



QUARTERLY STATEMENT

As of September 30, 2002
of the Condition and Affairs of the

Cincinnati Equitable Insurance Company

NAIC Group Code..... 838, (Current Period) (Prior Period)	NAIC Company Code..... 16721	Employer's ID Number..... 31-0239840
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	
Country of Domicile US		
Incorporated..... January 24, 1827	Commenced Business..... April 17, 1826	
Statutory Home Office	525 Vine Street Cincinnati OH 45202 (Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office	525 Vine Street Cincinnati OH 45202 (Street and Number) (City or Town, State and Zip Code)	513-621-1826 (Area Code) (Telephone Number)
Mail Address	P.O. Box 3428 Cincinnati OH 45201-3428 (Street and Number or P. O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records	525 Vine Street Cincinnati OH 45202 (Street and Number) (City or Town, State and Zip Code)	513-621-1826 (Area Code) (Telephone Number)
Internet Website Address		
Statement Contact	Gregory Allen Baker (Name)	513-621-1826 (Area Code) (Telephone Number) (Extension)
Policyowner Relations Contact	(E-Mail Address) (Street and Number) (City or Town, State and Zip Code)	(Fax Number) (Area Code) (Telephone Number) (Extension)

OFFICERS

President James Wesley Ketrin	Treasurer Gregory Allen Baker	Secretary Peter Allen Alpaugh
Janet Strausbaugh Brown	Bryan David Williams	William McAfee Sharp
		Teresa Grace Brown

DIRECTORS OR TRUSTEES

Walter George Alpaugh	Peter Allen Alpaugh	Gregory Allen Baker	James Wesley Ketrin
Robert Michael Hutzelman			

State of.....Ohio . Ohio
County of.....Hamilton Hamilton

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)

James Wesley Ketrin

(Printed Name)

President

(Signature)

Peter Allen Alpaugh

(Printed Name)

Secretary

(Signature)

Gregory Allen Baker

(Printed Name)

Treasurer

Subscribed and sworn to before me this

.....day of , 2002

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SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Rate of Interest	3 Amount of Interest Received During Current Quarter	4 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			8 *
				5 First Month	6 Second Month	7 Third Month	
Open Depositories							
Fifth Third Bank.....	Cincinnati, OH.....	.....	.....	.....563,183	.....498,110	.....250,207	.....
U.S. Bank.....	Cincinnati, OH.....	.....	.....	.....6,459	.....3,208	.....5,956	.....
0199999. Total Open Depositories.....	....XXX.....	.....0	.....0	.....569,643	.....501,318	.....256,164	XXX
0399999. Total Cash on Deposit.....	....XXX.....	.....0	.....0	.....569,643	.....501,318	.....256,164	XXX
0499999. Cash in Company's Office.....	....XXX.....	....XXX.....	....XXX.....	.....	.....200	.....200	XXX
0599999. Total Cash.....	....XXX.....	.....0	.....0	.....569,643	.....501,518	.....256,364	XXX