



ANNUAL STATEMENT

For the Year Ended December 31, 2011

of the Condition and Affairs of the

Club Insurance Company

| | | |
|---|--|--|
| NAIC Group Code..... , (Current Period) (Prior Period) | NAIC Company Code..... 10974 | Employer's ID Number..... 31-1631404 |
| Organized under the Laws of Ohio | State of Domicile or Port of Entry Ohio | Country of Domicile US |
| Incorporated/Organized..... December 11, 1998 | Commenced Business..... April 29, 1999 | |
| Statutory Home Office | 90 East Wilson Bridge Rd..... Worthington OH 43085 (Street and Number) (City or Town, State and Zip Code) | |
| Main Administrative Office | 90 East Wilson Bridge Rd..... Worthington OH 43085 (Street and Number) (City or Town, State and Zip Code) | 614-431-7889 (Area Code) (Telephone Number) |
| Mail Address | 90 East Wilson Bridge Rd..... Worthington OH 43085 (Street and Number or P. O. Box) (City or Town, State and Zip Code) | |
| Primary Location of Books and Records | 90 East Wilson Bridge Rd..... Worthington OH 43085 (Street and Number) (City or Town, State and Zip Code) | 614-431-7889 (Area Code) (Telephone Number) |
| Internet Web Site Address | N/A | |
| Statutory Statement Contact | Ronald Jay Carr (Name) rcarr@aaaohio.com (E-Mail Address) | 614-431-7805 (Area Code) (Telephone Number) (Extension) 614-431-7852 (Fax Number) |

OFFICERS

| Name | Title | Name | Title |
|------------------------|-----------|------------------------|-----------|
| 1. Gregory Lowell Cady | President | 2. Thomas Wesley Keyes | Treasurer |
| 3. Thomas Wesley Keyes | Secretary | 4. | N/A |

OTHER

| DIRECTORS OR TRUSTEES | | | |
|-----------------------|------------------------|------------------------|----------------------|
| John Jeffery Bognaird | Charles Henderson Hire | John Edward McClain Jr | Thomas Joseph Eberly |
| Thomas Alan Dunlap | Sue Ann Fouche | Brian W Thomas | William Joseph Hafer |
| Mark Harry Shaw | | | |

State of..... Ohio
County of.... Franklin

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

| | | |
|------------------------------------|------------------------------------|------------------------------------|
| (Signature) Gregory Lowell Cady | (Signature) Thomas Wesley Keyes | (Signature) Thomas Wesley Keyes |
| 1. (Printed Name) President | 2. (Printed Name) Treasurer | 3. (Printed Name) Secretary |
| (Title) | (Title) | (Title) |

Subscribed and sworn to before me

This 24th day of February 2012

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 Data)

NAIC Group Code....0 NAIC Company Code....10974

BUSINESS IN GRAND TOTAL DURING THE YEAR

| 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 professional liability..... | | | | | | | | | | | | |
| 12. Earthquake..... | | | | | | | | | | | | |
| 13. Group accident and health (b)..... | 1,400,765 | 1,401,829 | | .775,830 | .266,378 | .133,083 | | .167,885 | | | 152,408 | .508 |
| 14. Credit A & H (group and individual)..... | | | | | | | | | | | | |
| 15.1 Collectively renewable A&H (b)..... | | | | | | | | | | | | |
| 15.2 Non-cancelable A & H (b)..... | | | | | | | | | | | | |
| 15.3 Guaranteed renewable A & H (b)..... | | | | | | | | | | | | |
| 15.4 Non-renewable for stated reasons only (b)..... | | | | | | | | | | | | |
| 15.5 Other accident only..... | | | | | | | | | | | | |
| 15.6 Medicare Title XVIII exempt from state taxes or fees..... | | | | | | | | | | | | |
| 15.7 All other A & H (b)..... | | | | | | | | | | | | |
| 15.8 Federal employees health benefits program premium (b)..... | | | | | | | | | | | | |
| 16. Workers' compensation..... | | | | | | | | | | | | |
| 17.1 Other liability-occurrence..... | | | | | | | | | | | | |
| 17.2 Other liability-claims-made..... | | | | | | | | | | | | |
| 17.3 Excess workers' compensation..... | | | | | | | | | | | | |
| 18. Products liability..... | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection)..... | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability..... | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection)..... | | | | | | | | | | | | |
| 19.4 Other commercial auto liability..... | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage..... | | | | | | | | | | | | |
| 21.2 Commercial auto physical damage..... | | | | | | | | | | | | |
| 22. Aircraft (all perils)..... | | | | | | | | | | | | |
| 23. Fidelity..... | | | | | | | | | | | | |
| 24. Surety..... | | | | | | | | | | | | |
| 26. Burglary and theft..... | | | | | | | | | | | | |
| 27. Boiler and machinery..... | | | | | | | | | | | | |
| 28. Credit..... | | | | | | | | | | | | |
| 30. Warranty..... | | | | | | | | | | | | |
| 34. Aggregate write-ins for other lines of business..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 35. TOTALS (a)..... | 1,400,765 | 1,401,829 | 0 | .775,830 | .266,878 | .129,583 | | .167,885 | | | 152,408 | .508 |

DETAILS OF WRITE-INS

| | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Finance and service charges not included in Lines 1 to 35.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)

NAIC Group Code....0 NAIC Company Code....10974

BUSINESS IN THE STATE OF **OHIO** DURING THE YEAR

* 1 0 9 7 4 2 0 1 1 4 3 0 3 6 1 0 0 *

| 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 professional liability..... | | | | | | | | | | | | |
| 12. Earthquake..... | | | | | | | | | | | | |
| 13. Group accident and health (b)..... | 1,400,765 | 1,401,829 | | .775,830 | .266,378 | .133,083 | | .167,885 | | | 152,408 | .508 |
| 14. Credit A & H (group and individual)..... | | | | | | | | | | | | |
| 15.1 Collectively renewable A&H (b)..... | | | | | | | | | | | | |
| 15.2 Non-cancelable A & H (b)..... | | | | | | | | | | | | |
| 15.3 Guaranteed renewable A & H (b)..... | | | | | | | | | | | | |
| 15.4 Non-renewable for stated reasons only (b)..... | | | | | | | | | | | | |
| 15.5 Other accident only..... | | | | | | | | | | | | |
| 15.6 Medicare Title XVIII exempt from state taxes or fees..... | | | | | | | | | | | | |
| 15.7 All other A & H (b)..... | | | | | | | | | | | | |
| 15.8 Federal employees health benefits program premium (b)..... | | | | | | | | | | | | |
| 16. Workers' compensation..... | | | | | | | | | | | | |
| 17.1 Other liability-occurrence..... | | | | | | | | | | | | |
| 17.2 Other liability-claims-made..... | | | | | | | | | | | | |
| 17.3 Excess workers' compensation..... | | | | | | | | | | | | |
| 18. Products liability..... | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection)..... | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability..... | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection)..... | | | | | | | | | | | | |
| 19.4 Other commercial auto liability..... | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage..... | | | | | | | | | | | | |
| 21.2 Commercial auto physical damage..... | | | | | | | | | | | | |
| 22. Aircraft (all perils)..... | | | | | | | | | | | | |
| 23. Fidelity..... | | | | | | | | | | | | |
| 24. Surety..... | | | | | | | | | | | | |
| 26. Burglary and theft..... | | | | | | | | | | | | |
| 27. Boiler and machinery..... | | | | | | | | | | | | |
| 28. Credit..... | | | | | | | | | | | | |
| 30. Warranty..... | | | | | | | | | | | | |
| 34. Aggregate write-ins for other lines of business..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 35. TOTALS (a)..... | 1,400,765 | 1,401,829 | 0 | .775,830 | .266,878 | .129,583 | | .167,885 | | | 152,408 | .508 |

DETAILS OF WRITE-INS

| | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above)..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Finance and service charges not included in Lines 1 to 35.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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 | | | 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 | 15 Amount of Assets Pledged or Collateral Held in Trust |
|------------------------------|------------------------------|------------------------|----------------------------------|-------------------------|---|--------------------------------------|---------------------|---|---|---------------------------|--|--------------------------------------|---|--|
| | | | | | 6 Paid Losses and Loss Adjustment Expenses | 7 Known Case Losses and LAE | 8 Cols. 6 + 7 | | | | | | | |

Other U. S. Unaffiliated Insurers:

| | | | | | | | | | | | | | | |
|--------------|--|----------------------------|---------|---|----|----|-----|----|----|----|----|----|----|----|
| 33-0382971.. | 37770..... | Western United Ins Co..... | IN..... | | | 32 | .32 | .5 | | | | | | |
| 0599999. | Other U. S. Unaffiliated Insurers..... | | | 0 | .0 | 32 | .32 | .5 | .0 | .0 | .0 | .0 | .0 | .0 |
| 9999999. | Totals..... | | | 0 | .0 | 32 | .32 | .5 | .0 | .0 | .0 | .0 | .0 | .0 |

Sch. F-Pt. 2
NONE

Sch. F-Pt. 3
NONE

Sch. F-Pt. 4
NONE

Sch. F-Pt. 5
NONE

Sch. F-Pt. 6
NONE

Sch. F-Pt. 7
NONE

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, Col. 3) | | | |
| 1. Cash and invested assets (Line 12)..... | 13,408,685 | | 13,408,685 |
| 2. Premiums and considerations (Line 15)..... | 141,900 | | 141,900 |
| 3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)..... | | | 0 |
| 4. Funds held by or deposited with reinsured companies (Line 16.2)..... | | | 0 |
| 5. Other assets..... | 81,376 | | 81,376 |
| 6. Net amount recoverable from reinsurers..... | | | 0 |
| 7. Protected cell assets (Line 27)..... | | | 0 |
| 8. Totals (Line 28)..... | 13,631,961 | 0 | 13,631,961 |
| LIABILITIES (Page 3) | | | |
| 9. Losses and loss adjustment expenses (Lines 1 through 3)..... | 200,223 | | 200,223 |
| 10. Taxes, expenses, and other obligations (Lines 4 through 8)..... | 34,635 | | 34,635 |
| 11. Unearned premiums (Line 9)..... | 729,875 | | 729,875 |
| 12. Advance premiums (Line 10)..... | | | 0 |
| 13. Dividends declared and unpaid (Line 11.1 and 11.2)..... | | | 0 |
| 14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)..... | | | 0 |
| 15. Funds held by company under reinsurance treaties (Line 13)..... | | | 0 |
| 16. Amounts withheld or retained by company for account of others (Line 14)..... | | | 0 |
| 17. Provision for reinsurance (Line 16)..... | | | 0 |
| 18. Other liabilities..... | 123,828 | | 123,828 |
| 19. Total liabilities excluding protected cell business (Line 26)..... | 1,088,561 | 0 | 1,088,561 |
| 20. Protected cell liabilities (Line 27)..... | | | 0 |
| 21. Surplus as regards policyholders (Line 37)..... | 12,543,400 | XXX | 12,543,400 |
| 22. Totals (Line 38)..... | 13,631,961 | 0 | 13,631,961 |

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No [X]

If yes, give full explanation:

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

| | Total | | Group Accident and Health | | Credit Accident and Health (Group and Individual) | | Collectively Renewable | | Other Individual Contracts | | | | | | | | | | |
|--|-------|-----------|---------------------------|-----------|---|-------|------------------------|-------|----------------------------|-------|--------|-------|--------|-------|--------|-------|---------|-------|-----|
| | | | 3 | 4 | 5 | 6 | | | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | | |
| | 1 | 2 | Amount | % | Amount | % | Amount | % | Amount | % | Amount | % | Amount | % | Amount | % | Amount | % | |
| PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS | | | | | | | | | | | | | | | | | | | |
| 1. Premiums written..... | | 1,400,765 | XXX | 1,400,765 | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... |  |
| 2. Premiums earned..... | | 1,401,829 | XXX | 1,401,829 | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... | XXX | ..... |  |
| 3. Incurred claims..... | | 129,583 | 9.2 | 133,083 | 9.5 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | (3,500) | 0.0 | |
| 4. Cost containment expenses..... | | 0 | 0.0 | 0.0 | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 5. Incurred claims and cost containment expenses (Lines 3 and 4)..... | | 129,583 | 9.2 | 133,083 | 9.5 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| 6. Increase in contract reserves..... | | 0 | 0.0 | 0.0 | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 7. Commissions (a)..... | | 152,408 | 10.9 | 152,408 | 10.9 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 8. Other general insurance expenses..... | | 741,235 | 52.9 | 741,235 | 52.9 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 9. Taxes, licenses and fees..... | | 508 | 0.0 | 508 | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 10. Total other expenses incurred..... | | .894,151 | 63.8 | .894,151 | 63.8 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| 11. Aggregate write-ins for deductions..... | | 0 | 0.0 | 0 | 0.0 | ..... | 0.0 | ..... | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | |
| 12. Gain from underwriting before dividends or refunds..... | | .378,095 | 27.0 | .374,595 | 26.7 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 3,500 | 0.0 | 0 | 0.0 |
| 13. Dividends or refunds..... | | 0 | 0.0 | 0.0 | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | 0.0 | |
| 14. Gain from underwriting after dividends or refunds..... | | .378,095 | 27.0 | .374,595 | 26.7 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 3,500 | 0.0 | 0 | 0.0 |

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DETAILS OF WRITE-INS

| | | | | | | | | | | | | | | | | | | |
|---|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|
| 1101. | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 |
| 1102. | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 |
| 1103. | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 | ..... | 0.0 |
| 1198. Summary of remaining write-ins for Line 11 from overflow page..... | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| 1199. Total (Lines 1101 thru 1103 plus 1198) (Line 11 above)..... | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |

(a) Includes \$.....0 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-Cancelable | 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: | | | | | | | | | |
| 1. Unearned premiums..... | 729,875 | | 729,875 | | | | | | |
| 2. Advance premiums..... | 0 | | | | | | | | |
| 3. Reserve for rate credits..... | 0 | | | | | | | | |
| 4. Total premium reserves, current year..... | 729,875 | | 729,875 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5. Total premium reserves, prior year..... | 730,939 | | 730,939 | | | | | | |
| 6. Increase in total premium reserves..... | (1,064) | | (1,064) | 0 | 0 | 0 | 0 | 0 | 0 |
| B. Contract Reserves: | | | | | | | | | |
| 1. Additional reserves (a)..... | 0 | | | | | | | | |
| 2. Reserve for future contingent benefits (deferred maternity and other similar benefits)..... | 0 | | | | | | | | |
| 3. Total contract reserves, current year..... | 0 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4. Total contract reserves, prior year..... | 0 | | | | | | | | |
| 5. Increase in contract reserves..... | 0 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| C. Claim Reserves and Liabilities: | | | | | | | | | |
| 1. Total current year..... | 167,885 | | 167,885 | | | | | | |
| 2. Total prior year..... | 305,180 | | 301,180 | | | | | 4,000 | |
| 3. Increase..... | (137,295) | | (133,295) | 0 | 0 | 0 | 0 | (4,000) | 0 |

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

| | | | | | | | | | |
|--|-----------|--|-----------|---|---|---|---|---------|---|
| 1. Claims Paid During the Year: | | | | | | | | | |
| 1.1 On claims incurred prior to current year..... | 91,672 | | 91,172 | | | | | 500 | |
| 1.2 On claims incurred during current year..... | 175,206 | | 175,206 | | | | | | |
| 2. Claim Reserves and Liabilities, December 31, Current Year: | | | | | | | | | |
| 2.1 On claims incurred prior to current year..... | 15,275 | | 15,275 | | | | | | |
| 2.2 On claims incurred during current year..... | 152,610 | | 152,610 | | | | | | |
| 3. Test: | | | | | | | | | |
| 3.1 Lines 1.1 and 2.1..... | 106,947 | | 106,447 | 0 | 0 | 0 | 0 | 500 | 0 |
| 3.2 Claim reserves and liabilities, December 31, prior year..... | 305,180 | | 301,180 | | | | | 4,000 | |
| 3.3 Line 3.1 minus Line 3.2..... | (198,233) | | (194,733) | 0 | 0 | 0 | 0 | (3,500) | 0 |

PART 4 - REINSURANCE

| | | | | | | | | | |
|--------------------------|---|--|--|--|--|--|--|--|--|
| A. Reinsurance Assumed: | | | | | | | | | |
| 1. Premiums written..... | 0 | | | | | | | | |
| 2. Premiums earned..... | 0 | | | | | | | | |
| 3. Incurred claims..... | 0 | | | | | | | | |
| 4. Commissions..... | 0 | | | | | | | | |
| B. Reinsurance Ceded: | | | | | | | | | |
| 1. Premiums written..... | 0 | | | | | | | | |
| 2. Premiums earned..... | 0 | | | | | | | | |
| 3. Incurred claims..... | 0 | | | | | | | | |
| 4. Commissions..... | 0 | | | | | | | | |

(a) Includes \$.....0 premium deficiency reserve.

NONE

SCHEDULE H - PART 5 - HEALTH CLAIMS

| | 1 Medical | 2 Dental | 3 Other | 4 Total |
|--|--------------|-------------|------------|------------|
| A. Direct: | | | | |
| 1. Incurred claims..... | | | 129,583 | 129,583 |
| 2. Beginning claim reserves and liabilities..... | | | 305,180 | 305,180 |
| 3. Ending claim reserves and liabilities..... | | | 167,885 | 167,885 |
| 4. Claims paid..... | 0 | 0 | 266,878 | 266,878 |
| B. Assumed Reinsurance: | | | | |
| 5. Incurred claims..... | | | 0 | 0 |
| 6. Beginning claim reserves and liabilities..... | | | 0 | 0 |
| 7. Ending claim reserves and liabilities..... | | | 0 | 0 |
| 8. Claims paid..... | 0 | 0 | 0 | 0 |
| C. Ceded Reinsurance: | | | | |
| 9. Incurred claims..... | | | 0 | 0 |
| 10. Beginning claim reserves and liabilities..... | | | 0 | 0 |
| 11. Ending claim reserves and liabilities..... | | | 0 | 0 |
| 12. Claims paid..... | 0 | 0 | 0 | 0 |
| D. Net: | | | | |
| 13. Incurred claims..... | 0 | 0 | 129,583 | 129,583 |
| 14. Beginning claim reserves and liabilities..... | 0 | 0 | 305,180 | 305,180 |
| 15. Ending claim reserves and liabilities..... | 0 | 0 | 167,885 | 167,885 |
| 16. Claims paid..... | 0 | 0 | 266,878 | 266,878 |
| E. Net Incurred Claims and Cost Containment Expenses: | | | | |
| 17. Incurred claims and cost containment expenses..... | | | 129,583 | 129,583 |
| 18. Beginning reserves and liabilities..... | | | 305,180 | 305,180 |
| 19. Ending reserves and liabilities..... | | | 167,885 | 167,885 |
| 20. Paid claims and cost containment expenses..... | 0 | 0 | 266,878 | 266,878 |

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$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 (Cols. 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..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 |XXX..... | |
| 2. 2002..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 3. 2003..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 4. 2004..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 5. 2005..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 6. 2006..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 7. 2007..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 8. 2008..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 9. 2009..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 10. 2010..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 11. 2011..... | | |0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... |  |
| 12. Totals.... |XXX..... |XXX..... |XXX..... |0 |0 |0 |0 |0 |0 |0 |0 |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 and 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 | Direct and Assumed | Ceded | | | |
| 1. Prior..... | | | | | | | | | | |0 | ..... | ..... |
| 2. 2002..... | | | | | | | | | | |0 | ..... | ..... |
| 3. 2003..... | | | | | | | | | | |0 | ..... | ..... |
| 4. 2004..... | | | | | | | | | | |0 | ..... | ..... |
| 5. 2005..... | | | | | | | | | | |0 | ..... | ..... |
| 6. 2006..... | | | | | | | | | | |0 | ..... | ..... |
| 7. 2007..... | | | | | | | | | | |0 | ..... | ..... |
| 8. 2008..... | | | | | | | | | | |0 | ..... | ..... |
| 9. 2009..... | | | | | | | | | | |0 | ..... | ..... |
| 10. 2010..... | | | | | | | | | | |0 | ..... | ..... |
| 11. 2011..... | | | | | | | | | | |0 | ..... | ..... |
| 12. Totals.... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |

| | 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. Prior..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | ..... | ..... | ....XXX..... |0 |0 |
| 2. 2002..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 3. 2003..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 4. 2004..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 5. 2005..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 6. 2006..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 7. 2007..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 8. 2008..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 9. 2009..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 10. 2010..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 11. 2011..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 12. Totals.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0 |0 |XXX..... |0 |0 |

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 (Cols. 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..... | | | | | | | | 0 | XXX..... | |
| 2. 2002..... | | | 0 | | | | | | | | 0 | | |
| 3. 2003..... | | | 0 | | | | | | | | 0 | | |
| 4. 2004..... | | | 0 | | | | | | | | 0 | | |
| 5. 2005..... | .45 | | .45 | .25 | | | | | | | .25 | | |
| 6. 2006..... | 133 | | 133 | 150 | | | | | | | 158 | | |
| 7. 2007..... | 277 | | 277 | 264 | | | | | | | 277 | | |
| 8. 2008..... | 425 | | 425 | 398 | | | | | | | 421 | | |
| 9. 2009..... | 264 | | 264 | 185 | .50 | | | | | | 142 | | |
| 10. 2010..... | .54 | | .54 | | | | | | | | 0 | | |
| 11. 2011..... | | | 0 | | | | | | | | 0 | | |
| 12. Totals.... | XXX..... | XXX..... | XXX..... | 1,022 | .50 | 0 | 0 | 51 | 0 | .27 | 1,023 | 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 and 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 | Direct and Assumed | Ceded | | | |
| 1. Prior..... | | | | | | | | | | | | 0 | |
| 2. 2002..... | | | | | | | | | | | | 0 | |
| 3. 2003..... | | | | | | | | | | | | 0 | |
| 4. 2004..... | | | | | | | | | | | | 0 | |
| 5. 2005..... | | | | | | | | | | | | 0 | |
| 6. 2006..... | | | | | | | | | | | | 0 | |
| 7. 2007..... | .2 | | | | | | | | | | | 2 | |
| 8. 2008..... | 11 | | | | | | | | | | | .11 | |
| 9. 2009..... | 19 | | | | | | | | | | | 19 | |
| 10. 2010..... | | | | | | | | | | | | 0 | |
| 11. 2011..... | | | | | | | | | | | | 0 | |
| 12. Totals.... | 32 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 32 | 0 |

| | 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. Prior..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | 0 | 0 |
| 2. 2002..... | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | | | 0 | 0 |
| 3. 2003..... | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | | | 0 | 0 |
| 4. 2004..... | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | | | 0 | 0 |
| 5. 2005..... | .25 | 0 | 25 | 55.6 | 0.0 | 55.6 | | | | 0 | 0 |
| 6. 2006..... | 158 | 0 | 158 | 118.8 | 0.0 | 118.8 | | | | 0 | 0 |
| 7. 2007..... | 279 | 0 | 279 | 100.7 | 0.0 | 100.7 | | | | 2 | 0 |
| 8. 2008..... | 432 | 0 | 432 | 101.6 | 0.0 | 101.6 | | | | 11 | 0 |
| 9. 2009..... | 211 | .50 | 161 | 79.9 | 0.0 | .61.0 | | | | 19 | 0 |
| 10. 2010..... | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | | | 0 | 0 |
| 11. 2011..... | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | | | 0 | 0 |
| 12. Totals.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 0 | 0 | XXX..... | 32 | 0 |

Sch. P-Pt. 1C
NONE

Sch. P-Pt. 1D
NONE

Sch. P-Pt. 1E
NONE

Sch. P-Pt. 1F-Sn. 1
NONE

Sch. P-Pt. 1F-Sn. 2
NONE

Sch. P-Pt. 1G
NONE

Sch. P-Pt. 1H-Sn. 1
NONE

Sch. P-Pt. 1H-Sn. 2
NONE

Sch. P-Pt. 1I
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 (Cols. 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..... |(2) | | | | | |(2) |(2) |XXX..... | |
| 2. 2010..... |47 | |47 | | | | | | | |0 | | |
| 3. 2011..... | | |0 | | | | | | | |0 | | |
| 4. Totals.... |XXX..... |XXX..... |XXX..... |(2) |0 |0 |0 |0 |0 |(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 and 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 | Direct and Assumed | Ceded | | | |
| 1. Prior.... | | | | | | | | | | | |0 | |
| 2. 2010... | | | | | | | | | | | |0 | |
| 3. 2011... | | | | | | | | | | | |0 | |
| 4. Totals... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 | |0 |0 |

| | 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 |
| | Direct and Assumed | Ceded | Net | Direct and Assumed | Ceded | Net | Loss | Loss Expense | | Losses Unpaid | Loss Expenses Unpaid |
| 1. Prior.. |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | |XXX..... |0 |0 |
| 2. 2010 |0 |0 |0 |0.0 |0.0 |0.0 | | | |0 |0 |
| 3. 2011 |0 |0 |0 |0.0 |0.0 |0.0 | | | |0 |0 |
| 4. Totals |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0 |0 |XXX..... |0 |0 |

SCHEDULE P - PART 1K - FIDELITY/SURETY
(\$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 (Cols. 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..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 |XXX..... |
| 2. 2010..... | ..... | ..... | .....0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 |XXX..... |
| 3. 2011..... | ..... | ..... | .....0 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 |XXX..... |
| 4. Totals.... |XXX..... |XXX..... |XXX..... |0 |0 |0 |0 |0 |0 |0 |0 |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 and 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 | Direct and Assumed | Ceded | | | |
| 1. Prior.... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... | ..... |
| 2. 2010... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... | ..... |
| 3. 2011... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .....0 | ..... | ..... |
| 4. Totals... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |

| | 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 |
| | Assumed | Net | Assumed | Ceded | Net | Loss | Expense | Percentage | Unpaid | Unpaid | Unpaid |
| 1. Prior.. |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | ..... | ..... | ....XXX..... |0 |0 |
| 2. 2010..... |0 |0 |0 |0.0 |0.0 |0.0 | ..... | ..... | ..... | .....0 |0 |
| 3. 2011..... |0 |0 |0 |0.0 |0.0 |0.0 | ..... | ..... | ..... | .....0 |0 |
| 4. Totals.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0 |0 |XXX..... |0 |0 |

SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)
(\$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 (Cols. 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..... |18 | | | | | | |18 |XXX..... |
| 2. 2010..... |1,423 | |1,423 |260 | | | | |44 | |304 |XXX..... |
| 3. 2011..... |1,402 | |1,402 |175 | | | | |118 | |293 |XXX..... |
| 4. Totals.... |XXX..... |XXX..... |XXX..... |453 |0 |0 |0 |162 |0 |0 |615 |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 and 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 | Direct and Assumed | Ceded | | | |
| 1. Prior.... | | | | | | | | | | | |0 | |
| 2. 2010... |7 | |8 | | | | | | | | |15 |15 |
| 3. 2011.... |92 | |61 | | | | | | | | |153 |125 |
| 4. Totals... |99 |0 |69 |0 |0 |0 |0 |0 |0 |0 | |168 |140 |

| | 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. Prior.. |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | |XXX..... |0 |0 |
| 2. 2010..... |319 |0 |319 |22.4 |0.0 |22.4 | | | |15 |0 |
| 3. 2011..... |446 |0 |446 |31.8 |0.0 |31.8 | | | |153 |0 |
| 4. Totals.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0 |0 |XXX..... |168 |0 |

Sch. P-Pt. 1M
NONE

Sch. P-Pt. 1N
NONE

Sch. P-Pt. 1O
NONE

Sch. P-Pt. 1P
NONE

Sch. P-Pt. 1R-Sn. 1
NONE

Sch. P-Pt. 1R-Sn. 2
NONE

Sch. P-Pt. 1S
NONE

Sch. P-Pt. 1T
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

| Years in Which Losses Were Incurred | Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | | Development | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------------|----------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | 11 One Year | 12 Two Year |
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

NONE**SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|------|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | 27 | 19 | 26 | 25 | 25 | 25 | 25 | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | 126 | 149 | 152 | 150 | 152 | 150 | (2) | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | 229 | 264 | 269 | 268 | 266 | (2) | (3) |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | 270 | 379 | 401 | 409 | 8 | 30 |
| 9. 2009.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 153 | 164 | 154 | (10) | 1 |
| 10. 2010.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |  |  | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | (6) | 28 |

NONE**SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

NONE**SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

NONE**SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL**

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

| Years in Which Losses Were Incurred | Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | | Development | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------------|----------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | 11 One Year | 12 Two Year |
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

| | | | | | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|
| 1. Prior.... | | | | | | | | | | | 0 | 0 |
| 2. 2002.... | | | | | | | | | | | 0 | 0 |
| 3. 2003.... | XXX | | | | | | | | | | 0 | 0 |
| 4. 2004.... | XXX | XXX | | | | | | | | | 0 | 0 |
| 5. 2005.... | XXX | XXX | XXX | | | | | | | | 0 | 0 |
| 6. 2006.... | XXX | XXX | XXX | XXX | | | | | | | 0 | 0 |
| 7. 2007.... | XXX | XXX | XXX | XXX | XXX | | | | | | 0 | 0 |
| 8. 2008.... | XXX | XXX | XXX | XXX | XXX | XXX | | | | | 0 | 0 |
| 9. 2009.... | XXX | | | | 0 | 0 |
| 10. 2010.... | XXX | | | 0 | XXX |
| 11. 2011.... | XXX | XXX | XXX |
| | | | | | | | | | | 12. Totals | 0 | 0 |

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

| Years in Which Losses Were Incurred | Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | | Development | |
|-------------------------------------|--|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|----------------|----------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | 11 One Year | 12 Two Year |
| 1. Prior..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0..... |0..... |
| 2. 2010.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |0..... |XXX..... |
| 3. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |
| | | | | | | | | | | | 4. Totals |0..... |

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|---------------|---------------|--------------|---------------|
| 1. Prior..... |XXX..... |12..... |(10)..... |(14)..... |(4)..... |(26)..... |
| 2. 2010.... |XXX..... |XXX..... |0..... |XXX..... |
| 3. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |
| | | | | | | | | | | | 4. Totals |(4)..... |(26)..... |

SCHEDULE P - PART 2K - FIDELITY/SURETY

| | | | | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------|------------|------------|------------|--------------|
| 1. Prior..... |XXX..... |0..... |0..... |0..... |0..... |0..... |
| 2. 2010.... |XXX..... |0..... |0..... |0..... |0..... |XXX..... |
| 3. 2011.... |XXX..... |0..... |0..... |0..... |0..... |XXX..... |
| | | | | | | | | | | | 4. Totals |0..... |0..... |

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

| | | | | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|----------------|----------------|----------------|
| 1. Prior..... |XXX..... |384..... |163..... |118..... |(45)..... |(266)..... | |
| 2. 2010.... |XXX..... |428..... |275..... |(153)..... |XXX..... | |
| 3. 2011.... |XXX..... |328..... |XXX..... |XXX..... |XXX..... | |
| | | | | | | | | | | | 4. Totals |(198)..... |(266)..... |

SCHEDULE P - PART 2M - INTERNATIONAL

| | | | | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| 1. Prior..... | | | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | | |
| 3. 2003.... |XXX..... | | | | | | | | | | | | |
| 4. 2004.... |XXX..... |XXX..... | | | | | | | | | | | |
| 5. 2005.... |XXX..... |XXX..... |XXX..... | | | | | | | | | | |
| 6. 2006.... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | | |
| 7. 2007.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | |
| 8. 2008.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 9. 2009.... |XXX..... | | | | | | |
| 10. 2010.... |XXX..... | | | |XXX..... |
| 11. 2011.... |XXX..... |
| | | | | | | | | | | | | 12. Totals |0..... |

Sch. P-Pt. 2N
NONE

Sch. P-Pt. 2O
NONE

Sch. P-Pt. 2P
NONE

Sch. P-Pt. 2R-Sn. 1
NONE

Sch. P-Pt. 2R-Sn. 2
NONE

Sch. P-Pt. 2S
NONE

Sch. P-Pt. 2T
NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

| Years in Which Losses Were Incurred | Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$'000 omitted) | | | | | | | | | | 11 Number of Claims Closed With Loss Payment | 12 Number of Claims Closed Without Loss Payment |
|-------------------------------------|--|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------|---|--|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | | |
| 1. Prior..... |000..... | | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... | | | | | | | | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 8. 2008..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | |
| 9. 2009..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | |
| 10. 2010..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 11. 2011..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | |

NONE**SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

| | | | | | | | | | | | | |
|---------------|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--|--|
| 1. Prior..... |000..... | | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... |14..... |17..... |24..... |25..... |25..... |25..... |25..... | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... |51..... |116..... |145..... |145..... |150..... |150..... | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |72..... |204..... |250..... |256..... |264..... | | |
| 8. 2008.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |135..... |317..... |364..... |398..... | | |
| 9. 2009.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |56..... |85..... |135..... | | |
| 10. 2010.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 11. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | |

NONE**SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

| | | | | | | | | | | | | |
|---------------|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--|--|--|
| 1. Prior..... |000..... | | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... | | | | | | | | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 8. 2008.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | |
| 9. 2009.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | |
| 10. 2010.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 11. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | |

NONE**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

| | | | | | | | | | | | | |
|---------------|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--|--|--|
| 1. Prior..... |000..... | | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... | | | | | | | | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 8. 2008.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | |
| 9. 2009.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | |
| 10. 2010.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 11. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | |

NONE**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

| | | | | | | | | | | | | |
|---------------|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--|--|--|
| 1. Prior..... |000..... | | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... | | | | | | | | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 8. 2008.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | |
| 9. 2009.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | |
| 10. 2010.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 11. 2011.... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | |

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

| Years in Which Losses Were Incurred | Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | | 11 Number of Claims Closed With Loss Payment | 12 Number of Claims Closed Without Loss Payment |
|-------------------------------------|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|--|---|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | | |
| 1. Prior.... |000 | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | |
| 3. 2003.... |XXX | | | | | | | | | | | |
| 4. 2004.... |XXX |XXX | | | | | | | | | | |
| 5. 2005.... |XXX |XXX |XXX | | | | | | | | | |
| 6. 2006.... |XXX |XXX |XXX |XXX | | | | | | | | |
| 7. 2007.... |XXX |XXX |XXX |XXX |XXX | | | | | | | |
| 8. 2008.... |XXX |XXX |XXX |XXX |XXX |XXX | | | | | | |
| 9. 2009.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | | |
| 10. 2010.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | |
| 11. 2011.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | |

NONE**SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

| | | | | | | | | | | | | |
|--------------|----------|---------|---------|---------|---------|---------|---------|---------|---------|--|--|--|
| 1. Prior.... |000 | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | |
| 3. 2003.... |XXX | | | | | | | | | | | |
| 4. 2004.... |XXX |XXX | | | | | | | | | | |
| 5. 2005.... |XXX |XXX |XXX | | | | | | | | | |
| 6. 2006.... |XXX |XXX |XXX |XXX | | | | | | | | |
| 7. 2007.... |XXX |XXX |XXX |XXX |XXX | | | | | | | |
| 8. 2008.... |XXX |XXX |XXX |XXX |XXX |XXX | | | | | | |
| 9. 2009.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | | |
| 10. 2010.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | |
| 11. 2011.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | |

NONE**SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

| | | | | | | | | | | | | |
|--------------|----------|---------|---------|---------|---------|---------|---------|---------|---------|--|--|--|
| 1. Prior.... |000 | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | |
| 3. 2003.... |XXX | | | | | | | | | | | |
| 4. 2004.... |XXX |XXX | | | | | | | | | | |
| 5. 2005.... |XXX |XXX |XXX | | | | | | | | | |
| 6. 2006.... |XXX |XXX |XXX |XXX | | | | | | | | |
| 7. 2007.... |XXX |XXX |XXX |XXX |XXX | | | | | | | |
| 8. 2008.... |XXX |XXX |XXX |XXX |XXX |XXX | | | | | | |
| 9. 2009.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | | |
| 10. 2010.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | |
| 11. 2011.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | |

NONE**SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

| | | | | | | | | | | | | |
|--------------|----------|---------|---------|---------|---------|---------|---------|---------|---------|--|--|--|
| 1. Prior.... |000 | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | |
| 3. 2003.... |XXX | | | | | | | | | | | |
| 4. 2004.... |XXX |XXX | | | | | | | | | | |
| 5. 2005.... |XXX |XXX |XXX | | | | | | | | | |
| 6. 2006.... |XXX |XXX |XXX |XXX | | | | | | | | |
| 7. 2007.... |XXX |XXX |XXX |XXX |XXX | | | | | | | |
| 8. 2008.... |XXX |XXX |XXX |XXX |XXX |XXX | | | | | | |
| 9. 2009.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | | |
| 10. 2010.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | |
| 11. 2011.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | |

NONE**SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

| | | | | | | | | | | | | |
|--------------|----------|---------|---------|---------|---------|---------|---------|---------|---------|--|--|--|
| 1. Prior.... |000 | | | | | | | | | | | |
| 2. 2002.... | | | | | | | | | | | | |
| 3. 2003.... |XXX | | | | | | | | | | | |
| 4. 2004.... |XXX |XXX | | | | | | | | | | |
| 5. 2005.... |XXX |XXX |XXX | | | | | | | | | |
| 6. 2006.... |XXX |XXX |XXX |XXX | | | | | | | | |
| 7. 2007.... |XXX |XXX |XXX |XXX |XXX | | | | | | | |
| 8. 2008.... |XXX |XXX |XXX |XXX |XXX |XXX | | | | | | |
| 9. 2009.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | | |
| 10. 2010.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | | |
| 11. 2011.... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | | | |

**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**

| Years in Which Losses Were Incurred | Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | | 11 Number of Claims Closed With Loss Payment | 12 Number of Claims Closed Without Loss Payment |
|--|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|---|--|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 | | |
| 1. Prior.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 000..... | ..... | ..... | XXX..... | XXX..... |
| 2. 2010.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | XXX..... | XXX..... |
| 3. 2011.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-------|-------|
| 1. Prior.... | XXX..... | 000..... | (12) | (14) | | |
| 2. 2010.... | XXX..... | | | | |
| 3. 2011.... | XXX..... | | |

SCHEDULE P - PART 3K - FIDELITY/SURETY

| | | | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior.... | XXX..... | 000..... | | | XXX..... | XXX..... |
| 2. 2010.... | XXX..... | | | XXX..... | XXX..... |
| 3. 2011.... | XXX..... |

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

| | | | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior.... | XXX..... | 000..... | 100..... | 118..... | XXX..... | XXX..... |
| 2. 2010.... | XXX..... | 186..... | 260..... | XXX..... | XXX..... |
| 3. 2011.... | XXX..... | 175..... | XXX..... | XXX..... |

SCHEDULE P - PART 3M - INTERNATIONAL

| | | | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior.... | 000..... | | | | | | | | | | XXX..... | XXX..... |
| 2. 2002.... | | | | | | | | | | | XXX..... | XXX..... |
| 3. 2003.... | XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 4. 2004.... | XXX..... | XXX..... | | | | | | | | | XXX..... | XXX..... |
| 5. 2005.... | XXX..... | XXX..... | XXX..... | | | | | | | | XXX..... | XXX..... |
| 6. 2006.... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | | XXX..... | XXX..... |
| 7. 2007.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | XXX..... | XXX..... |
| 8. 2008.... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | XXX..... | XXX..... |
| 9. 2009.... | XXX..... | | | | XXX..... | XXX..... |
| 10. 2010.... | XXX..... | | XXX..... | XXX..... |
| 11. 2011.... | XXX..... |

Sch. P-Pt. 3N
NONE

Sch. P-Pt. 3O
NONE

Sch. P-Pt. 3P
NONE

Sch. P-Pt. 3R-Sn. 1
NONE

Sch. P-Pt. 3R-Sn. 2
NONE

Sch. P-Pt. 3S
NONE

Sch. P-Pt. 3T
NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

| Years in Which Losses Were Incurred | Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | |

NONE**SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | 45 | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | (17) | | | |
| 9. 2009..... | XXX..... | (3) | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE**SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

| Years in Which Losses Were Incurred | Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | |

NONE**SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE**SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE**SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE**SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | | | |
| 10. 2010..... | XXX..... | | |
| 11. 2011..... | XXX..... | |

NONE

**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**

| Years in Which Losses Were Incurred | Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | |
|---|---|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |
| 2. 2010..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |
| 3. 2011..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|-------|
| 1. Prior..... |XXX..... |(1)..... | |
| 2. 2010..... |XXX..... | |
| 3. 2011..... |XXX..... | |

SCHEDULE P - PART 4K - FIDELITY/SURETY

| | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|-------|
| 1. Prior..... |XXX..... | | |
| 2. 2010..... |XXX..... | |
| 3. 2011..... |XXX..... | |

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

| | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|-------------|
| 1. Prior..... |XXX..... |223..... |26..... | |
| 2. 2010..... |XXX..... |174..... |8..... |
| 3. 2011..... |XXX..... |61..... |

SCHEDULE P - PART 4M - INTERNATIONAL

| | | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|-------|
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... |XXX..... | | | | | | | | | |
| 4. 2004..... |XXX..... |XXX..... | | | | | | | | |
| 5. 2005..... |XXX..... |XXX..... |XXX..... | | | | | | | |
| 6. 2006..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | | |
| 7. 2007..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | | |
| 8. 2008..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... |XXX..... | | | | |
| 9. 2009..... |XXX..... | | | |
| 10. 2010..... |XXX..... | | |
| 11. 2011..... |XXX..... | |

Sch. P-Pt. 4N
NONE

Sch. P-Pt. 4O
NONE

Sch. P-Pt. 4P
NONE

Sch. P-Pt. 4R-Sn. 1
NONE

Sch. P-Pt. 4R-Sn. 2
NONE

Sch. P-Pt. 4S
NONE

Sch. P-Pt. 4T
NONE

Sch. P-Pt. 5A-Sn. 1
NONE

Sch. P-Pt. 5A-Sn. 2
NONE

Sch. P-Pt. 5A-Sn. 3
NONE

Sch. P-Pt. 5B-Sn. 1
NONE

Sch. P-Pt. 5B-Sn. 2
NONE

Sch. P-Pt. 5B-Sn. 3
NONE

Sch. P-Pt. 5C-Sn. 1
NONE

Sch. P-Pt. 5C-Sn. 2
NONE

Sch. P-Pt. 5C-Sn. 3
NONE

Sch. P-Pt. 5D-Sn. 1
NONE

Sch. P-Pt. 5D-Sn. 2
NONE

Sch. P-Pt. 5D-Sn. 3
NONE

Sch. P-Pt. 5E-Sn. 1
NONE

Sch. P-Pt. 5E-Sn. 2
NONE

Sch. P-Pt. 5E-Sn. 3
NONE

Sch. P-Pt. 5F-Sn. 1A
NONE

Sch. P-Pt. 5F-Sn. 2A
NONE

Sch. P-Pt. 5F-Sn. 3A
NONE

Sch. P-Pt. 5F-Sn. 1B
NONE

Sch. P-Pt. 5F-Sn. 2B
NONE

Sch. P-Pt. 5F-Sn. 3B
NONE

Sch. P-Pt. 5H-Sn. 1A
NONE

Sch. P-Pt. 5H-Sn. 2A
NONE

Sch. P-Pt. 5H-Sn. 3A
NONE

Sch. P-Pt. 5H-Sn. 1B
NONE

Sch. P-Pt. 5H-Sn. 2B
NONE

Sch. P-Pt. 5H-Sn. 3B
NONE

Sch. P-Pt. 5R-Sn. 1A
NONE

Sch. P-Pt. 5R-Sn. 2A
NONE

Sch. P-Pt. 5R-Sn. 3A
NONE

Sch. P-Pt. 5R-Sn. 1B
NONE

Sch. P-Pt. 5R-Sn. 2B
NONE

Sch. P-Pt. 5R-Sn. 3B
NONE

Sch. P-Pt. 5T-Sn. 1
NONE

Sch. P-Pt. 5T-Sn. 2
NONE

Sch. P-Pt. 5T-Sn. 3
NONE

Sch. P-Pt. 6C-Sn. 1
NONE

Sch. P-Pt. 6C-Sn. 2
NONE

Sch. P-Pt. 6D-Sn. 1
NONE

Sch. P-Pt. 6D-Sn. 2
NONE

Sch. P-Pt. 6E-Sn. 1
NONE

Sch. P-Pt. 6E-Sn. 2
NONE

Sch. P-Pt. 6H-Sn. 1A
NONE

Sch. P-Pt. 6H-Sn. 2A
NONE

Sch. P-Pt. 6H-Sn. 1B
NONE

Sch. P-Pt. 6H-Sn. 2B
NONE

Sch. P-Pt. 6M-Sn. 1
NONE

Sch. P-Pt. 6M-Sn. 2
NONE

Sch. P-Pt. 6N-Sn. 1
NONE

Sch. P-Pt. 6N-Sn. 2
NONE

Sch. P-Pt. 6O-Sn. 1
NONE

Sch. P-Pt. 6O-Sn. 2
NONE

Sch. P-Pt. 6R-Sn. 1A
NONE

Sch. P-Pt. 6R-Sn. 2A
NONE

Sch. P-Pt. 6R-Sn. 1B
NONE

Sch. P-Pt. 6R-Sn. 2B
NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

| Schedule P - Part 1 | 1 Total Net Losses and Expenses Unpaid | 2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts | 3 Loss Sensitive as Percentage of Total | 4 Total Net Premiums Written | 5 Net Premiums Written on Loss Sensitive Contracts | 6 Loss Sensitive as Percentage of Total |
|--|---|---|--|---------------------------------|---|--|
| 1. Homeowners/farmowners..... | | | 0.0 | | | 0.0 |
| 2. Private passenger auto liability/medical..... | 32 | | 0.0 | | | 0.0 |
| 3. Commercial auto/truck liability/medical..... | | | 0.0 | | | 0.0 |
| 4. Workers' compensation..... | | | 0.0 | | | 0.0 |
| 5. Commercial multiple peril..... | | | 0.0 | | | 0.0 |
| 6. Medical professional liability - occurrence..... | | | 0.0 | | | 0.0 |
| 7. Medical professional liability - claims-made..... | | | 0.0 | | | 0.0 |
| 8. Special liability..... | | | 0.0 | | | 0.0 |
| 9. Other liability - occurrence..... | | | 0.0 | | | 0.0 |
| 10. Other liability - claims-made..... | | | 0.0 | | | 0.0 |
| 11. Special property..... | | | 0.0 | | | 0.0 |
| 12. Auto physical damage..... | | | 0.0 | | | 0.0 |
| 13. Fidelity/surety..... | | | 0.0 | | | 0.0 |
| 14. Other..... | 168 | | 0.0 | 1,401 | | 0.0 |
| 15. International..... | | | 0.0 | | | 0.0 |
| 16. Reinsurance - nonproportional assumed property..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |
| 17. Reinsurance - nonproportional assumed liability..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |
| 18. Reinsurance - nonproportional assumed financial lines..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |
| 19. Products liability - occurrence..... | | | 0.0 | | | 0.0 |
| 20. Products liability - claims-made..... | | | 0.0 | | | 0.0 |
| 21. Financial guaranty/mortgage guaranty..... | | | 0.0 | | | 0.0 |
| 22. Warranty..... | | | 0.0 | | | 0.0 |
| 23. Totals..... | 200 | 0 | 0.0 | 1,401 | 0 | 0.0 |

SECTION 2

| Years in Which Policies Were Issued | Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | |

SECTION 3

| Years in Which Policies Were Issued | Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX..... | | | | | | | | | |
| 4. 2004..... | XXX..... | XXX..... | | | | | | | | |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | |

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)**SECTION 4**

| Years in Which Policies Were Issued | Net Earned Premiums Reported at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |

NONE**SECTION 5**

| Years in Which Policies Were Issued | Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | ..... | ..... |
| 9. 2009..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... |
| 10. 2010..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... |
| 11. 2011..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

| Schedule P - Part 1 | 1 Total Net Losses and Expenses Unpaid | 2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts | 3 Loss Sensitive as Percentage of Total | 4 Total Net Premiums Written | 5 Net Premiums Written on Loss Sensitive Contracts | 6 Loss Sensitive as Percentage of Total |
|--|---|---|--|---------------------------------|---|--|
| 1. Homeowners/farmowners..... | | |0.0 | | |0.0 |
| 2. Private passenger auto liability/medical..... | 32 | |0.0 | | |0.0 |
| 3. Commercial auto/truck liability/medical..... | | |0.0 | | |0.0 |
| 4. Workers' compensation..... | | |0.0 | | |0.0 |
| 5. Commercial multiple peril..... | | |0.0 | | |0.0 |
| 6. Medical professional liability - occurrence..... | | |0.0 | | |0.0 |
| 7. Medical professional liability - claims-made..... | | |0.0 | | |0.0 |
| 8. Special liability..... | | |0.0 | | |0.0 |
| 9. Other liability - occurrence..... | | |0.0 | | |0.0 |
| 10. Other liability - claims-made..... | | |0.0 | | |0.0 |
| 11. Special property..... | | |0.0 | | |0.0 |
| 12. Auto physical damage..... | | |0.0 | | |0.0 |
| 13. Fidelity/surety..... | | |0.0 | | |0.0 |
| 14. Other..... | 168 | |0.0 | 1,401 | |0.0 |
| 15. International..... | | |0.0 | | |0.0 |
| 16. Reinsurance - nonproportional assumed property..... | | |0.0 | | |0.0 |
| 17. Reinsurance - nonproportional assumed liability..... | | |0.0 | | |0.0 |
| 18. Reinsurance - nonproportional assumed financial lines..... | | |0.0 | | |0.0 |
| 19. Products liability - occurrence..... | | |0.0 | | |0.0 |
| 20. Products liability - claims-made..... | | |0.0 | | |0.0 |
| 21. Financial guaranty/mortgage guaranty..... | | |0.0 | | |0.0 |
| 22. Warranty..... | | |0.0 | | |0.0 |
| 23. Totals | 200 | 0 |0.0 | 1,401 | 0 |0.0 |

SECTION 2

| Years in Which Policies Were Issued | Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX | | | | | | | | | |
| 4. 2004..... | XXX | XXX | | | | | | | | |
| 5. 2005..... | XXX | XXX | XXX | | | | | | | |
| 6. 2006..... | XXX | XXX | XXX | XXX | | | | | | |
| 7. 2007..... | XXX | XXX | XXX | XXX | XXX | | | | | |
| 8. 2008..... | XXX | XXX | XXX | XXX | XXX | XXX | | | | |
| 9. 2009..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 10. 2010..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| 11. 2011..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |

SECTION 3

| Years in Which Policies Were Issued | Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | | | | | | | | | | |
| 2. 2002..... | | | | | | | | | | |
| 3. 2003..... | XXX | | | | | | | | | |
| 4. 2004..... | XXX | XXX | | | | | | | | |
| 5. 2005..... | XXX | XXX | XXX | | | | | | | |
| 6. 2006..... | XXX | XXX | XXX | XXX | | | | | | |
| 7. 2007..... | XXX | XXX | XXX | XXX | XXX | | | | | |
| 8. 2008..... | XXX | XXX | XXX | XXX | XXX | XXX | | | | |
| 9. 2009..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 10. 2010..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| 11. 2011..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)**SECTION 4**

| Years in Which Policies Were Issued | Net Earned Premiums Reported At Year End (\$000 Omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... |
| 9. 2009..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... |
| 10. 2010..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... |
| 11. 2011..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |

SECTION 5

| Years in Which Policies Were Issued | Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... |
| 9. 2009..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... |
| 10. 2010..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... |
| 11. 2011..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |

SECTION 6

| Years in Which Policies Were Issued | Incurred Adjustable Commissions Reported At Year End (\$000 Omitted) | | | | | | | | | |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... |
| 9. 2009..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... |
| 10. 2010..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... |
| 11. 2011..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |

SECTION 7

| Years in Which Policies Were Issued | Reserves For Commission Adjustments At Year End (\$000 Omitted) | | | | | | | | | |
|-------------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2002 | 2 2003 | 3 2004 | 4 2005 | 5 2006 | 6 2007 | 7 2008 | 8 2009 | 9 2010 | 10 2011 |
| 1. Prior..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2002..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. 2003..... |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2004..... |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. 2005..... |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2006..... |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... | ..... |
| 7. 2007..... |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... | ..... | ..... |
| 8. 2008..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... | ..... |
| 9. 2009..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... | ..... |
| 10. 2010..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX | ..... |
| 11. 2011..... |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |XXX |

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not be included.

1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.

1.2 What is the total amount of the reserve for that provision (DDR reserve) as reported, explicitly or not, elsewhere in this statement (in dollars)?

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve?

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

| Years in Which Premiums Were Earned and Losses Were Incurred | DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid | |
|--|---|-----------------------------|
| | 1 Section 1: Occurrence | 2 Section 2: Claims-Made |
| 1.601 Prior..... | | |
| 1.602 2002..... | | |
| 1.603 2003..... | | |
| 1.604 2004..... | | |
| 1.605 2005..... | | |
| 1.606 2006..... | | |
| 1.607 2007..... | | |
| 1.608 2008..... | | |
| 1.609 2009..... | | |
| 1.610 2010..... | | |
| 1.611 2011..... | | |
| 1.612 Totals..... | 0 | 0 |

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 that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure 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: (in thousands of dollars)
5.1 Fidelity
5.2 Surety

6. Claim count information is reported per claim or per claimant. (Indicate which). If not the same in all years, explain in Interrogatory 7. 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 that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 An extended statement may be attached.

SCHEDULE T - PART 2**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

| States, Etc. | Direct Business Only | | | | | |
|-----------------------------------|--|---|---|--|--------------------------------|-------------|
| | 1 Life (Group and Individual) | 2 Annuities (Group and Individual) | 3 Disability Income (Group and Individual) | 4 Long-Term Care (Group and Individual) | 5 Deposit-Type Contracts | 6 Totals |
| 1. Alabama..... | AL | | | | | 0 |
| 2. Alaska..... | AK | | | | | 0 |
| 3. Arizona..... | AZ | | | | | 0 |
| 4. Arkansas..... | AR | | | | | 0 |
| 5. California..... | CA | | | | | 0 |
| 6. Colorado..... | CO | | | | | 0 |
| 7. Connecticut..... | CT | | | | | 0 |
| 8. Delaware..... | DE | | | | | 0 |
| 9. District of Columbia..... | DC | | | | | 0 |
| 10. Florida..... | FL | | | | | 0 |
| 11. Georgia..... | GA | | | | | 0 |
| 12. Hawaii..... | HI | | | | | 0 |
| 13. Idaho..... | ID | | | | | 0 |
| 14. Illinois..... | IL | | | | | 0 |
| 15. Indiana..... | IN | | | | | 0 |
| 16. Iowa..... | IA | | | | | 0 |
| 17. Kansas..... | KS | | | | | 0 |
| 18. Kentucky..... | KY | | | | | 0 |
| 19. Louisiana..... | LA | | | | | 0 |
| 20. Maine..... | ME | | | | | 0 |
| 21. Maryland..... | MD | | | | | 0 |
| 22. Massachusetts..... | MA | | | | | 0 |
| 23. Michigan..... | MI | | | | | 0 |
| 24. Minnesota..... | MN | | | | | 0 |
| 25. Mississippi..... | MS | | | | | 0 |
| 26. Missouri..... | MO | | | | | 0 |
| 27. Montana..... | MT | | | | | 0 |
| 28. Nebraska..... | NE | | | | | 0 |
| 29. Nevada..... | NV | | | | | 0 |
| 30. New Hampshire..... | NH | | | | | 0 |
| 31. New Jersey..... | NJ | | | | | 0 |
| 32. New Mexico..... | NM | | | | | 0 |
| 33. New York..... | NY | | | | | 0 |
| 34. North Carolina..... | NC | | | | | 0 |
| 35. North Dakota..... | ND | | | | | 0 |
| 36. Ohio..... | OH | | | | | 0 |
| 37. Oklahoma..... | OK | | | | | 0 |
| 38. Oregon..... | OR | | | | | 0 |
| 39. Pennsylvania..... | PA | | | | | 0 |
| 40. Rhode Island..... | RI | | | | | 0 |
| 41. South Carolina..... | SC | | | | | 0 |
| 42. South Dakota..... | SD | | | | | 0 |
| 43. Tennessee..... | TN | | | | | 0 |
| 44. Texas..... | TX | | | | | 0 |
| 45. Utah..... | UT | | | | | 0 |
| 46. Vermont..... | VT | | | | | 0 |
| 47. Virginia..... | VA | | | | | 0 |
| 48. Washington..... | WA | | | | | 0 |
| 49. West Virginia..... | WV | | | | | 0 |
| 50. Wisconsin..... | WI | | | | | 0 |
| 51. Wyoming..... | WY | | | | | 0 |
| 52. American Samoa..... | AS | | | | | 0 |
| 53. Guam..... | GU | | | | | 0 |
| 54. Puerto Rico..... | PR | | | | | 0 |
| 55. US Virgin Islands..... | VI | | | | | 0 |
| 56. Northern Mariana Islands..... | MP | | | | | 0 |
| 57. Canada..... | CN | | | | | 0 |
| 58. Aggregate Other Alien..... | OT | | | | | 0 |
| 59. Totals..... | | 0 | 0 | 0 | 0 | 0 |

NONE

SCHEDULE Y**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

| 1 Group Code | 2 Group Name | 3 NAIC Company Code | 4 Federal ID Number | 5 Federal RSSD | 6 CIK | 7 Name of Securities Exchange if Publicly Traded (U.S. or International) | 8 Names of Parent, Subsidiaries or Affiliates | 9 Domiciliary Location | 10 Relationship to Reporting Entity | 11 Directly Controlled by (Name of Entity/Person) | 12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other) | 13 If Control is Ownership Provide Percentage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 * |
|--------------------|--------------------|------------------------------|------------------------------|----------------------|----------|---|--|------------------------------|--|---|--|---|---|---------|
|--------------------|--------------------|------------------------------|------------------------------|----------------------|----------|---|--|------------------------------|--|---|--|---|---|---------|

Members

| | | | | | | | | | | | | | | |
|-------|-------|-------|------------|-------|-------|-------|---------------------------------------|---------|----------|-------------------------------|----------------|------------|-------------------------------|-------|
| ..... | ..... | ..... | 31-0924026 | ..... | ..... | ..... | The Ohio Automobile Club..... | OH..... | UDP..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 31-6032293 | ..... | ..... | ..... | Automobile Club Insurance Agency..... | OH..... | IA..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 20-4597886 | ..... | ..... | ..... | Auto Club Renewals..... | OH..... | NIA..... | The Ohio Automobile Club..... | Ownership..... |60.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 31-1696225 | ..... | ..... | ..... | Club Holding Corporation..... | OH..... | UDP..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | 10974 | ..... | 31-1631404 | ..... | ..... | ..... | Club Insurance Company.. | OH..... | ..... | Club Holding Corporation..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |

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

| 1 NAIC Company Code | 2 Federal ID Number | 3 Names of Insurers and Parent, Subsidiaries or Affiliates | 4 Shareholder Dividends | 5 Capital Contributions | 6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | 7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | 8 Management Agreements and Service Contracts | 9 Income/ (Disbursements) Incurred under Reinsurance Agreements | 10 * | 11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | 12 | 13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability) |
|------------------------------|------------------------------|---|-------------------------------|-------------------------------|--|--|--|--|---------|--|----|---|
|------------------------------|------------------------------|---|-------------------------------|-------------------------------|--|--|--|--|---------|--|----|---|

Affiliated Transactions

| | | | | | | | | | | | | | |
|------------|---------------------|-------------------------------|----------------|--------|--------|--------|--------|----------------|-------|--------|--------|------------------|--------|
| ..... | 31-0924026..... | The Ohio Automobile Club..... |700,000 | ..... | ..... | ..... | ..... | .....400,000 | ..... | ..... | ..... | .....1,100,000 | ..... |
| 10974..... | 31-1631404..... | Club Insurance Company..... |(700,000) | ..... | ..... | ..... | ..... | .....(400,000) | ..... | ..... | ..... | .....(1,100,000) | ..... |
| 9999999. | Control Totals..... | |0 |0 |0 |0 |0 |0 | XXX |0 |0 |0 |0 |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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

1. Will an actuarial opinion be filed by March 1?
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?
3. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?
4. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?

| Responses |
|-----------|
| YES |
| YES |
| YES |
| YES |

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?
6. Will the Management's Discussion and Analysis be filed by April 1?
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?

| |
|-----|
| YES |
| YES |
| YES |

MAY FILING

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

NO

JUNE FILING

9. Will an audited financial report be filed by June 1?
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?

| |
|-----|
| YES |
| YES |

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?

YES

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

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?
24. Will the Director and Officer Supplement be filed with the state of domicile and the NAIC by March 1?
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?

| |
|-----|
| YES |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |

APRIL FILING

28. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?
29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?

| |
|-----|
| NO |
| NO |
| YES |
| YES |
| YES |

AUGUST FILING

33. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

EXPLANATIONS:**BAR CODE:**

1.

2.

3.

4.

5.

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7.

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14.

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27.

28.

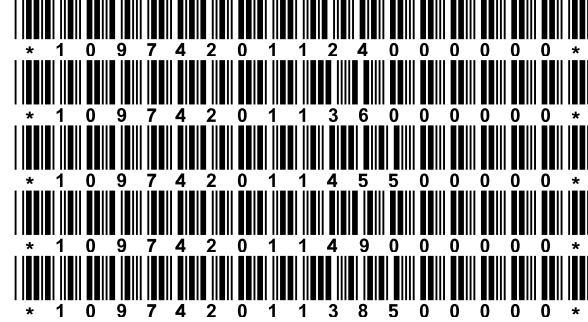
29.

30.

31.

32.

33.



**Overflow Page
NONE**

**Overflow Page
NONE**



**REINSURANCE SUMMARY SUPPLEMENTAL FILING
FOR GENERAL INTERROGATORY 9 (PART 2)**

FOR THE YEAR ENDED DECEMBER 31, 2011

To Be Filed by March 1

NAIC Group Code: 0

NAIC Company Code: 10974....

| | (A) Financial Impact | | |
|---|----------------------|--|---|
| | 1 As Reported | 2 Interrogatory 9 Reinsurance Effect | 3 Restated Without Interrogatory 9 Reinsurance |
| A01. Assets..... | 13,631,961 | | 13,631,961 |
| A02. Liabilities..... | 1,088,561 | | 1,088,561 |
| A03. Surplus as regards to policyholders..... | 12,543,400 | | 12,543,400 |
| A04. Income before taxes..... | 1,035,468 | | 1,035,468 |

B. Summary of Reinsurance Contract Terms

C. Management's Objectives

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For the Year Ended December 31, 2011

NAIC Group Code.....0

Company Name: Club Insurance Company

NAIC Company Code.....10974

If the reporting entity writes any director and officer (D&O) business, please provide the following:

| 1. Monoline Policies | Direct Premiums | | Direct Losses | | Direct Defense and Cost Containment | | Percentage | |
|----------------------|-----------------|----------|---------------|------------|-------------------------------------|------------|---------------|--------------|
| | 1 Written | 2 Earned | 3 Paid | 4 Incurred | 5 Paid | 6 Incurred | 7 Claims Made | 8 Occurrence |
| | | | | | | | | |

2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes No [X]

2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes No [X]

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for the D&O liability coverage in CMP packaged policies:

2.31 Amount quantified:

2.32 Amount estimated using reasonable assumptions:

2.4 If the answer to question 2.1 is yes, please provide the following:

| Direct Losses | | Direct Defense and Cost Containment | | Percentage | |
|---------------|---|-------------------------------------|---|------------|------------|
| 1 | 2 Paid + Change in Case Reserves | 3 | 4 Paid + Change in Case Reserves | 5 | 6 |
|0 |0 |0 |0 |0.000 |0.000 |

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SCHEDULE F - PART 5

Provision for Unauthorized 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 Recoverable all Items Schedule F, Part 3, Col. 15 | 6 Funds Held By Company Under Reinsurance Treaties | 7 Letters of Credit | Letter of Credit Issuing or Confirming Bank (a) | | | 11 Ceded Balances Payable | 12 Miscellaneous Balances | 13 Other Allowed Offset Items | 14 Cols. 6 + 7 + 11 + 12 + 13 but not in Excess of Col. 5 | 15 Subtotal Col. 5 minus Col. 14 | 16 Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute | 17 20% of Amount in Col. 16 | 18 Smaller of Col. 14 or Col. 17 | 19 Smaller of Col. 14 or 20% of Amount in Dispute Included in Col. 5 | 20 Total Provision for Unauthorized Reinsurance Smaller of Col. 5 or Cols. 15 + 18 + 19 |
|------------------------------|------------------------------|------------------------|----------------------------------|---|---|------------------------------|--|-------------------------------------|-----------------|------------------------------------|---------------------------------|---|--|---|--|--------------------------------------|---|---|--|
| | | | | | | | 8 American Bankers Association (ABA) Routing Number | 9 Letter of Credit Code | 10 Bank Name | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

1. Amounts in dispute totaling \$.....0 are included in Column 5.
2. Amounts in dispute totaling \$.....0 are excluded from Column 16.

NONE

SCHEDULE Y**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

| 1 Group Code | 2 Group Name | 3 NAIC Company Code | 4 Federal ID Number | 5 Federal RSSD | 6 CIK | 7 Name of Securities Exchange if Publicly Traded (U.S. or International) | 8 Names of Parent, Subsidiaries or Affiliates | 9 Domiciliary Location | 10 Relationship to Reporting Entity | 11 Directly Controlled by (Name of Entity/Person) | 12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other) | 13 If Control is Ownership Provide Percentage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 * |
|--------------------|--------------------|------------------------------|------------------------------|----------------------|----------|---|--|------------------------------|--|---|--|---|---|---------|
|--------------------|--------------------|------------------------------|------------------------------|----------------------|----------|---|--|------------------------------|--|---|--|---|---|---------|

Members

| | | | | | | | | | | | | | | |
|-------|-------|-------|------------|-------|-------|-------|---------------------------------------|---------|----------|-------------------------------|----------------|------------|-------------------------------|-------|
| ..... | ..... | ..... | 31-0924026 | ..... | ..... | ..... | The Ohio Automobile Club..... | OH..... | UDP..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 31-6032293 | ..... | ..... | ..... | Automobile Club Insurance Agency..... | OH..... | IA..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 20-4597886 | ..... | ..... | ..... | Auto Club Renewals..... | OH..... | NIA..... | The Ohio Automobile Club..... | Ownership..... |60.00 | The Ohio Automobile Club..... | ..... |
| ..... | ..... | ..... | 31-1696225 | ..... | ..... | ..... | Club Holding Corporation..... | OH..... | UDP..... | The Ohio Automobile Club..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |
| ..... | 10974 | ..... | 31-1631404 | ..... | ..... | ..... | Club Insurance Company.. | OH..... | ..... | Club Holding Corporation..... | Ownership..... |100.00 | The Ohio Automobile Club..... | ..... |