



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2002
OF THE CONDITION AND AFFAIRS OF THE

American Standard Insurance Company of Ohio

NAIC Group Code 0473 0473 NAIC Company Code 10387 Employer's ID Number 39-1835305
(Current Period) (Prior Period)

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

Country of Domicile US

Incorporated November 21, 1995 Commenced Business January 1, 1996

Statutory Home Office 8415 Pulsar Place, Suite 400, Columbus, Ohio 43240
(Street and Number, City or Town, State and Zip Code)

Main Administrative Office 6000 American Parkway, Madison, Wisconsin 53783-0001 608-249-2111
(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 6000 American Parkway, Madison, Wisconsin 53783-0001
(Street and Number, City or Town, State and Zip Code)

Primary Location of Books and Records 6000 American Parkway, Madison, Wisconsin 53783-0001
(Street and Number, City or Town, State and Zip Code)
608-249-2111
(Area Code) (Telephone Number)

Internet Website Address www.amfam.com

Statement Contact Ann M. Demerath 608-249-2111 -30665
(Name) (Area Code) (Telephone Number) (Extension)
ademerat@amfam.com 608-243-4920
(E-Mail Address) (Fax Number)

Policyowner Relations Contact 6000 American Parkway, Madison, Wisconsin 53783-0001 608-249-2111 -30281
(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number) (Extension)

OFFICERS

Chairman and C.E.O. Harvey Randall Pierce
President and C.O.O. David Ralph Anderson
Exec. V.P., Legal; Sec. James Francis Eldridge
Exec. V.P., Fin; Treas. John Brent Johnson
Assistant Secretary James Walter Behrens
Assistant Treasurer William Joseph Smith

VICE PRESIDENTS

Michael Jeffrey Bosco
Thomas Syme King
Daniel Robert Schultz

DIRECTORS OR TRUSTEES

David Ralph Anderson
Michael Jeffrey Bosco
James Francis Eldridge
John Brent Johnson
Harvey Randall Pierce

State of Wisconsin }
County of Dane } 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.

David R. Anderson
President and C.O.O.

James F. Eldridge
Executive Vice President, Legal; Secretary

J. Brent Johnson
Executive Vice President, Finance; Treasurer

Subscribed and sworn to before me this _____ day of _____ 2003

a. Is this an original filing? Yes (X) No ()

b. If no: 1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)
BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2002

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical malpractice												
12. Earthquake												
13. Group accident and health												
14. Credit A and H (group and individual)												
15.1 Collectively renewable A and H												
15.2 Non-cancelable A and H												
15.3 Guaranteed renewable A and H												
15.4 Non-renewable for stated reasons only												
15.5 Other accident only												
15.6 All other A and H												
15.7 Federal employees health benefits program premium												
16. Workers' compensation												
17. Other liability												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability	35,574,583	33,198,891		10,467,640	19,295,493	24,990,345	21,658,321	302,295	1,411,880	3,669,078	2,862,077	384,718
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability					11,500	3,500		1,024	(464)			
21.1 Private passenger auto physical damage	22,688,290	21,379,366		6,596,491	16,671,423	15,956,987	1,247,047	14,649	35,075	73,420	1,910,363	245,447
21.2 Commercial auto physical damage	8,403	7,110		3,967	7,796	7,796					940	122
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
33. Aggregate write-ins for other lines of business												
34. TOTALS (a)	58,271,276	54,585,367		17,068,098	35,986,212	40,958,628	22,905,368	317,968	1,446,491	3,742,498	4,773,380	630,287
DETAILS OF WRITE-INS												
3301.												
3302.												
3303.												
3398. Summary of remaining write-ins for Line 33 from overflow page												
3399. Totals (Line 3301 through Line 3303 plus Line 3398) (Line 33 above)												

(a) Finance and service charges not included in Line 1 to Line 34 \$

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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)
BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2002

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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2.3 Federal flood												
3. Farmowners multiple peril												
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5.1 Commercial multiple peril (non-liability portion)												
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6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
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11. Medical malpractice												
12. Earthquake												
13. Group accident and health												
14. Credit A and H (group and individual)												
15.1 Collectively renewable A and H												
15.2 Non-cancelable A and H												
15.3 Guaranteed renewable A and H												
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15.6 All other A and H												
15.7 Federal employees health benefits program premium												
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17. Other liability												
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19.2 Other private passenger auto liability	35,574,583	33,198,891		10,467,640	19,295,493	24,990,345	21,658,321	302,295	1,411,880	3,669,078	2,862,077	384,718
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability					11,500	3,500		1,024	(464)			
21.1 Private passenger auto physical damage	22,688,290	21,379,366		6,596,491	16,671,423	15,956,987	1,247,047	14,649	35,075	73,420	1,910,363	245,447
21.2 Commercial auto physical damage	8,403	7,110		3,967	7,796	7,796					940	122
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
33. Aggregate write-ins for other lines of business												
34. TOTALS (a)	58,271,276	54,585,367		17,068,098	35,986,212	40,958,628	22,905,368	317,968	1,446,491	3,742,498	4,773,380	630,287
DETAILS OF WRITE-INS												
3301.												
3302.												
3303.												
3398. Summary of remaining write-ins for Line 33 from overflow page												
3399. Totals (Line 3301 through Line 3303 plus Line 3398) (Line 33 above)												

(a) Finance and service charges not included in Line 1 to Line 34 \$

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SCHEDULE A - VERIFICATION BETWEEN YEARS

1. Book/adjusted carrying value, December 31, prior year (prior year statement)	_____
2. Increase (decrease) by adjustment:	
2.1 Totals, Part 1, Column 10	_____
2.2 Totals, Part 3, Column 7	_____
3. Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9)	_____
4. Cost of additions and permanent improvements:	
4.1 Totals, Part 1, Column 13	_____
4.2 Totals, Part 3, Column 9	_____
5. Total profit (loss) on sales, Part 3, Column 14	_____
6. Increase (decrease) by foreign exchange adjustm	_____
6.1 Totals, Part 1, Column 11	_____
6.2 Totals, Part 3, Column 8	_____
7. Amounts received on sales, Part 3, Column 11 and Part 1, Column 12	_____
8. Book/adjusted carrying value at end of current period	_____
9. Total valuation allowance	_____
10. Subtotal (Line 8 plus Line 9)	_____
11. Total nonadmitted amounts	_____
12. Statement value, current period (Page 2, real estate lines, current period)	_____

NONE

SCHEDULE B - VERIFICATION BETWEEN YEARS

1. Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year	_____
2. Amount loaned during year:	
2.1 Actual cost at time of acquisitions	_____
2.2 Additional investment made after acquisitions	_____
3. Accrual of discount and mortgage interest points a	_____
4. Increase (decrease) by adjustment	_____
5. Total profit (loss) on sale	_____
6. Amounts paid on account or in full during the year	_____
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 (Line 9 plus Line 10)	_____
12. Total nonadmitted amounts	_____
13. Statement value of mortgages owned at end of current period	_____

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	_____
2. Cost of acquisitions during year:	
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 year	_____
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 (Line 9 plus Line 10)	_____
12. Total nonadmitted amounts	_____
13. Statement value of long-term invested assets at end of current period	_____

NONE

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D and DA (Group 1)											
1.1 Class 1											
1.2 Class 2											
1.3 Class 3											
1.4 Class 4											
1.5 Class 5											
1.6 Class 6											
1.7 Totals											
2. All Other Governments, Schedules D and DA (Group 2)											
2.1 Class 1											
2.2 Class 2											
2.3 Class 3											
2.4 Class 4											
2.5 Class 5											
2.6 Class 6											
2.7 Totals											
3. States, Territories and Possessions etc., Guaranteed, Schedules D and DA (Group 3)											
3.1 Class 1											
3.2 Class 2											
3.3 Class 3											
3.4 Class 4											
3.5 Class 5											
3.6 Class 6											
3.7 Totals											
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 4)											
4.1 Class 1				4,994,806		4,994,806	55.7	4,994,475	56.2	4,994,806	
4.2 Class 2											
4.3 Class 3											
4.4 Class 4											
4.5 Class 5											
4.6 Class 6											
4.7 Totals				4,994,806		4,994,806	55.7	4,994,475	56.2	4,994,806	
5. Special Revenue and Special Assessment Obligations etc., Non-Guaranteed, Schedules D and DA (Group 5)											
5.1 Class 1											
5.2 Class 2											
5.3 Class 3											
5.4 Class 4											
5.5 Class 5											
5.6 Class 6											
5.7 Totals											

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D and DA (Group 6)											
6.1 Class 1											
6.2 Class 2											
6.3 Class 3											
6.4 Class 4											
6.5 Class 5											
6.6 Class 6											
6.7 Totals											
7. Industrial and Miscellaneous (Unaffiliated), Schedules D and DA (Group 7)											
7.1 Class 1	3,965,000					3,965,000	44.3	3,900,000	43.8	3,965,000	
7.2 Class 2											
7.3 Class 3											
7.4 Class 4											
7.5 Class 5											
7.6 Class 6											
7.7 Totals	3,965,000					3,965,000	44.3	3,900,000	43.8	3,965,000	
8. Credit Tenant Loans, Schedules D and DA (Group 8)											
8.1 Class 1											
8.2 Class 2											
8.3 Class 3											
8.4 Class 4											
8.5 Class 5											
8.6 Class 6											
8.7 Totals											
9. Parent, Subsidiaries and Affiliates, Schedules D and DA (Group 9)											
9.1 Class 1											
9.2 Class 2											
9.3 Class 3											
9.4 Class 4											
9.5 Class 5											
9.6 Class 6											
9.7 Totals											

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	3,965,000			4,994,806		8,959,806	100.0	XXX	XXX	8,959,806	
10.2 Class 2								XXX	XXX		
10.3 Class 3								XXX	XXX		
10.4 Class 4								XXX	XXX		
10.5 Class 5						(c)		XXX	XXX		
10.6 Class 6						(c)		XXX	XXX		
10.7 Totals	3,965,000			4,994,806		(b) 8,959,806	100.0	XXX	XXX	8,959,806	
10.8 Line 10.7 as a % of Column 6	44.3			55.7		100.0	XXX	XXX	XXX	100.0	
11. Total Bonds Prior Year											
11.1 Class 1	3,900,000			4,994,475		XXX	XXX	8,894,475	100.0	8,894,475	
11.2 Class 2						XXX	XXX				
11.3 Class 3						XXX	XXX				
11.4 Class 4						XXX	XXX				
11.5 Class 5						XXX	XXX	(c)			
11.6 Class 6						XXX	XXX	(c)			
11.7 Totals	3,900,000			4,994,475		XXX	XXX	(b) 8,894,475	100.0	8,894,475	
11.8 Line 11.7 as a % of Column 8	43.8			56.2		XXX	XXX	100.0	XXX	100.0	
12. Total Publicly Traded Bonds											
12.1 Class 1	3,965,000			4,994,806		8,959,806	100.0	8,894,475	100.0	8,959,806	XXX
12.2 Class 2											XXX
12.3 Class 3											XXX
12.4 Class 4											XXX
12.5 Class 5											XXX
12.6 Class 6											XXX
12.7 Totals	3,965,000			4,994,806		8,959,806	100.0	8,894,475	100.0	8,959,806	XXX
12.8 Line 12.7 as a % of Column 6	44.3			55.7		100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10	44.3			55.7		100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1										XXX	
13.2 Class 2										XXX	
13.3 Class 3										XXX	
13.4 Class 4										XXX	
13.5 Class 5										XXX	
13.6 Class 6										XXX	
13.7 Totals										XXX	
13.8 Line 13.7 as a % of Column 6							XXX	XXX	XXX	XXX	
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10							XXX	XXX	XXX	XXX	

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ current year, \$ prior year of bonds with Z designations and \$ current year, \$ prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.

(c) Includes \$ current year, \$ prior year of bonds with 5* designations and \$ current year, \$ prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31 , At Statement Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments, Schedules D and DA (Group 1)											
1.1 Issuer Obligations											
1.2 Single Class Mortgage-Backed/Asset-Backed Securities											
1.7 Totals											
2. All Other Governments, Schedules D and DA (Group 2)											
2.1 Issuer Obligations											
2.2 Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3 Defined											
2.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
2.5 Defined											
2.6 Other											
2.7 Totals											
3. States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 3)											
3.1 Issuer Obligations											
3.2 Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3 Defined											
3.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
3.5 Defined											
3.6 Other											
3.7 Totals											
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D and DA (Group 4)											
4.1 Issuer Obligations				4,994,806		4,994,806	55.7	4,994,475	56.2	4,994,806	
4.2 Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3 Defined											
4.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
4.5 Defined											
4.6 Other											
4.7 Totals				4,994,806		4,994,806	55.7	4,994,475	56.2	4,994,806	
5. Special Revenue and Special Assessment Obligations etc. , Non-Guaranteed, Schedules D and DA (Group 5)											
5.1 Issuer Obligations											
5.2 Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3 Defined											
5.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
5.5 Defined											
5.6 Other											
5.7 Totals											

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31 , At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated) , Schedules D and DA (Group 6)											
6.1 Issuer Obligations											
6.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined											
6.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
6.5 Defined											
6.6 Other											
6.7 Totals											
7. Industrial and Miscellaneous (Unaffiliated) , Schedules D and DA (Group 7)											
7.1 Issuer Obligations	3,965,000					3,965,000	44.3	3,900,000	43.8	3,965,000	
7.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3 Defined											
7.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
7.5 Defined											
7.6 Other											
7.7 Totals	3,965,000					3,965,000	44.3	3,900,000	43.8	3,965,000	
8. Credit Tenant Loans, Schedules D and DA (Group 8)											
8.1 Issuer Obligations											
8.7 Totals											
9. Parent, Subsidiaries and Affiliates, Schedules D and DA (Group 9)											
9.1 Issuer Obligations											
9.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3 Defined											
9.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
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ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

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10. Total Bonds Current Year											
10.1 Issuer Obligations	3,965,000			4,994,806		8,959,806	100.0	XXX	XXX	8,959,806	
10.2 Single Class Mortgage-Backed/Asset-Backed Bonds								XXX	XXX		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined								XXX	XXX		
10.4 Other								XXX	XXX		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
10.5 Defined								XXX	XXX		
10.6 Other								XXX	XXX		
10.7 Totals	3,965,000			4,994,806		8,959,806	100.0	XXX	XXX	8,959,806	
10.8 Line 10.7 as a % of Column 6	44.3			55.7		100.0	XXX	XXX	XXX	100.0	
11. Total Bonds Prior Year											
11.1 Issuer Obligations	3,900,000			4,994,475		XXX	XXX	8,894,475	100.0	8,894,475	
11.2 Single Class Mortgage-Backed/Asset-Backed Bonds						XXX	XXX				
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined						XXX	XXX				
11.4 Other						XXX	XXX				
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
11.5 Defined						XXX	XXX				
11.6 Other						XXX	XXX				
11.7 Totals	3,900,000			4,994,475		XXX	XXX	8,894,475	100.0	8,894,475	
11.8 Line 11.7 as a % of Column 8	43.8			56.2		XXX	XXX	100.0	XXX	100.0	
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	3,965,000			4,994,806		8,959,806	100.0	8,894,475	100.0	8,959,806	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Bonds											XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined											XXX
12.4 Other											XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
12.5 Defined											XXX
12.6 Other											XXX
12.7 Totals	3,965,000			4,994,806		8,959,806	100.0	8,894,475	100.0	8,959,806	XXX
12.8 Line 12.7 as a % of Column 6	44.3			55.7		100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10	44.3			55.7		100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations										XXX	
13.2 Single Class Mortgage-Backed/Asset-Backed Bonds										XXX	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined										XXX	
13.4 Other										XXX	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
13.5 Defined										XXX	
13.6 Other										XXX	
13.7 Totals										XXX	
13.8 Line 13.7 as a % of Column 6							XXX	XXX	XXX	XXX	
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10							XXX	XXX	XXX	XXX	

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Asset (a)	Investments in Parent Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year	3,900,000	3,900,000			
2. Cost of short-term investments acquired	21,825,000	21,825,000			
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	21,760,000	21,760,000			
7. Book/adjusted carrying value, current year	3,965,000	3,965,000			
8. Total valuation allowance					
9. Subtotal (Line 7 plus Line 8)	3,965,000	3,965,000			
10. Total nonadmitted amounts					
11. Statement value (Line 9 minus Line 10)	3,965,000	3,965,000			
12. Income collected during year	77,090	77,090			
13. Income earned during year	70,295	70,295			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

SCHEDULE DB - PART A - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Owned

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year)	_____
2. Cost/Option Premium (Section 2, Column 7)	_____
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) plus (Section 3, Column 13)	_____
4. Gain/(Loss) on Termination:	
4.1 Recognized (Section 3, Column 14)	_____
4.2 Used to Adjust Basis of Hedged Item (Section 3, Column 15)	_____
5. Consideration received on terminations (Section 3, Column 16)	_____
6. Used to Adjust Basis on Open Contracts (Section 3, Column 17)	_____
7. Disposition of deferred amount on contracts terminated in prior year:	
7.1 Recognized	_____
7.2 Used to Adjust Basis of Hedged Item	_____
8. Aggregate write-in book value, December 31, Current Year (Line 1 plus Line 2 plus Line 3 plus Line 4 minus Line 5 minus Line 6 minus Line 7)	=====

NONE

SCHEDULE DB - PART B - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Written

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year)	_____
2. Consideration received (Section 2, Column 7)	_____
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) plus (Section 3, Column 13)	_____
4. Gain/(Loss) on Termination:	
4.1 Recognized (Section 3, Column 14)	_____
4.2 Used to Adjust Basis (Section 3, Column 15)	_____
5. Consideration paid on terminations (Section 3, Column 16)	_____
6. Used to Adjust Basis on Open Contracts (Section 3, Column 17)	_____
7. Disposition of deferred amount on contracts terminated in prior year:	
7.1 Recognized	_____
7.2 Used to Adjust Basis	_____
8. Aggregate write-in book value, December 31, Current Year (Line 1 plus Line 2 plus Line 3 minus Line 4 minus Line 5 minus Line 6 minus Line 7)	=====

NONE

SCHEDULE DB - PART C - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Swaps and Forwards

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year)		
2. Cost or (Consideration Received) (Section 2, Column 7)		
3. Increase/ (Decrease) by Adjustment (Section 1,		
4. Gain/ (Loss) on Termination:	NONE	
4.1 Recognized (Section 3, Column 14)		
4.2 Used to Adjust Basis of Hedged Item (Se		
5. Consideration received (or paid) on terminations		
6. Used to Adjust Basis on Hedged Item on Open Contracts (Section 1, Column 13)		
7. Disposition of deferred amount on contracts terminated in prior year:		
7.1 Recognized		
7.2 Used to Adjust Basis of Hedged Item		
8. Aggregate write-in book value, December 31, Current Year (Line 1 plus Line 2 plus Line 3 plus Line 4 minus Line 5 minus Line 6 minus Line 7)		

SCHEDULE DB - PART D - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Futures Contracts and Insurance Futures Contracts

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year)		
2. Change in total Variation Margin on Open Contracts (Difference between years-Section 1, Column 6)		
3.1 Change in Variation Margin on Open Contracts Used to Adjust Basis of hedged Item (Section 1, Column 11)		
3.2 Change in Variation Margin on Open Contracts recognized (Difference between years-Section 1, Column 10)		
4.1 Variation Margin on Contracts Terminated During	NONE	
4.2 Less:		
4.21 Gain/ (Loss) Recognized in Current Year		
4.22 Gain/ (Loss) Used to Adjust Basis of Hedged Item		
4.3 Subtotal (Line 4.1 minus Line 4.2)		
5.1 Net Additions to Cash Deposits (Section 2, Column 9)		
5.2 Less: Net Reductions to Cash Deposits (Section 3, Column 9)		
6. Subtotal (Line 1 minus Line 2 plus Line 3.1 plus Line 3.2 minus Line 4.3 plus Line 5.2)		
7. Disposition of Gain/ (Loss) on contracts terminated in prior year:		
7.1 Recognized		
7.2 Used to Adjust Basis of Hedged Item		
8. Aggregate write-in book value, December 31, Current Year (Line 6 plus Line 7.1 plus Line 7.2)		

SCHEDULE DB - PART E - VERIFICATION

Verification of Statement Value and Fair Value of Open Contracts

		Statement Value
1. Part A, Section 1, Column 10		
2. Part B, Section 1, Column 10		
3. Part C, Section 1, Column 10		
4. Part D, Section 1, Column 9 minus Column 12		
5. Line 1 minus Line 2 plus Line 3 plus Line 4		
6. Part E, Section 1, Column 4	NONE	
7. Part E, Section 1, Column 5		
8. Line 5 minus Line 6 minus Line 7		
9. Part A, Section 1, Column 11		
10. Part B, Section 1, Column 11		
11. Part C, Section 1, Column 11		
12. Part D, Section 1, Column 9		
13. Line 9 minus Line 10 plus Line 11 plus Line 12		
14. Part E, Section 1, Column 7		
15. Part E, Section 1, Column 8		
16. Line 13 minus Line 14 minus Line 15		

SCHEDULE DB - PART F - SECTION 1

Summary of Replicated (Synthetic) Assets Open

Replicated (Synthetic) Asset					Components of the Replicated (Synthetic) Asset						
1	2	3	4	5	Derivative Instruments Open		Cash Instrument(s) Held				
Replication RSAT Number	Description	NAIC Designation or Other Description	Statement Value	Fair Value	6	7	8	9	10	11	12
					Description	Fair Value	CUSIP	Description	Statement Value	Fair Value	NAIC Designation or Other Description

NONE

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory										
2. Add: Opened or Acquired Transactions										
3. Add: Increases in Replicated Asset Statement Value	XXX						XXX		XXX	
4. Less: Closed or Disposed of Transactions										
5. Less: Positions Disposed of for Failing Effectiveness Criteria										
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX						XXX		XXX	
7. Ending Inventory										

NONE

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Columns 6 plus 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE							

NONE

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Cancelled) during Current Year

1 Federal ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
------------------------------	------------------------------	--------------------------	------------------------------	------------------------------	---------------------------------

NONE

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Columns 15 - [16 + 17]	19 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers		
Authorized - Affiliates - U. S. Non-Pool																		
39-0273710	19275	American Family Mutual Ins Co	WI		58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	
0299999 - Subtotal - Authorized - Affiliates - U. S. Non-Pool					58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	
0499999 - Subtotal - Authorized - Affiliates					58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	
0999999 - Subtotal - Authorized					58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	
1999999 - Subtotal - Authorized and Unauthorized					58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	
9999999 - TOTAL - Schedule F, Part 3					58,271	15,730	139	14,127		8,779	5,069	17,068		60,912	14,168		46,744	

NOTE: Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 Name of Company	2 Commission Rate	3 Ceded Premium
1)
2)
3)
4)
5)

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 4

Aging of Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						12 Percentage Overdue Column 10 / Column 11	13 Percentage more Than 120 Days Overdue Column 9 / Column 11
				5 Current	Overdue				11 Total Due Columns 5 + 10		
					6 1 to 29 Days	7 30 - 90 Days	8 91 - 120 Days	9 Over 120 Days			
Authorized - Affiliates - U. S. Non-Pool											
39-0273710	19275	American Family Mutual Ins Co	WI	15,869						15,869	
0299999 - Subtotal - Authorized - Affiliates - U. S. Non-Pool				15,869						15,869	
0499999 - Subtotal - Authorized - Affiliates				15,869						15,869	
0999999 - Subtotal - Authorized				15,869						15,869	
1999999 - Subtotal - Authorized and Unauthorized				15,869						15,869	
9999999 - TOTAL - Schedule F, Part 4				15,869						15,869	

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 5

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Federal ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Recoverable all Items Schedule F Part 3, Column 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Ceded Balances Payable	Miscellaneous Balances	Other Allowed Offset Items	Sum of Columns 6 through 10 but not in excess of Column 5	Subtotal Column 5 minus Column 11	Recoverable Paid Losses & LAE Expenses Over 90 Days past Due not in Dispute	20% of Amount in Column 13	Smaller of Column 11 or Column 14	Smaller of Column 11 or 20% of Amount in Dispute Included in Column 5	Total Provision for Unauthorized Reinsurance Smaller of Column 5 or Columns 12 + 15 + 16

NONE

1. Amounts in dispute totaling \$ are included in Column 5.
 2. Amounts in dispute totaling \$ are excluded from Column 13.
 3. Column 5 excludes \$ recoverables on ceded IBNR on contracts in force prior to July 1, 1984 and not subsequently renewed.

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 6

Provision for Overdue Authorized Reinsurance as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11
Federal ID Number	NAIC Company Code	Name of Reinsurer	Reinsurance Recoverable on Paid Losses and LAE More Than 90 Days Overdue (a)	Total Reinsurance Recoverable on Paid Losses and Paid LAE (b)	Amounts Received Prior 90 Days	Column 4 divided by (Columns 5 plus 6)	Amounts in Column 4 for Companies Reporting less than 20% in Column 7	Amounts in Dispute Excluded from Column 4 for Companies Reporting less than 20% in Column 7	20% of Amount in Column 9	Amount Reported in Column 8 x 20% plus Column 10

NONE

(a) From Schedule F - Part 4 Columns 8 plus 9, total authorized, less \$ in dispute.
 (b) From Schedule F - Part 3 Columns 7 plus 8, total authorized, less \$ in dispute.

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE F - PART 7

Provision for Overdue Reinsurance as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
Federal ID Number	NAIC Company Code	Name of Reinsurer	Reinsurance Recoverable All Items	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Ceded Balances Payable	Other Miscellaneous Balances	Other Allowed Offset Items	Sum of Columns 5 through 9 but not in Excess of Column 4	Column 4 minus Column 10	Greater of Column 11 or Schedule F - Part 4 Columns 8 plus 9

NONE

-
- 1. Total
 - 2. Line 1 x .20
 - 3. Schedule F - Part 6 Column 11
 - 4. Provision for Overdue Authorized Reinsurance (Line 2 plus Line 3)
 - 5. Provision for Unauthorized Reinsurance (Schedule F - Part 5, Column 17 x 1000)
 - 6. Provision for Reinsurance (sum Line 4 plus Line 5) (Enter this amount on Page 3, Line 16)

SCHEDULE F - PART 8

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Column 3)			
1. Cash and invested assets (Line 9)	8,991,139		8,991,139
2. Agents' balances or uncollected premiums (Line 10)	(235,655)		(235,655)
3. Funds held by or deposited with reinsured companies (Line 11)			
4. Reinsurance recoverable on loss and loss adjustment expense payments (Line 14)	15,869,443	(15,869,443)	
5. Other assets (Lines 12 and 13 and 15 through 25)	15,964,754		15,964,754
6. Net amount recoverable from reinsurers		46,744,472	46,744,472
7. Totals (Line 28)	40,589,681	30,875,029	71,464,710
LIABILITIES (Page 3)			
8. Losses and loss adjustment expenses (Lines 1 through 3)		27,974,633	27,974,633
9. Taxes, expenses, and other obligations (Lines 4 through 8)			
10. Unearned premiums (Line 9)		17,068,098	17,068,098
11. Advance premiums (Line 10)	198,289		198,289
12. Dividends declared and unpaid (Line 11.1 and Line 11.2)			
13. Ceded reinsurance premiums payable (net of ceded commissions) (Line 12)	14,167,702	(14,167,702)	
14. Funds held by company under reinsurance treaties (Line 13)			
15. Amounts withheld or retained by company for account of others (Line 14)			
16. Provision for reinsurance (Line 16)			
17. Other liabilities (Line 15 and Line 17 through Line 23)	21,711,491		21,711,491
18. Total liabilities (Line 26 minus Line 25)	36,077,482	30,875,029	66,952,511
19. Surplus as regards policyholders (Line 35)	4,512,199	X X X	4,512,199
20. Totals (Line 36)	40,589,681	30,875,029	71,464,710

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes (X) No ()

If yes, give full explanation:

Restatement is a result of the company grossing up balances ceded to affiliates under 100% reinsurance agreement with parent company, American Family Mutual Insurance Company.

.....

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts								
									Non-Cancellable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount

PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

1. Premiums written		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims																		
4. Increase in contract reserves																		
5. Commissions (a)																		
6. General insurance expenses																		
7. Taxes, licenses and fees																		
8. Total expenses incurred																		
9. Aggregate write-ins for deductions																		
10. Gain from underwriting before dividends or refunds																		
11. Dividends or refunds																		
12. Gain from underwriting after dividends or refunds																		
NONE																		
DETAILS OF WRITE-INS																		
0901.																		
0902.																		
0903.																		
0998. Summary of remaining write-ins for Line 9 from overflow page																		
0999. Totals (Lines 0901 through 0903 plus Line 0998) (Line 9 above)																		

(a) Includes \$ reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancellable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other

PART 2 - RESERVES AND LIABILITIES

A. Premium Reserves:	NONE								
1. Unearned premiums									
2. Advance premiums									
3. Reserve for rate credits									
4. Total premium reserves, current year									
5. Total premium reserves, prior year									
6. Increase in total premium reserves									
B. Contract Reserves:	NONE								
1. Additional reserves									
2. Reserve for future contingent benefits									
3. Total contract reserves, current year									
4. Total contract reserves, prior year									
5. Increase in contract reserves									
C. Claim Reserves and Liabilities:	NONE								
1. Total current year									
2. Total prior year									
3. Increase									

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

1. Claims paid during the year:	NONE								
1.1 On claims incurred prior to current year									
1.2 On claims incurred during current year									
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	NONE								
2.2 On claims incurred during current year									
3. Test:									
3.1 Line 1.1 and Line 2.1	NONE								
3.2 Claim reserves and liabilities, December 31, prior year									
3.3 Line 3.1 minus Line 3.2									

PART 4 - REINSURANCE

A. Reinsurance Assumed:	NONE								
1. Premiums written									
2. Premiums earned									
3. Incurred claims									
4. Commissions									
B. Reinsurance Ceded:	NONE								
1. Premiums written									
2. Premiums earned									
3. Incurred claims									
4. Commissions									

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1	2	3	4
	Medical	Dental	Other	Total
A. Direct:				
1. Claims incurred				
2. Beginning claim reserve				
3. Ending claim reserve				
4. Claims paid				
B. Assumed Reinsurance:				
5. Claims incurred				
6. Beginning claim reserve				
7. Ending claim reserve				
8. Claims paid				
C. Ceded Reinsurance:				
9. Claims incurred				
10. Beginning claim reserve				
11. Ending claim reserve				
12. Claims paid				
D. Net:				
13. Claims incurred				
14. Beginning claim reserve				
15. Ending claim reserve				
16. Claims paid				

NONE

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Sch. P, Pt. 1A, Homeowners/Farmowners

NONE

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 1993												
3. 1994												
4. 1995												
5. 1996	357	357		402	402	24	24	34	34			241
6. 1997	2,000	2,000		1,904	1,904	56	56	356	356			878
7. 1998	5,222	5,222		5,313	5,313	135	135	821	821			1,923
8. 1999	10,373	10,373		8,946	8,946	267	267	1,390	1,390			3,780
9. 2000	15,925	15,925		12,445	12,445	150	150	1,832	1,832			5,796
10. 2001	23,490	23,490		14,477	14,477	50	50	2,346	2,346			7,586
11. 2002	33,199	33,199		11,316	11,316	5	5	2,555	2,555			8,332
12. Totals	XXX	XXX	XXX	54,803	54,803	687	687	9,334	9,334			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct & Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.													
2.													
3.													
4.													
5.							3	3					
6.	1	1	(2)	(2)			19	19					1
7.	52	52	1	1			30	30	3	3			14
8.	494	494	87	87			223	223	30	30			77
9.	1,049	1,049	392	392			792	792	74	74			155
10.	3,276	3,276	1,594	1,594			1,212	1,212	251	251			461
11.	7,587	7,587	7,127	7,127			1,391	1,391	758	758			2,037
12.	12,459	12,459	9,199	9,199			3,670	3,670	1,116	1,116			2,745

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.	463	463		129.7	129.7						
6.	2,334	2,334		116.7	116.7						
7.	6,355	6,355		121.7	121.7						
8.	11,437	11,437		110.3	110.3						
9.	16,734	16,734		105.1	105.1						
10.	23,206	23,206		98.8	98.8						
11.	30,739	30,739		92.6	92.6						
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**SCHEDULE P - PART 1C
COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 1993												
3. 1994												
4. 1995												
5. 1996	1	1										
6. 1997	6	6						1	1			2
7. 1998	13	13		18	18	2	2	1	1			6
8. 1999	2	2										
9. 2000												
10. 2001												
11. 2002												
12. Totals	XXX	XXX	XXX	18	18	2	2	2	2			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct & Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1.													
2.													
3.													
4.													
5.													
6.													
7.													
8.													
9.													
10.													
11.													
12.													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.											
6.	1	1		16.7	16.7						
7.	21	21		161.5	161.5						
8.											
9.											
10.											
11.											
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Page 54

Sch. P, Pt. 1D, Workers' Compensation

NONE

Page 55

Sch. P, Pt. 1E, Commercial Multiple Peril

NONE

Page 56

Sch. P, Pt. 1F, Sn. 1, Medical Malpractice, Occurrence

NONE

Page 57

Sch. P, Pt. 1F, Sn. 2, Medical Malpractice, Claims Made

NONE

Page 58

Sch. P, Pt. 1G, Special Liability

NONE

Page 59

Sch. P, Pt. 1H, Sn. 1, Other Liability, Occurrence

NONE

Page 60

Sch. P, Pt. 1H, Sn. 2, Other Liability, Claims Made

NONE

Page 61

Sch. P, Pt. 1I, Special Property

NONE

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	(108)	(108)			3	3			XXX
2. 2001	15,533	15,533		14,830	14,830	14	14	1,670	1,670			14,132
3. 2002	21,386	21,386		15,092	15,092	1	1	2,202	2,202			15,573
4. Totals	XXX	XXX	XXX	29,814	29,814	15	15	3,875	3,875			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct & Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.	2	2	(136)	(136)					10	10			3
2.	20	20	(137)	(137)					31	31			18
3.	1,646	1,646	(148)	(148)			73	73	169	169			1,354
4.	1,668	1,668	(421)	(421)			73	73	210	210			1,375

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	16,428	16,428		105.8	105.8						
3.	19,035	19,035		89.0	89.0						
4.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Page 63

Sch. P, Pt. 1K, Fidelity/Surety

NONE

Page 64

Sch. P, Pt. 1L, Other (Including Credit, Accident/Health)

NONE

Page 65

Sch. P, Pt. 1M, International

NONE

Page 66

Sch. P, Pt. 1N, Reinsurance

NONE

Page 67

Sch. P, Pt. 1O, Reinsurance

NONE

Page 68

Sch. P, Pt. 1P, Reinsurance

NONE

Page 69

Sch. P, Pt. 1R, Sn. 1, Products Liability, Occurrence

NONE

Page 70

Sch. P, Pt. 1R, Sn. 2, Products Liability, Claims Made

NONE

Page 71

Sch. P, Pt. 1S, Financial Guaranty/Mortgage Guaranty

NONE

Page 72

Sch. P, Pt. 2A, Homeowners/Farmowners

NONE

Sch. P, Pt. 2B, Private Passenger Auto Liability/Medical

NONE

Sch. P, Pt. 2C, Commercial Auto/Truck Liability/Medical

NONE

Sch. P, Pt. 2D, Workers' Compensation

NONE

Sch. P, Pt. 2E, Commercial Multiple Peril

NONE

Page 73

Sch. P, Pt. 2F, Sn. 1, Medical Malpractice, Occurrence
NONE

Sch. P, Pt. 2F, Sn. 2, Medical Malpractice, Claims - Made
NONE

Sch. P, Pt. 2G, Special Liability
NONE

Sch. P, Pt. 2H, Sn. 1, Other Liability, Occurrence
NONE

Sch. P, Pt. 2H, Sn. 2, Other Liability, Claims - Made
NONE

Page 74

Sch. P, Pt. 2I, Special Property
NONE

Sch. P, Pt. 2J, Auto Physical Damage
NONE

Sch. P, Pt. 2K, Fidelity/Surety
NONE

Sch. P, Pt. 2L, Other (Including Credit, Accident and Health)
NONE

Sch. P, Pt. 2M, International
NONE

Page 75

Sch. P, Pt. 2N, Reinsurance
NONE

Sch. P, Pt. 2O, Reinsurance
NONE

Sch. P, Pt. 2P, Reinsurance
NONE

Page 76

Sch. P, Pt. 2R, Sn. 1, Products Liability, Occurrence
NONE

Sch. P, Pt. 2R, Sn. 2, Products Liability, Claims Made
NONE

Sch. P, Pt. 2S, Financial Guaranty/Mortgage Guaranty
NONE

Page 77

Sch. P, Pt. 3A, Homeowners/Farmowners
NONE

Sch. P, Pt. 3B, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 3C, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 3D, Workers' Compensation
NONE

Sch. P, Pt. 3E, Commercial Multiple Peril
NONE

Page 78

Sch. P, Pt. 3F, Sn. 1, Medical Malpractice, Occurrence
NONE

Sch. P, Pt. 3F, Sn. 2, Medical Malpractice, Claims Made
NONE

Sch. P, Pt. 3G, Special Liability
NONE

Sch. P, Pt. 3H, Sn. 1, Other Liability, Occurrence
NONE

Sch. P, Pt. 3H, Sn. 2, Other Liability, Claims Made
NONE

Page 79

Sch. P, Pt. 3I, Special Property
NONE

Sch. P, Pt. 3J, Auto Physical Damage
NONE

Sch. P, Pt. 3K, Fidelity/Surety
NONE

Sch. P, Pt. 3L, Other (Including Credit, Accident and Health)
NONE

Sch. P, Pt. 3M, International
NONE

Page 80

Sch. P, Pt. 3N, Reinsurance
NONE

Sch. P, Pt. 3O, Reinsurance
NONE

Sch. P, Pt. 3P, Reinsurance
NONE

Page 81

Sch. P, Pt. 3R, Sn. 1, Product Liability, Occurrence
NONE

Sch. P, Pt. 3R, Sn. 2, Product Liability, Claims Made
NONE

Sch. P, Pt. 3S, Financial Guaranty/Mortgage Guaranty
NONE

Page 82

Sch. P, Pt. 4A, Homeowners/Farmowners
NONE

Sch. P, Pt. 4B, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 4C, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 4D, Workers' Compensation
NONE

Sch. P, Pt. 4E, Commercial Multiple Peril
NONE

Page 83

Sch. P, Pt. 4F, Sn. 1, Medical Malpractice, Occurrence
NONE

Sch. P, Pt. 4F, Sn. 2, Medical Malpractice, Claims Made
NONE

Sch. P, Pt. 4G, Special Liability
NONE

Sch. P, Pt. 4H, Sn. 1, Other Liability, Occurrence
NONE

Sch. P, Pt. 4H, Sn. 2, Other Liability, Claims Made
NONE

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Sch. P, Pt. 4I, Special Property
NONE

Sch. P, Pt. 4J, Auto Physical Damage
NONE

Sch. P, Pt. 4K, Fidelity/Surety
NONE

Sch. P, Pt. 4L, Other (Including Credit, Accident and Health)
NONE

Sch. P, Pt. 4M, International
NONE

Page 85

Sch. P, Pt. 4N, Reinsurance
NONE

Sch. P, Pt. 4O, Reinsurance
NONE

Sch. P, Pt. 4P, Reinsurance
NONE

Page 86

Sch. P, Pt. 4R, Sn. 1, Products Liability, Occurrence
NONE

Sch. P, Pt. 4R, Sn. 2, Products Liability, Claims Made
NONE

Sch. P, Pt. 4S, Financial Guaranty/Mortgage Guaranty
NONE

Page 87

Sch. P, Pt. 5A, Sn. 1, Homeowners/Farmowners
NONE

Sch. P, Pt. 5A, Sn. 2, Homeowners/Farmowners
NONE

Sch. P, Pt. 5A, Sn. 3, Homeowners/Farmowners
NONE

**SCHEDULE P - PART 5B
PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX	103	142	153	159	159	160	160
6. 1997	XXX	XXX	XXX	XXX	399	564	595	606	610	612
7. 1998	XXX	XXX	XXX	XXX	XXX	932	1,280	1,337	1,358	1,364
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX	1,720	2,410	2,594	2,633
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,480	3,696	3,928
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,450	4,907
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,544

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX	66	17	5	2	2	1	
6. 1997	XXX	XXX	XXX	XXX	204	41	17	7	2	1
7. 1998	XXX	XXX	XXX	XXX	XXX	372	79	41	23	14
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX	767	224	104	77
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,440	331	155
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,746	461
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,037

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX	222	235	237	241	241	241	241
6. 1997	XXX	XXX	XXX	XXX	777	860	872	876	877	878
7. 1998	XXX	XXX	XXX	XXX	XXX	1,711	1,881	1,914	1,923	1,923
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX	3,229	3,647	3,755	3,780
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,975	5,666	5,796
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,729	7,586
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,332

SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX							
6. 1997	XXX	XXX	XXX	XXX						
7. 1998	XXX	XXX	XXX	XXX	XXX					
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX							
6. 1997	XXX	XXX	XXX	XXX						
7. 1998	XXX	XXX	XXX	XXX	XXX					
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
1. Prior										
2. 1993										
3. 1994	XXX									
4. 1995	XXX	XXX								
5. 1996	XXX	XXX	XXX							
6. 1997	XXX	XXX	XXX	XXX						
7. 1998	XXX	XXX	XXX	XXX	XXX					
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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Sch. P, Pt. 5D, Sn. 1, Workers' Compensation
NONE

Sch. P, Pt. 5D, Sn. 2, Workers' Compensation
NONE

Sch. P, Pt. 5D, Sn. 3, Workers' Compensation
NONE

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Sch. P, Pt. 5E, Sn. 1, Commercial Multiple Peril
NONE

Sch. P, Pt. 5E, Sn. 2, Commercial Multiple Peril
NONE

Sch. P, Pt. 5E, Sn. 3, Commercial Multiple Peril
NONE

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Sch. P, Pt. 5F, Sn. 1A, Medical Malpractice, Occurrence
NONE

Sch. P, Pt. 5F, Sn. 2A, Medical Malpractice, Occurrence
NONE

Sch. P, Pt. 5F, Sn. 3A, Medical Malpractice, Occurrence
NONE

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Sch. P, Pt. 5F, Sn. 1B, Medical Malpractice, Claims Made
NONE

Sch. P, Pt. 5F, Sn. 2B, Medical Malpractice, Claims Made
NONE

Sch. P, Pt. 5F, Sn. 3B, Medical Malpractice, Claims Made
NONE

Page 94

Sch. P, Pt. 5H, Sn. 1A, Other Liability, Occurrence
NONE

Sch. P, Pt. 5H, Sn. 2A, Other Liability, Occurrence
NONE

Sch. P, Pt. 5H, Sn. 3A, Other Liability, Occurrence
NONE

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Sch. P, Pt. 5H, Sn. 1B, Other Liability, Claims Made
NONE

Sch. P, Pt. 5H, Sn. 2B, Other Liability, Claims Made
NONE

Sch. P, Pt. 5H, Sn. 3B, Other Liability, Claims Made
NONE

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Sch. P, Pt. 5R, Sn. 1A, Products Liability, Occurrence
NONE

Sch. P, Pt. 5R, Sn. 2A, Products Liability, Occurrence
NONE

Sch. P, Pt. 5R, Sn. 3A, Products Liability, Occurrence
NONE

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Sch. P, Pt. 5R, Sn. 1B, Products Liability, Claims Made
NONE

Sch. P, Pt. 5R, Sn. 2B, Products Liability, Claims Made
NONE

Sch. P, Pt. 5R, Sn. 3B, Products Liability, Claims Made
NONE

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current year Premiums Earned
	1 1993	2 1994	3 1995	4 1996	5 1997	6 1998	7 1999	8 2000	9 2001	10 2002	
1. Prior											
2. 1993											
3. 1994	XXX										
4. 1995	XXX	XXX									
5. 1996	XXX	XXX	XXX	1	1	1	1	1	1	1	1
6. 1997	XXX	XXX	XXX	XXX	6	6	6	6	6	6	6
7. 1998	XXX	XXX	XXX	XXX	XXX	13	13	13	13	13	13
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current year Premiums Earned
	1 1993	2 1994	3 1995	4 1996	5 1997	6 1998	7 1999	8 2000	9 2001	10 2002	
1. Prior											
2. 1993											
3. 1994	XXX										
4. 1995	XXX	XXX									
5. 1996	XXX	XXX	XXX	1	1	1	1	1	1	1	1
6. 1997	XXX	XXX	XXX	XXX	6	6	6	6	6	6	6
7. 1998	XXX	XXX	XXX	XXX	XXX	13	13	13	13	13	13
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current year Premiums Earned
	1 1993	2 1994	3 1995	4 1996	5 1997	6 1998	7 1999	8 2000	9 2001	10 2002	
1. Prior											
2. 1993											
3. 1994	XXX										
4. 1995	XXX	XXX									
5. 1996	XXX	XXX	XXX								
6. 1997	XXX	XXX	XXX	XXX							
7. 1998	XXX	XXX	XXX	XXX	XXX						
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current year Premiums Earned
	1 1993	2 1994	3 1995	4 1996	5 1997	6 1998	7 1999	8 2000	9 2001	10 2002	
1. Prior											
2. 1993											
3. 1994	XXX										
4. 1995	XXX	XXX									
5. 1996	XXX	XXX	XXX								
6. 1997	XXX	XXX	XXX	XXX							
7. 1998	XXX	XXX	XXX	XXX	XXX						
8. 1999	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2002	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

Page 99

Sch. P, Pt. 6E, Sn. 1, Commercial Multiple Peril
NONE

Sch. P, Pt. 6E, Sn. 2, Commercial Multiple Peril
NONE

Sch. P, Pt. 6H, Sn. 1A, Other Liability, Occurrence
NONE

Sch. P, Pt. 6H, Sn. 2A, Other Liability, Occurrence
NONE

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Sch. P, Pt. 6H, Sn. 1B, Other Liability, Claims Made
NONE

Sch. P, Pt. 6H, Sn. 2B, Other Liability, Claims Made
NONE

Sch. P, Pt. 6M, Sn. 1, International
NONE

Sch. P, Pt. 6M, Sn. 2, International
NONE

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Sch. P, Pt. 6N, Sn. 1, Reinsurance
NONE

Sch. P, Pt. 6N, Sn. 2, Reinsurance
NONE

Sch. P, Pt. 6O, Sn. 1, Reinsurance
NONE

Sch. P, Pt. 6O, Sn. 2, Reinsurance
NONE

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Sch. P, Pt. 6R, Sn. 1A, Products Liability, Occurrence
NONE

Sch. P, Pt. 6R, Sn. 2A, Products Liability, Occurrence
NONE

Sch. P, Pt. 6R, Sn. 1B, Products Liability, Claims Made
NONE

Sch. P, Pt. 6R, Sn. 2B, Products Liability, Claims Made
NONE

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Sch. P, Pt. 7A, Sn. 1, Primary, Loss Sensitive Contracts
NONE

Sch. P, Pt. 7A, Sn. 2, Incurred Losses and Allocated Expenses
NONE

Sch. P, Pt. 7A, Sn. 3, Bulk and Incurred But Not Reported Res.
NONE

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Sch. P, Pt. 7A, Sn. 4, Net Earned Premiums Reported
NONE

Sch. P, Pt. 7A, Sn. 5, Net Reserve for Premium Adjustments
NONE

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Sch. P, Pt. 7B, Sn. 1, Reinsurance Loss Sensitive Contracts
NONE

Sch. P, Pt. 7B, Sn. 2, Incurred Losses and Cost Containment Exp.
NONE

Sch. P, Pt. 7B, Sn. 3, Bulk Incurred But Not Reported Reserves
NONE

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Sch. P, Pt. 7B, Sn. 4, Net Earned Premiums Reported at Year End
NONE

Sch. P, Pt. 7B, Sn. 5, Net Reserve for Premium Adjustments
NONE

Sch. P, Pt. 7B, Sn. 6, Incurred Adjustable Commissions
NONE

Sch. P, Pt. 7B, Sn. 7, Reserves for Commission Adjustments
NONE

SCHEDULE P INTERROGATORIES

1. What is the extended loss and expense reserve - direct and assumed - for the following classes? An example of an extended loss and expense reserve is the actuarial reserve for the free-tail coverage arising upon death, disability or retirement in most medical malpractice policies. Such a liability is to be reported here even if it was not reported elsewhere in Schedule P, but otherwise reported as a liability item on Page 3. Show the full reserve amount, not just the change during the current year.

Years in which premiums were earned and losses were incurred	1 Medical Malpractice	2 Other Liability	3 Products Liability
1.01 Prior			
1.02 1993			
1.03 1994			
1.04 1995			
1.05 1996			
1.06 1997			
1.07 1998			
1.08 1999			
1.09 2000			
1.10 2001			
1.11 2002			
1.12 TOTALS			

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes (X) No ()

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes (X) No ()

4. Do any lines in Schedule P include reserves which are reported gross of any discount to present value of future payments, but are reported net of such discounts on Page 10? Yes () No (X)

If Yes, proper reporting must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: 5.1 Fidelity \$
 (in thousands of dollars) 5.2 Surety \$

6. Claim count information is reported (check one): 6.1 per claim (X)
 If not the same in all years, explain in Interrogatory 7. 6.2 per claimant ()

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes which have occurred which must be considered when making such analyses? Yes () No (X)

7.2 (An extended statement may be attached)

.....

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
19275	39-0273710	American Family Mutual Insurance Co.					204,987,187	(55,881,141)		7,750,000	156,856,046	(595,051,283)
19283	39-6040366	American Standard Insurance Co. of WI					(84,150,517)	11,821,651			(72,328,866)	440,357,367
60399	39-6040365	American Family Life Insurance Co.					(50,709,435)				(50,709,435)	
	39-6040596	American Family Financial Services Inc.					(5,751,313)			(7,500,000)	(13,251,313)	
	39-1508124	American Family Brokerage Inc.					(2,154,656)			(250,000)	(2,404,656)	
10386	39-1835307	American Family Insurance Company					(45,512,048)	39,050,387			(6,461,661)	102,560,294
10387	39-1835305	American Standard Insurance Co. of Ohio					(16,709,218)	5,009,103			(11,700,115)	52,133,622
	39-1999869	American Family Securities, LLC										
9999999	- CONTROL TOTALS											

If the nature of the transactions reported in Part 2 requires explanation, report such in the following explanatory note:

.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your annual 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.

MARCH FILING	RESPONSE
1. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed by March 1? EXPLANATION: BARCODE: Document Identifier 450:	No 
2. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? EXPLANATION: BARCODE: Document Identifier 420:	No 
3. Will the Financial Guaranty Insurance Exhibit be filed by March 1? EXPLANATION: BARCODE: Document Identifier 240:	No 
4. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? EXPLANATION: BARCODE: Document Identifier 360:	No 
5. Will an actuarial opinion be filed by March 1? EXPLANATION: BARCODE: Document Identifier 440:	Yes 
6. Will the SVO Compliance Certification be filed by March 1? EXPLANATION: BARCODE: Document Identifier 470:	Yes 
7. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? EXPLANATION: BARCODE: Document Identifier 490:	No 

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	RESPONSE
8. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 460:	
9. Will the Risk-based Capital Report be filed with the NAIC by March 1?	Yes
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 390:	
10. Will the Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	Yes
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 390:	
11. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	No
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 385:	1 0 3 8 7 2 0 0 2 3 8 5 0 0 0 0 0 
APRIL FILING	
12. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	Yes
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 270:	
13. Will Management's Discussion and Analysis be filed by April 1?	Yes
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 350:	
14. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	No
EXPLANATION:	
.....	
.....	
BARCODE:	
Document Identifier 230:	1 0 3 8 7 2 0 0 2 2 3 0 0 0 0 0 0 

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

15. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?

No

EXPLANATION:

.....

BARCODE:

Document Identifier 330:



16. Will the Accident and Health Policy Experience Exhibit be filed by April 1?

No

EXPLANATION:

.....

BARCODE:

Document Identifier 210:



17. Will the Investment Risks Interrogatories be filed by April 1?

Yes

EXPLANATION:

.....

BARCODE:

Document Identifier 285:

MAY FILING

18. Will this company be included in a combined annual statement which is filed with the NAIC by May 1?

Yes

EXPLANATION:

.....

BARCODE:

Document Identifier 201:

JUNE FILING

19. Will an audited financial report be filed by June 1?

Yes

EXPLANATION:

.....

BARCODE:

Document Identifier 220:



FINANCIAL GUARANTY INSURANCE EXHIBIT

TO BE FILED ON OR BEFORE MARCH 1

For the Year Ended December 31, 2002

Of The American Standard Insurance Company of Ohio

NAIC Group Code: 0473

NAIC Company Code: 10387

Employer's ID Number: _____

NONE

PART 1

Showing Total Net Exposures (Principal and Interest) By Year Payable
On Municipal Bond Guaranties In Force As Of Year End

Year Payable	1 Municipal Obligation Bonds	2 Special Revenue Bonds	Industrial Development Bonds			6 Totals
			3 Type I	4 Type II	5 Type III	
1. 2003						
2. 2004						
3. 2005						
4. 2006						
5. 2007						
6. 2008						
7. 2009						
8. 2010						
9. 2011						
10. 2012						
11. 2013						
12. 2014						
13. 2015						
14. 2016						
15. 2017						
16. 2018 - 22						
17. 2023 - 27						
18. 2028 +						
19. Totals						

NONE

PART 2

Showing Total Net Exposures (Principal and Interest) By Year Payable
On Non-Municipal Bond Guaranties In Force As Of Year End

Year Payable	Corporate Obligations			4 Cons Debt Obligations	5 Pass-Through Securities	6 Ltd Partnerships	7 Other Non-Investment Grade Obligations	8 All Other Guaranties	9 Totals
	1 Type I	2 Type II	3 Type III						
1. 2003									
2. 2004									
3. 2005									
4. 2006									
5. 2007									
6. 2008									
7. 2009									
8. 2010									
9. 2011									
10. 2012									
11. 2013									
12. 2014									
13. 2015									
14. 2016									
15. 2017									
16. 2018 - 22									
17. 2023 - 28									
18. 2028 +									
19. Totals									

NONE

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

PART 3A. MUNICIPAL OBLIGATION BONDS

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

(Continued)

PART 3B SPECIAL REVENUE BONDS

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

(Continued)

PART 3C INDUSTRIAL DEVELOPMENT BONDS - TYPE I

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

(Continued)

PART 3D. INDUSTRIAL DEVELOPMENT BONDS - TYPE II

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

(Continued)

PART 3E. INDUSTRIAL DEVELOPMENT BONDS - TYPE III

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS

(Continued)

PART 3F. TOTALS - ALL MUNICIPAL BONDS WRITTEN

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. 1992 S.P.								
22. 1992 I.P.								
23. 1991 S.P.								
24. 1991 I.P.								
25. 1990 S.P.								
26. 1990 I.P.								
27. 1989 S.P.								
28. 1989 I.P.								
29. 1988 S.P.								
30. 1988 I.P.								
31. 1987 S.P.								
32. 1987 I.P.								
33. 1986 S.P.								
34. 1986 I.P.								
35. 1985 S.P.								
36. 1985 I.P.								
37. 1984 S.P.								
38. 1984 I.P.								
39. 1983 S.P.								
40. 1983 I.P.								
41. Prior to 1983 S.P.								
42. Prior to 1983 I.P.								
43. Totals								

NONE

S.P. = Single Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS

PART 4A. CORPORATE OBLIGATIONS TYPE I

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS

(Continued)

PART 4B. CORPORATE OBLIGATIONS TYPE II

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

S.P. = Single Premiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4C. CORPORATE OBLIGATIONS TYPE III

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4D. CONSUMER DEBT OBLIGATIONS

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

S.P. = Single Premiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4E. PASS-THROUGH SECURITIES

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4F. LIMITED PARTNERSHIPS

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

S.P. = Single Premiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4G. OTHER NON-INVESTMENT GRADE OBLIGATIONS

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4H. ALL OTHER GUARANTIES

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

S.P. = Single Premiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS
(Continued)

PART 4I. TOTALS - ALL NON-MUNICIPAL OBLIGATIONS WRITTEN

Calendar Year Written	1 Net Premiums Written	2 Net Principal Guaranteed	3 Average Premium (Columns 1 / 2)	4 Current Year Earned Premium	5 Prior Year Reserve	Current Year		8 Contingency Reserve (Columns 5 + 6 - 7)
						6 Addition to Reserve	7 Withdrawals From Reserve	
1. 2002 S.P.								
2. 2002 I.P.								
3. 2001 S.P.								
4. 2001 I.P.								
5. 2000 S.P.								
6. 2000 I.P.								
7. 1999 S.P.								
8. 1999 I.P.								
9. 1998 S.P.								
10. 1998 I.P.								
11. 1997 S.P.								
12. 1997 I.P.								
13. 1996 S.P.								
14. 1996 I.P.								
15. 1995 S.P.								
16. 1995 I.P.								
17. 1994 S.P.								
18. 1994 I.P.								
19. 1993 S.P.								
20. 1993 I.P.								
21. Prior to 1993 S.P.								
22. Prior to 1993 I.P.								
23. Totals								

NONE

S.P. = Single Premiums
I.P. = Installment Premiums

PART 5 - MUNICIPAL BOND EXPOSURES WRITTEN

PART 5A - GROSS EXPOSURES WRITTEN DURING YEAR

	1 Direct Exposure Written	2 Assumed Exposure Written	3 Ceded Exposure Written	4 Net Exposure Written (Columns 1 + 2 - 3)
1. MUNIC OBLIGATION BONDS				
2. SPECIAL REVENUE BONDS				
3. IDB'S TYPE I				
4. IDB'S TYPE II				
5. IDB'S TYPE III				
6. TOTAL MUNICIPAL BONDS				

NONE

PART 5B - NET OUTSTANDING EXPOSURE

	1 Net Outstanding Exposure (Part 5A, Col. 4)	2 Less Collateral Held	3 Exposures Net of Collateral	4 Net Exposures Prior Year	5 Net Exposure Expired During Year	6 Net Outstanding Exposure
1. MUNIC OBLIGATION BONDS						
2. SPECIAL REVENUE BONDS						
3. IDB'S TYPE I						
4. IDB'S TYPE II						
5. IDB'S TYPE III						
6. TOTAL MUNICIPAL BONDS						

NONE

PART 5C - BREAKDOWN OF NET OUTSTANDING EXPOSURES AT YEAR-END

	1 Direct Exposure	2 Assumed Exposure	Ceded Exposure		5 Net Outstanding Exposure (Part 5B, Column 6) (Columns 1 + 2 - 3 - 4)
			3 Authorized	4 Unauthorized	
1. MUNIC OBLIGATION BONDS					
2. SPECIAL REVENUE BONDS					
3. IDB'S TYPE I					
4. IDB'S TYPE II					
5. IDB'S TYPE III					
6. TOTAL MUNICIPAL BONDS					

NONE

NON-MUNICIPAL BOND EXPOSURES WRITTEN

PART 6A - GROSS EXPOSURES WRITTEN DURING YEAR

	1 Direct Exposure Written	2 Assumed Exposure Written	3 Ceded Exposure Written	4 Net Exposure Written (Columns 1 + 2 - 3)
1. CORP OBLIG BDS-TYPE I	NONE			
2. CORP OBLIG BDS-TYPE II				
3. CORP OBLIG BDS-TYPE III				
4. CONSUMER DEBT OBLIGATIONS				
5. PASS THROUGH SECURITIES				
6. LIMITED PARTNERSHIPS				
7. OTHER NON-INVESTMENT GRADE OBLIGATIONS				
8. ALL OTHER GUARANTEES				
9. TOTAL NON-MUNICIPAL BONDS				

PART 6B - NET OUTSTANDING EXPOSURE

	1 Net Outstanding Exposure (Part 6A, Column 4)	2 Less Collateral Held	3 Exposures Net of Collateral	4 Net Exposure Prior Year	5 Net Exposure Expired During Year	6 Net Outstanding Exposure
1. CORP OBLIG BDS-TYPE I	NONE					
2. CORP OBLIG BDS-TYPE II						
3. CORP OBLIG BDS-TYPE III						
4. CONSUMER DEBT OBLIGATIONS						
5. PASS THROUGH SECURITIES						
6. LIMITED PARTNERSHIPS						
7. OTHER NON-INVESTMENT GRADE OBLIGATIONS						
8. ALL OTHER GUARANTEES						
9. TOTAL NON-MUNICIPAL BONDS						

PART 6C - BREAKDOWN OF NET OUTSTANDING EXPOSURES AT YEAR-END

	1 Direct Exposure	2 Assumed Exposure	3 Authorized	4 Unauthorized	5 Net Outstanding Exposure (Part 6B, Column 6) (Columns 1 + 2 - 3 - 4)
1. CORP OBLIG BDS-TYPE I	NONE				
2. CORP OBLIG BDS-TYPE II					
3. CORP OBLIG BDS-TYPE III					
4. CONSUMER DEBT OBLIGATIONS					
5. PASS THROUGH SECURITIES					
6. LIMITED PARTNERSHIPS					
7. OTHER NON-INVESTMENT GRADE OBLIGATIONS					
8. ALL OTHER GUARANTEES					
9. TOTAL NON-MUNICIPAL BONDS					

PART 7 - LOSS DEVELOPMENT (000 omitted)

	Losses paid during the year less reinsurance received during the year			Salvage and Subrogation received in the current year			7	8	Losses unpaid December 31 of current year				Development		Estimated Liability on unpaid losses		Change in such Estimated Liability	
	1	2	3	4	5	6	Total (Columns 1 + 2 + 3 - 4 - 5 - 6)	Losses paid during 2001 on losses incurred prior to 2001	9	10	11	12	13	14	15	16	17	18
	On losses incurred during 2002	On losses incurred during 2001	On losses incurred prior to 2001	On losses incurred during 2002	On losses incurred during 2001	On losses incurred prior to 2001			On losses incurred during 2002	On losses incurred during 2001	On losses incurred prior to 2001	Total Per Column 5, Part 3A (Columns 9 + 10 + 11)	On losses incurred prior to 2002 (Columns 2 + 3 + 10 + 11)	On losses incurred prior to 2001 (Columns 3 + 8 + 11)	Dec. 31, 2001	Dec. 31, 2000	Dec. 31, 2001 (Column 13 less Column 15)	Dec. 31, 2000 (Column 14 less Column 16)
1. Municipal Obligation Bonds																		
2. Special Revenue Bonds																		
3. IDB's-Class I																		
4. IDB's-Class II																		
5. IDB's-Class III																		
6. Total Municipal Bonds																		
7. Corporate Obligation Bonds																		
Class I																		
8. Corporate Obligation Bonds																		
Class II																		
9. Corporate Obligation Bonds																		
Class III																		
10. Consumer Debt Obligations																		
11. Pass Through Securities																		
12. Limited Partnerships																		
13. Other Non-Investment Grade Obligations																		
14. All Other Non-Municipal																		
15. Total Non-Municipal Bonds																		
16. Totals																		

NONE



SUPPLEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT FOR THE STATE OF OHIO

NAIC Group Code 0473

NAIC Company Code 10387

ADDRESS (City, State and Zip Code) Madison, WI 53783-0001

PERSON COMPLETING THIS EXHIBIT Karen Van Cleave

TITLE Sr. Actuarial Analyst

TELEPHONE NUMBER (608) 249-2111

1 Compliance with OBRA	2 Policy Form Number	3 Standardized Medicare Supplement Benefit Plan	4 Medicare Select	5 Plan Characteristics	6 Date Approved	7 Date Approval Withdrawn	8 Date Last Amended	9 Date Closed	10 Policy Marketing Trade Name	Policies Issued Through 1999			Policies Issued in 2000, 2001, 2002			
										11 Premiums Earned	14 Inurred Claims		15 Premiums Earned	18 Inurred Claims		18 Number of Covered Lives
											12 Amount	13 Percent of Premiums Earned		16 Amount	17 Percent of Premiums Earned	

Experience on Individual Policies

Yes
 Yes
 Yes
 Yes
 Yes
 0199999 - TOTAL Experience on Individual Policies

NONE

GENERAL INTERROGATORIES

- If response in Column 1 is no, give full and complete details
.....
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state. **NONE**
 2.1 Address:
 2.2 Contact Person and Phone Number:
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B)
 3.1 Address:
 3.2 Contact Person and Phone Number:
- Explain any policies identified above as policy type "O"
.....

3600H

P/C



**PREMIUMS ATTRIBUTED TO PROTECTED CELL EXHIBIT
FOR THE YEAR ENDED DECEMBER 31, 2002**

Of The American Standard Insurance Company of Ohio

NAIC Group Code: 0473

NAIC Company Code: 10387

Employer's ID Number:

Line of Business	Premiums				Losses					Loss Adjustment Expenses			
	1 Attributed	Unearned December 31		4 Earned Premium	5 Paid	Unpaid December 31			9 Incurred	10 Paid	Unpaid December 31		13 Incurred
		2 Prior Year	3 Current Year			6 Adjusted or in Process	7 Incurred But not Reported	8 Prior Year Total			11 Current Year	12 Prior Year	
NONE													
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 (group and individual)													
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													
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													
31. Reinsurance - Nonproportional Assumed Liability													
32. Reinsurance - Nonproportional Assumed Financial Lines													
33. Aggregate write-ins for other lines of business													
34. TOTALS													
DETAILS OF WRITE-INS													
3301.													
3302.													
3303.													
3398. Summary of remaining write-ins for Line 33 from overflow page													
3399. Totals (Line 3301 through Line 3303 plus Line 3398) (Line 33 above)													

SUPPLEMENT FOR THE YEAR 2002 OF THE American Standard Insurance Company of Ohio

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	
NONE								
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 (Line 5701 through Line 5703 plus Line 5798) (Line 57 above)								



PROPERTY AND CASUALTY SUPPLEMENT FOR THE YEAR 2002
OF THE U.S. BRANCH OF THE American Standard Insurance Company of Ohio

TRUSTEED SURPLUS STATEMENT

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

being duly sworn, says that he/she is the _____ of the American Standard Insurance Company of Ohio, a corporation organized under the laws of _____, entered to transact business in the United States through the State of _____, that this trustee surplus 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 American Standard Insurance Company of Ohio, 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.

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

NONE

AFFIDAVIT OF TRUSTEE - SCHEDULE C

being sworn, say that it is the Trustee of the American Standard Insurance Company of Ohio, 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 American Standard Insurance Company of Ohio, 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 Line Number	2 Description	3 Admitted Asset Value	4 Par Value	5 Fair Value
------------------	------------------	------------------------------	----------------	-----------------

NONE

SCHEDULE B - DEPOSITS WITH UNITED STATES TRUSTEE

2.01	Cash			
2.02	Bonds			
2.03	Preferred Stock			
2.04	Common Stock			
2.05	Mortgage Loans on Real Estate			
2.06	Real Estate			
2.07	Short-Term Investment			
2.08	Other Invested Assets			
2.09	Miscellaneous Assets not included in any of the above categories			
2.98	Accrued Investment Income		XXX	XXX
2.99	Totals			

SCHEDULE C - DEPOSITS WITH UNITED STATES TRUSTEE

3.01	Cash			
3.02	Bonds			
3.03	Preferred Stock			
3.04	Common Stock			
3.05	Mortgage Loans on Real Estate			
3.06	Real Estate			
3.07	Short-Term Investment			
3.08	Other Invested Assets			
3.09	Miscellaneous Assets not included in any of the above categories			
3.98	Accrued Investment Income		XXX	XXX
3.99	Totals			

SCHEDULE D - DEPOSITS WITH UNITED STATES TRUSTEE

4.01	Cash			
4.02	Bonds			
4.03	Preferred Stock			
4.04	Common Stock			
4.05	Mortgage Loans on Real Estate			
4.06	Real Estate			
4.07	Short-Term Investment			
4.08	Other Invested Assets			
4.09	Miscellaneous Assets not included in any of the above categories			
4.98	Accrued Investment Income		XXX	XXX
4.99	Totals			

TRUSTEED SURPLUS STATEMENT (Continued)

LIABILITIES AND TRUSTEED SURPLUS	1 Current Year
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 deposits	
9. Agents' balances or uncollected premiums not more than	
10. Unpaid reinsurance premiums receivable, not exceeding	
10.1 Authorized companies	
10.2 Unauthorized companies	
11. Aggregate write-ins for other deductions from liabilities	
12. Total deductions (Line 7 through Line 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 (Line 0401 through Line 0403 plus Line 0498) (Line 4 above)	
1101.	
1102.	
1103.	
1198. Summary of remaining write-ins for Line 11 from overflow page	
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)	

NONE