investment income	477,823	847,597
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	45,856	378
7.4 Aggregate write-ins for miscellaneous items		
7.5 Total other income (Lines 7.1 to 7.4)	45,856	378
8. Dividends to policyholders on direct business, less \$                      0 dividends on reinsurance assumed or ceded (net)		
9. Federal and foreign income taxes (paid) recovered	(118,434)	(326,377)
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9)	405,245	521,598
<b>Cash from Investments</b>		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds	3,589,450	8,441,407
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		
11.8 Total investment proceeds (Lines 11.1 to 11.7)	3,589,450	8,441,407
12. Cost of investments acquired (long-term only):		
12.1 Bonds	8,922,761	5,551,972
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)	8,922,761	5,551,972
13. Net cash from investments (Line 11.8 minus Line 12.7)	(5,333,311)	2,889,435
<b>Cash from Financing and Miscellaneous Sources</b>		
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	4,188,478	3,157,424
14.4 Borrowed funds received		3,552
14.5 Other cash provided		
14.6 Total (Lines 14.1 to 14.5)	4,188,478	3,160,976
15. Cash applied:		
15.1 Dividends to stockholders paid		
15.2 Net transfers to affiliates		5,759,707
15.3 Borrowed funds repaid	2,721,669	
15.4 Other applications	26,095	
15.5 Total (Lines 15.1 to 15.4)	2,747,764	5,759,707
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5)	1,440,714	(2,598,731)
<b>RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS</b>		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16)	(3,487,352)	812,302
18. Cash and short-term investments:		
18.1 Beginning of year	2,017,960	1,205,658
18.2 End of period (Line 17 plus Line 18.1)	(1,469,392)	2,017,960

<b>DETAILS OF WRITE-INS</b>		
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**

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### **Note 10 – Information concerning Parent, Subsidiaries and Affiliates**

In March 2002, the final step of the Liberty Mutual Group's overall conversion to a mutual holding company structure was completed. The final step in the „Global Transaction“ included (a) Employers Insurance Company of Wausau Mutual Holding Company merging with Liberty Mutual Holding Company (LMHC) as the surviving entity and Employers Insurance Company of Wausau becoming an indirect wholly-owned subsidiary of LMHC and (b) Liberty Mutual Fire Insurance Company reorganizing from a Massachusetts mutual insurance company to a Massachusetts stock insurance company and Liberty Mutual Fire Insurance Company becoming a wholly-owned stock subsidiary of LMHC.

### **Note 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 [ 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 [ X ]
- 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 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 [ 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.

12/31/1999
- 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 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 (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 [ ] No [X]
- 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 [X]
- 14.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [X]
- 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	2
Name of Custodian(s)	Custodian Address
JP Morgan Chase	3 Chase MetroTech 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 [X]
- 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 [X]   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 [X]
- 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  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			.....	.....	.....	.....	.....	.....	.....	.....

SCHEDULE A - VERIFICATION

	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	NONE			
2. Increase (decrease) by adjustment				
3. Cost of acquired				
4. Cost of additions to and permanent improvements				
5. Total profit (loss) on sales				
6. Increase (decrease) by foreign exchange adjustment:				
7. Amount received on sales				
8. Book/adjusted carrying value at end of current period				
9. Total valuation allowance				
10. Subtotal (Lines 8 plus 9)				
11. Total nonadmitted amounts				
12. Statement value, current period (Page 2, real estate lines, current period)				

SCHEDULE B - VERIFICATION

	1	2	3	4
	First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	Prior Year Ended December 31
1. Book/recorded investment excluding accrued interest on mortgages owned, beginning of period	NONE			
2. Amount loaned during period:				
2.1 Actual cost at time of acquisitions				
2.2 Additional investment made after acquisitions				
3. Accrual of discount and mortgage interest points and commitment fees				
4. Increase (decrease) by adjustment				
5. Total profit (loss) on sale				
6. Amounts paid on account or in full during the period				
7. Amortization of premium				
8. Increase (decrease) by foreign exchange adjustment				
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period				
10. Total valuation allowance				
11. Subtotal (Lines 9 plus 10)				
12. Total nonadmitted amounts				
13. Statement value of mortgages owned at end of current period				

SCHEDULE BA - VERIFICATION  
Other Invested Assets Included in Schedule BA

Description	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 of long-term invested assets owned, beginning of period	NONE			
2. Cost of acquisitions during period:				
2.1 Actual cost at time of acquisitions				
2.2 Additional investment made after acquisitions				
3. Accrual of discount				
4. Increase (decrease) by adjustment				
5. Total profit (loss) on sale				
6. Amounts paid on account or in full during the period				
7. Amortization of premium				
8. Increase (decrease) by foreign exchange adjustment				
9. Book/adjusted carrying value of long-term invested assets at end of current period				
10. Total valuation allowance				
11. Subtotal (Lines 9 plus 10)				
12. Total nonadmitted amounts				
13. Statement value of long term invested assets at end of current period				

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
<b>BONDS</b>								
1. Class 1	15,022,256	3,460,856	4,115,382	(47,302)	14,556,678	15,022,256	14,320,428	12,853,466
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	15,022,256	3,460,856	4,115,382	(47,302)	14,556,678	15,022,256	14,320,428	12,853,466
<b>PREFERRED STOCK</b>								
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	15,022,256	3,460,856	4,115,382	(47,302)	14,556,678	15,022,256	14,320,428	12,853,466

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	89,536	X X X	89,536	1,587	

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 .....	3,953,766	74,645	911,287	3,350,900
2. Cost of short-term investments acquired .....	24,555,756	4,030,035	2,935,074	13,335,824
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 .....	28,434,877	3,193,393	3,756,825	12,732,958
7. Book/adjusted carrying value, current period .....	74,645	911,287	89,536	3,953,766
8. Total valuation allowance .....				
9. Subtotal (Lines 7 plus 8) .....	74,645	911,287	89,536	3,953,766
10. Total nonadmitted amounts .....				
11. Statement value (Lines 9 minus 10) .....	74,645	911,287	89,536	3,953,766
12. Income collected during period .....	4,531	2,616	1,587	74,259
13. Income earned during period .....	5,557	750	1,341	59,800

**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	YES						
4. Arkansas	AR	NO						
5. California	CA	NO						
6. Colorado	CO	YES						
7. Connecticut	CT	YES						
8. Delaware	DE	NO						
9. Dist. Columbia	DC	NO						
10. Florida	FL	YES						
11. Georgia	GA	YES						
12. Hawaii	HI	NO						
13. Idaho	ID	YES						
14. Illinois	IL	YES	876,110	490,850	350,744	343,930	345,417	231,652
15. Indiana	IN	YES	8,072,591	6,382,539	3,995,431	3,796,777	4,214,575	2,886,513
16. Iowa	IA	YES	2,394,724	2,672,704	1,642,237	1,616,886	976,517	1,047,861
17. Kansas	KS	NO						
18. Kentucky	KY	YES	191,672	1,587,388	1,104,095	1,922,366	1,705,577	2,714,554
19. Louisiana	LA	NO						
20. Maine	ME	NO						
21. Maryland	MD	YES						
22. Massachusetts	MA	NO						
23. Michigan	MI	NO						
24. Minnesota	MN	YES						
25. Mississippi	MS	NO						
26. Missouri	MO	YES						
27. Montana	MT	NO						
28. Nebraska	NE	YES						
29. Nevada	NV	YES						
30. New Hampshire	NH	YES						
31. New Jersey	NJ	NO						
32. New Mexico	NM	YES						
33. New York	NY	YES						
34. No. Carolina	NC	NO						
35. N. Dakota	ND	NO						
36. Ohio	OH	YES	6,003,481	11,674,635	6,146,582	9,784,105	6,660,165	7,728,362
37. Oklahoma	OK	NO						
38. Oregon	OR	YES						
39. Pennsylvania	PA	NO						
40. Rhode Island	RI	NO						
41. So. Carolina	SC	NO						
42. So. Dakota	SD	NO						
43. Tennessee	TN	YES	1,019,895	764,687	373,708	1,389,661	735,280	796,798
44. Texas	TX	NO						
45. Utah	UT	NO						
46. Vermont	VT	YES						
47. Virginia	VA	YES	246,946	2,001,656	1,049,528	1,749,661	997,375	1,626,689
48. Washington	WA	YES						
49. West Virginia	WV	NO						
50. Wisconsin	WI	YES	4,305,989	7,742,858	4,291,441	6,232,324	5,244,009	5,032,735
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)	25	23,111,408	33,317,317	18,953,766	26,835,710	20,878,915	22,065,164

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**



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

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**PART 1 - ORGANIZATIONAL CHART**

**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				
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				
18.2 Products liability-claims made				
19.1, 19.2 Private passenger auto liability	16,680,872	10,676,118	64.0	67.5
19.3, 19.4 Commercial auto liability				
21. Auto physical damage	8,388,113	4,512,731	53.8	74.0
22. Aircraft (all perils)				
23. Fidelity				
24. Surety	1,072,907	705,730	65.8	78.0
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	26,141,892	15,894,579	60.8	70.2

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			
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			
18.2 Products liability-claims made			
19.1, 19.2 Private passenger auto liability	4,733,370	15,119,541	21,127,698
19.3, 19.4 Commercial auto liability			
21. Auto physical damage	2,215,299	7,505,255	10,555,766
22. Aircraft (all perils)			
23. Fidelity			
24. Surety	42,609	486,612	1,633,853
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	6,991,278	23,111,408	33,317,317

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 14,692

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:

Globe American Casualty Company is not a U.S. Branch of an alien insurer.

Globe American Casualty Company does not write malpractice insurance.

BAR CODE:



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**



## SCHEDULE D - PART 3

Showing all Long-term Bonds and Stock Acquired by the Company During the Current Quarter

[illegible]

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

**E04**

## SCHEDULE D - PART 4

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

[illegible]

(a)	For all common stock bearing the NAIC designation "U" provide: the number of such issues	0
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**E05**

**NONE                    Schedule DB Part A and B Section 1**

**NONE                    Schedule DB Part C and D Section 1**

