



ANNUAL STATEMENT

For the Year Ended December 31, 2011
of the Condition and Affairs of the

STATE AUTO INSURANCE COMPANY OF OHIO

NAIC Group Code.....175, 175 (Current Period) (Prior Period)	NAIC Company Code..... 11017	Employer's ID Number..... 31-1651026
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... May 17, 1999	Commenced Business..... January 1, 2000	
Statutory Home Office	518 EAST BROAD STREET..... COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office	518 EAST BROAD STREET..... COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code)	614-464-5000 (Area Code) (Telephone Number)
Mail Address	518 EAST BROAD STREET..... COLUMBUS OH 43215 (Street and Number or P. O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records	518 EAST BROAD STREET..... COLUMBUS OH 43215 (Street and Number) (City or Town, State and Zip Code)	614-464-5000 (Area Code) (Telephone Number)
Internet Web Site Address	STATEAUTO.COM	
Statutory Statement Contact	TINA MARIE STILLABOWER (Name) corporateaccounting@stateauto.com (E-Mail Address)	317-931-7473 (Area Code) (Telephone Number) (Extension) 317-931-6558 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. ROBERT PAUL RESTREPO, JR.	PRESIDENT	2. JAMES ANDREW YANO	SECRETARY
3. CYNTHIA ANN POWELL	TREASURER	4.	

OTHER

CLYDE HOWARD FITCH, JR.	SENIOR VICE PRESIDENT	DOUGLAS EDWARD ALLEN	VICE PRESIDENT
JOEL EDWARD BROWN	VICE PRESIDENT	JESSICA ELIZABETH BUSS #	VICE PRESIDENT
JOYCE ANN DALLESSIO #	VICE PRESIDENT	DAVID WILLIAM DALTON	VICE PRESIDENT
JAMES ELIAS DUEMEY	VICE PRESIDENT	NANCY DUFFEY EDWARDS	VICE PRESIDENT
STEVEN EUGENE ENGLISH	VICE PRESIDENT	STEVEN RAY HAZELBAKER	VICE PRESIDENT
RICKY LEE HOLBEIN	VICE PRESIDENT	DAVID JOHN HOSLER #	VICE PRESIDENT
STEPHEN PETER HUNCKLER	VICE PRESIDENT	KEITH ROBERT ILER #	VICE PRESIDENT
CATHY BERNATH MILEY	VICE PRESIDENT	MATTHEW STANLEY MROZEK	VICE PRESIDENT
PAUL EDWARD NORDMAN	VICE PRESIDENT	JOHN MICHAEL PETRUCCI	VICE PRESIDENT
TIMOTHY GERARD REIK #	VICE PRESIDENT	MARY JEAN REYNOLDS	VICE PRESIDENT
LYLE DEAN RHODEBECK	VICE PRESIDENT	LORRAINE MARGARET SIEGWORTH	VICE PRESIDENT
LARRY EMMETT WILLEFORD	VICE PRESIDENT		

DIRECTORS OR TRUSTEES

ROBERT ELLISON BAKER	DAVID JAMES D'ANTONI	EILEEN ANN MALLESCH	THOMAS EDWARD MARKERT
DAVID RUSSELL MEUSE	ROBERT PAUL RESTREPO, JR.	SHARON ELAINE ROBERTS	ALEXANDER BRUEN TREVOR
PAUL STRATTON WILLIAMS			

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) ROBERT PAUL RESTREPO, JR.	(Signature) JAMES ANDREW YANO	(Signature) CYNTHIA ANN POWELL
1. (Printed Name) PRESIDENT	2. (Printed Name) SECRETARY	3. (Printed Name) TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This 24TH day of FEBRUARY 2012	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.....175 NAIC Company Code....11017

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.....	1,918,456	2,045,853	.0	974,323	1,185,532	1,050,263	298,803	34,541	29,921	10,471	304,327	45,576
2.1 Allied lines.....	3,012,356	2,722,986	.0	1,571,901	2,059,870	1,906,295	424,675	8,215	3,026	7,227	477,418	48,208
2.2 Multiple peril crop.....	0	0	.0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	.0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	.0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	24,417,950	23,677,895	.0	12,712,901	22,872,069	23,787,734	6,432,747	552,947	551,747	156,289	4,309,033	466,501
5.1 Commercial multiple peril (non-liability portion).....	0	0	.0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	.0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	.0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	190,602	199,505	.0	90,417	150,766	170,520	32,309	197	2,428	3,166	39,622	3,198
9. Inland marine.....	965,149	973,510	.0	495,964	431,635	461,973	40,182	0	(78)	1,109	174,771	16,194
10. Financial guaranty.....	0	0	.0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	.0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	310,311	313,218	.0	158,919	0	0	0	0	0	0	55,341	5,207
13. Group accident and health (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
14. Credit A & H (group and individual).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A & H (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A & H (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	.0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	.0	0	0	0	0	0	0	0	0	0
15.7 All other A & H (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	.0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	.0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	1,809,088	1,872,762	.0	911,549	1,023,946	3,477,290	3,495,316	65,278	777,333	1,054,361	288,010	2,769
17.2 Other liability-claims-made.....	0	0	.0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	.0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	.0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	.0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	21,933,192	22,154,828	.0	8,035,042	16,405,380	14,803,978	12,918,197	822,100	671,868	835,416	2,717,365	351,009
19.3 Commercial auto no-fault (personal injury protection).....	0	0	.0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	.0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	16,576,064	16,768,337	.0	6,073,463	10,622,431	10,371,884	(162,807)	10,103	9,949	2,457	2,113,512	269,560
21.2 Commercial auto physical damage.....	0	0	.0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	.0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	.0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	.0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	.0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	.0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	.0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	.0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	.0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	71,133,168	70,728,894	.0	31,024,479	54,751,629	56,029,938	23,479,422	1,493,381	2,046,193	2,070,496	10,479,399	1,208,222

DETAILS OF WRITE-INS

3401.	0	0	.0	0	0	0	0	0	0	0	0	0
3402.	0	0	.0	0	0	0	0	0	0	0	0	0
3403.	0	0	.0	0	0	0	0	0	0	0	0	0
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 \$.458,012.

(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.....175 NAIC Company Code....11017

BUSINESS IN THE STATE OF OHIO 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.....	1,918,456	2,045,853	.0	974,323	1,185,532	1,050,263	298,803	34,541	29,921	10,471	304,327	45,576
2.1 Allied lines.....	3,012,356	2,722,986	.0	1,571,901	2,059,870	1,906,295	424,675	8,215	3,026	7,227	477,418	48,208
2.2 Multiple peril crop.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3 Federal flood.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Farmowners multiple peril.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril.....	24,417,950	23,677,895	.0	12,712,901	22,872,069	23,787,734	6,432,747	552,947	551,747	156,289	4,309,033	466,501
5.1 Commercial multiple peril (non-liability portion).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Mortgage guaranty.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Ocean marine.....	190,602	199,505	.0	90,417	150,766	170,520	32,309	197	2,428	3,166	39,622	3,198
9. Inland marine.....	965,149	973,510	.0	495,964	431,635	461,973	40,182	.0	(78)	1,109	174,771	16,194
10. Financial guaranty.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Earthquake.....	310,311	313,218	.0	158,919	.0	.0	.0	.0	.0	.0	55,341	5,207
13. Group accident and health (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit A & H (group and individual).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable A&H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4 Non-renewable for stated reasons only (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5 Other accident only.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7 All other A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.8 Federal employees health benefits program premium (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Workers' compensation.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other liability-occurrence.....	1,809,088	1,872,762	.0	911,549	1,023,946	3,477,290	3,495,316	65,278	777,333	1,054,361	288,010	2,769
17.2 Other liability-claims-made.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.3 Excess workers' compensation.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.1 Private passenger auto no-fault (personal injury protection).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability.....	21,933,192	22,154,828	.0	8,035,042	16,405,380	14,803,978	12,918,197	822,100	671,868	835,416	2,717,365	351,009
19.3 Commercial auto no-fault (personal injury protection).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.1 Private passenger auto physical damage.....	16,576,064	16,768,337	.0	6,073,463	10,622,431	10,371,884	(162,807)	10,103	9,949	2,457	2,113,512	269,560
21.2 Commercial auto physical damage.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Aircraft (all perils).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. Fidelity.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Surety.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Burglary and theft.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Boiler and machinery.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Credit.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
30. Warranty.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
34. Aggregate write-ins for other lines of business.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a).....	71,133,168	70,728,894	.0	31,024,479	54,751,629	56,029,938	23,479,422	1,493,381	2,046,193	2,070,496	10,479,399	1,208,222

DETAILS OF WRITE-INS

3401. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3402. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3403. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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 \$.458,012.
(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							
Affiliated - U. S. Intercompany Pooling:														
31-4316080..	25135.....	State Automobile Mutual Insurance Co.....	OH.....	.....10,273	.....2,820	.....0	.....2,820	.....0	.....0	.....0	.....0	.....0	.....0	.....0
0199999.	Affiliated - U. S. Intercompany Pooling.....			.....10,273	.....2,820	.....0	.....2,820	.....0	.....0	.....0	.....0	.....0	.....0	.....0
0499999.	Total Affiliates.....			.....10,273	.....2,820	.....0	.....2,820	.....0	.....0	.....0	.....0	.....0	.....0	.....0
Pools and Associations - Mandatory Pools:														
AA-9991222..	00000.....	Ohio Fair Plan.....	NA.....	.....127	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
0699999.	Pools and Associations - Mandatory Pools.....			.....127	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
0899999.	Total Pools and Associations.....			.....127	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9999999.	Totals.....			.....10,400	.....2,820	.....0	.....2,820	.....0	.....0	.....0	.....0	.....0	.....0	.....0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 Federal ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
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NONE

SCHEDULE F - PART 3

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

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
Authorized Affiliates-U.S. Intercompany Pooling																			
31-4316080	25135....	State Automobile Mutual Insurance Co.....	OH.....		69,765	11,359	284	16,718	986	5,368	2,655	30,652	0	68,022	13,762	0	54,260	0	
0199999	Total Authorized Affiliates - U.S. Intercompany Pooling.....				69,765	11,359	284	16,718	986	5,368	2,655	30,652	0	68,022	13,762	0	54,260	0	
0499999	Total Authorized Affiliates.....				69,765	11,359	284	16,718	986	5,368	2,655	30,652	0	68,022	13,762	0	54,260	0	
Authorized Other U.S. Unaffiliated Insurers																			
13-2673100	22039....	General Reins Corp.....	DE.....		472	0	0	447	0	410	0	237	0	1,094	49	0	1,045	0	
13-4924125	10227....	Munich Reins Amer Inc.....	DE.....		312	3	0	253	0	213	0	131	0	600	32	0	568	0	
0599998	Total Authorized Other U.S. Unaffiliated Insurers (Under \$100,000).....				209	25	1	11	0	22	0	0	0	59	27	0	32	0	
0599999	Total Authorized Other U.S. Unaffiliated Insurers.....				993	28	1	711	0	645	0	368	0	1,753	108	0	1,645	0	
Authorized Pools-Mandatory Pools																			
AA-9991503	00000....	Ohio Mine Subsidence Fund.....	NA.....		8	0	0	0	0	0	0	5	0	5	2	0	3	0	
0699999	Total Authorized Pools - Mandatory Pools.....				8	0	0	0	0	0	0	5	0	5	2	0	3	0	
Authorized Other Non-U.S. Insurers																			
0899998	Total Authorized Other Non-U.S. Insurers (Under \$100,000).....				272	27	1	11	0	5	0	0	0	44	25	0	19	0	
0899999	Total Authorized Other Non-U.S. Insurers.....				272	27	1	11	0	5	0	0	0	44	25	0	19	0	
0999999	Total Authorized.....				71,038	11,414	286	17,440	986	6,018	2,655	31,025	0	69,824	13,897	0	55,927	0	
Unauthorized Other Non-U.S. Insurers																			
AA-3194128	00000....	Allied World Assurance Co Ltd.....	BM.....		39	7	0	3	0	1	0	0	0	11	6	0	5	0	
AA-3190932	00000....	Argo Re.....	BM.....		38	6	0	3	0	1	0	0	0	10	4	0	6	0	
AA-3194168	00000....	Aspen Ins Ltd.....	BM.....		2	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-3194139	00000....	Axis Specialty Ltd.....	BM.....		24	5	0	2	0	1	0	0	0	8	5	0	3	0	
AA-3194161	00000....	Catlin Ins Co Ltd.....	BM.....		2	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-3190060	00000....	Hanover Re (Bermuda) Ltd.....	BM.....		13	4	0	2	0	0	0	0	0	6	2	0	4	0	
AA-3190463	00000....	Ipcre Ltd.....	BM.....		0	3	0	2	0	0	0	0	0	5	0	0	5	0	
AA-3190829	00000....	Max Bermuda Ltd.....	BM.....		5	2	0	1	0	0	0	0	0	3	2	0	1	0	
AA-1320034	00000....	Paris Re.....	FR.....		0	5	0	3	0	0	0	0	0	8	0	0	8	0	
AA-3190686	00000....	Partnerre Grp.....	BM.....		15	1	0	0	0	1	0	0	0	2	5	0	(3)	0	
AA-1340004	00000....	R V Versicherung Ag.....	DE.....		37	1	0	0	0	1	0	0	0	2	1	0	1	0	
AA-3190870	00000....	Validus Reins Ltd.....	BM.....		31	0	0	0	0	0	0	0	0	0	(4)	0	4	0	
AA-3190757	00000....	XI Re Ltd.....	BM.....		17	1	0	0	0	0	0	0	0	1	(2)	0	3	0	
1799999	Total Unauthorized Other Non-U.S. Insurers.....				223	35	0	16	0	5	0	0	0	56	19	0	37	0	
1899999	Total Unauthorized.....				223	35	0	16	0	5	0	0	0	56	19	0	37	0	
1999999	Total Authorized and Unauthorized.....				71,261	11,449	286	17,456	986	6,023	2,655	31,025	0	69,880	13,916	0	55,964	0	
9999999	Totals.....				71,261	11,449	286	17,456	986	6,023	2,655	31,025	0	69,880	13,916	0	55,964	0	

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable on										Reinsurance Payable		18	19
Federal ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	7	8	9	10	11	12	13	14	15	16	17	Net Amount Recoverable From Reinsurers Col. 15-[16+17]	Funds Held By Company Under Reinsurance Treaties	
						Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers			

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

1	2	3
Name of Reinsurer	Commission Rate	Ceded Premium
(1)	0.0	0
(2)	0.0	0
(3)	0.0	0
(4)	0.0	0
(5)	0.0	0

Note B: Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1	2	3	4	
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated	
(1) State Automobile Mutual Insurance Co.....	68,022	69,765	Yes [X]	No []
(2) General Reins Corp.....	1,094	472	Yes []	No [X]
(3) Munich Reins Amer Inc.....	600	312	Yes []	No [X]
(4) Allied World Assurance Co Ltd.....	11	39	Yes []	No [X]
(5) Argo Re.....	10	38	Yes []	No [X]

SCHEDULE F - PART 4

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

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue					11 Total Due Cols. 5 + 10		
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			

Authorized Affiliates-U.S. Intercompany Pooling

31-4316080..	25135.....	State Automobile Mutual Insurance Co.....	OH.....	.....11,643	.....0	.....0	.....0	.....0	.....0	.....11,643	.....0.0	.....0.0
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling.....			.....11,643	.....0	.....0	.....0	.....0	.....0	.....11,643	.....0.0	.....0.0
0499999.	Total Authorized - Affiliates.....			.....11,643	.....0	.....0	.....0	.....0	.....0	.....11,643	.....0.0	.....0.0

Authorized Other U.S. Unaffiliated Insurers

36-2661954..	10103.....	American Agricultural Ins Co.....	IN.....	.....3	.....0	.....0	.....0	.....0	.....0	.....3	.....0.0	.....0.0
42-0234980..	21415.....	Employers Mut Cas Co.....	IA.....	.....2	.....0	.....0	.....0	.....0	.....0	.....2	.....0.0	.....0.0
04-1543470..	23043.....	Liberty Mut Ins Co.....	MA.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
13-4924125..	10227.....	Munich Reins Amer Inc.....	DE.....	.....3	.....0	.....0	.....0	.....0	.....0	.....3	.....0.0	.....0.0
47-0698507..	23680.....	Odyssey Amer Reins Co.....	CT.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
23-1641984..	10219.....	Qbe Reins Corp.....	PA.....	.....5	.....0	.....0	.....0	.....0	.....0	.....5	.....0.0	.....0.0
13-5616275..	19453.....	Transatlantic Reins Co.....	NY.....	.....15	.....0	.....0	.....0	.....0	.....0	.....15	.....0.0	.....0.0
0599999.	Total Authorized - Other U.S. Unaffiliated Insurers.....			.....30	.....0	.....0	.....0	.....0	.....0	.....30	.....0.0	.....0.0

Authorized Other Non-U.S. Insurers

AA-1128003.	00000.....	Lloyd's Syndicate Number 2003.....	GB.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
AA-1120071.	00000.....	Lloyd's Syndicate Number 2007.....	GB.....	.....4	.....0	.....0	.....0	.....0	.....0	.....4	.....0.0	.....0.0
AA-1128010.	00000.....	Lloyd's Syndicate Number 2010.....	GB.....	.....5	.....0	.....0	.....0	.....0	.....0	.....5	.....0.0	.....0.0
AA-1128623.	00000.....	Lloyd's Syndicate Number 2623.....	GB.....	.....2	.....0	.....0	.....0	.....0	.....0	.....2	.....0.0	.....0.0
AA-1126033.	00000.....	Lloyd's Syndicate Number 33.....	GB.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
AA-1126435.	00000.....	Lloyd's Syndicate Number 435.....	GB.....	.....2	.....0	.....0	.....0	.....0	.....0	.....2	.....0.0	.....0.0
AA-1126623.	00000.....	Lloyd's Syndicate Number 623.....	GB.....	.....3	.....0	.....0	.....0	.....0	.....0	.....3	.....0.0	.....0.0
AA-1126780.	00000.....	Lloyd's Syndicate Number 780.....	GB.....	.....3	.....0	.....0	.....0	.....0	.....0	.....3	.....0.0	.....0.0
AA-1840000.	00000.....	Mapfre Re Compania De Reaseguros.....	ES.....	.....8	.....0	.....0	.....0	.....0	.....0	.....8	.....0.0	.....0.0
0899999.	Total Authorized - Other Non-U.S. Insurers.....			.....29	.....0	.....0	.....0	.....0	.....0	.....29	.....0.0	.....0.0
0999999.	Total Authorized.....			.....11,702	.....0	.....0	.....0	.....0	.....0	.....11,702	.....0.0	.....0.0

Unauthorized Other Non-U.S. Insurers

AA-3194128.	00000.....	Allied World Assurance Co Ltd.....	BM.....	.....7	.....0	.....0	.....0	.....0	.....0	.....7	.....0.0	.....0.0
AA-3190932.	00000.....	Argo Re.....	BM.....	.....7	.....0	.....0	.....0	.....0	.....0	.....7	.....0.0	.....0.0
AA-3194139.	00000.....	Axis Specialty Ltd.....	BM.....	.....5	.....0	.....0	.....0	.....0	.....0	.....5	.....0.0	.....0.0
AA-3190060.	00000.....	Hanover Re (Bermuda) Ltd.....	BM.....	.....4	.....0	.....0	.....0	.....0	.....0	.....4	.....0.0	.....0.0
AA-3190463.	00000.....	Ipcre Ltd.....	BM.....	.....3	.....0	.....0	.....0	.....0	.....0	.....3	.....0.0	.....0.0
AA-3190829.	00000.....	Max Bermuda Ltd.....	BM.....	.....2	.....0	.....0	.....0	.....0	.....0	.....2	.....0.0	.....0.0
AA-1320034.	00000.....	Paris Re.....	FR.....	.....5	.....0	.....0	.....0	.....0	.....0	.....5	.....0.0	.....0.0
AA-3190686.	00000.....	Partnerre Grp.....	BM.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
AA-1340004.	00000.....	R V Versicherung Ag.....	DE.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0
AA-3190757.	00000.....	XI Re Ltd.....	BM.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0.0	.....0.0

SCHEDULE F - PART 4

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

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue					11 Total Due Cols. 5 + 10		
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			
1799999.	Total Unauthorized - Other Non-U.S. Insurers.....			.....36	.....0	.....0	.....0	.....0	.....0	.....36	.....0.0	.....0.0
1899999.	Total Unauthorized.....			.....36	.....0	.....0	.....0	.....0	.....0	.....36	.....0.0	.....0.0
1999999.	Total Authorized and Unauthorized.....			.....11,738	.....0	.....0	.....0	.....0	.....0	.....11,738	.....0.0	.....0.0
9999999.	Totals.....			.....11,738	.....0	.....0	.....0	.....0	.....0	.....11,738	.....0.0	.....0.0

SCHEDULE F - PART 5

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

1	2	3	4	5	6	7	Letter of Credit Issuing or Confirming Bank (a)			11	12	13	14	15	16	17	18	19	20
							8	9	10										
Federal ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Recoverable all Items Schedule F, Part 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name	Ceded Balances Payable	Miscellaneous Balances	Other Allowed Offset Items	Cols. 6 + 7 + 11 + 12 + 13 but not in Excess of Col. 5	Subtotal Col. 5 minus Col. 14	Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute	20% of Amount in Col. 16	Smaller of Col. 14 or Col. 17	Smaller of Col. 14 or 20% of Amount in Dispute Included in Col. 5	Total Provision for Unauthorized Reinsurance Smaller of Col. 5 or Cols. 15 + 18 + 19

Other Non-U.S. Insurers

AA-3194128.	00000.....	Allied World Assurance Co Ltd.....	BM.....	.....11	.....0	.....5	021000089.....	.....1	Citibank NA.....	.....6	.....0	.....0	.....11	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190932.	00000.....	Argo Re.....	BM.....	.....10	.....0	.....6	021000089.....	.....1	Citibank NA.....	.....4	.....0	.....0	.....10	.....0	.....0	.....0	.....0	.....0	.....0
AA-3194139.	00000.....	Axis Specialty Ltd.....	BM.....	.....8	.....0	.....3	021000089.....	.....1	Citibank NA.....	.....5	.....0	.....0	.....8	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190060.	00000.....	Hanover Re (Bermuda) Ltd.....	BM.....	.....6	.....0	.....4	002100021.....	.....1	JPMorgan Chase Bank.....	.....2	.....0	.....0	.....6	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190463.	00000.....	Ipcr Ltd.....	BM.....	.....5	.....0	.....5	021000089.....	.....1	Citibank NA.....	.....0	.....0	.....0	.....5	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190829.	00000.....	Max Bermuda Ltd.....	BM.....	.....3	.....0	.....1	026009593.....	.....1	Bank of America.....	.....2	.....0	.....0	.....3	.....0	.....0	.....0	.....0	.....0	.....0
AA-1320034.	00000.....	Paris Re.....	FR.....	.....8	.....0	.....8	002100021.....	.....1	JPMorgan Chase Bank.....	.....0	.....0	.....0	.....8	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190686.	00000.....	Partnerre Grp.....	BM.....	.....2	.....0	.....0	0.....	.....	.....	.....5	.....0	.....0	.....2	.....0	.....0	.....0	.....0	.....0	.....0
AA-1340004.	00000.....	R V Versicherung Ag.....	DE.....	.....2	.....0	.....1	021000089.....	.....1	Citibank NA.....	.....1	.....0	.....0	.....2	.....0	.....0	.....0	.....0	.....0	.....0
AA-3190870.	00000.....	Validus Reins Ltd.....	BM.....	.....0	.....0	.....0	0.....	.....	.....	.....(4)	.....0	.....0	.....(4)	.....4	.....0	.....0	.....0	.....0	.....0
AA-3190757.	00000.....	XI Re Ltd.....	BM.....	.....1	.....0	.....3	002100021.....	.....1	JPMorgan Chase Bank.....	.....(2)	.....0	.....0	.....1	.....0	.....0	.....0	.....0	.....0	.....0
0899999.	Total Other Non-U.S. Insurers.....			.....56	.....0	.....36	....XXX.....	..XXX.	.....XXX.....	.....19	.....0	.....0	.....52	.....4	.....0	.....0	.....0	.....0	.....0
0999999.	Total Affiliates and Others.....			.....56	.....0	.....36	....XXX.....	..XXX.	.....XXX.....	.....19	.....0	.....0	.....52	.....4	.....0	.....0	.....0	.....0	.....0
9999999.	Totals.....			.....56	.....0	.....36	....XXX.....	..XXX.	.....XXX.....	.....19	.....0	.....0	.....52	.....4	.....0	.....0	.....0	.....0	.....0

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

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).....	34,475,089	0	34,475,089
2. Premiums and considerations (Line 15).....	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	11,738,352	(11,738,352)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0	0	0
5. Other assets.....	404,536	0	404,536
6. Net amount recoverable from reinsurers.....	0	57,666,351	57,666,351
7. Protected cell assets (Line 27).....	0	0	0
8. Totals (Line 28).....	46,617,977	45,927,999	92,545,976
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	2,819,743	27,120,541	29,940,284
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	0	1,702,615	1,702,615
11. Unearned premiums (Line 9).....	0	31,019,875	31,019,875
12. Advance premiums (Line 10).....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	13,917,082	(13,915,032)	2,050
15. Funds held by company under reinsurance treaties (Line 13).....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14).....	0	0	0
17. Provision for reinsurance (Line 16).....	0	0	0
18. Other liabilities.....	16,235,164	0	16,235,164
19. Total liabilities excluding protected cell business (Line 26).....	32,971,989	45,927,999	78,899,988
20. Protected cell liabilities (Line 27).....	0	0	0
21. Surplus as regards policyholders (Line 37).....	13,645,988	XXX	13,645,988
22. Totals (Line 38).....	46,617,977	45,927,999	92,545,976

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

If yes, give full explanation:

The Company is a member of a reinsurance pooling agreement as noted in Note 26. Column 2 above also includes outside reinsurance.

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written.....	19	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....19	XXX
2. Premiums earned.....	40	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....0	XXX	.....40	XXX
3. Incurred claims.....	(493)	...(1,232.5)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....(493)	...(1,232.5)
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	.....0	.....0.0	.....0	.....0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	(493)	...(1,232.5)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....(493)	...(1,232.5)
6. Increase in contract reserves.....	(1,770)	...(4,425.0)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....(1,770)	...(4,425.0)
7. Commissions (a).....	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
8. Other general insurance expenses.....	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
9. Taxes, licenses and fees.....	2	.....5.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....2	.....5.0
10. Total other expenses incurred.....	2	.....5.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....2	.....5.0
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	.....0.0	.....0	.....0.0
12. Gain from underwriting before dividends or refunds.....	2,301	....5,752.5	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....2,301	5,752.5
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	.....0	.....0.0	.....0	.....0.0
14. Gain from underwriting after dividends or refunds.....	2,301	....5,752.5	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	.....2,301	5,752.5
DETAILS OF WRITE-INS																		
1101. ....	.....	.....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
1102. ....	.....	.....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
1103. ....	.....	.....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
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	2	3	4	Other Individual Contracts				
		Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	5	6	7	8	9
	Total				Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	0	0	0	0	0	0	0	0	0
2. Advance premiums.....	0	0	0	0	0	0	0	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	0	0	0	0	0	0	0	0	0
5. Total premium reserves, prior year.....	21	0	0	0	0	0	0	0	21
6. Increase in total premium reserves.....	(21)	0	0	0	0	0	0	0	(21)
B. Contract Reserves:									
1. Additional reserves (a).....	0	0	0	0	0	0	0	0	0
2. Reserve for future contingent benefits (deferred maternity and other similar benefits)....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year.....	1,770	0	0	0	0	0	0	0	1,770
5. Increase in contract reserves.....	(1,770)	0	0	0	0	0	0	0	(1,770)
C. Claim Reserves and Liabilities:									
1. Total current year.....	0	0	0	0	0	0	0	0	0
2. Total prior year.....	1,380	0	0	0	0	0	0	0	1,380
3. Increase.....	(1,380)	0	0	0	0	0	0	0	(1,380)

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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.....	887	0	0	0	0	0	0	0	887
1.2 On claims incurred during current year.....	0	0	0	0	0	0	0	0	0
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	0	0	0	0	0	0	0	0	0
2.2 On claims incurred during current year.....	0	0	0	0	0	0	0	0	0
3. Test:									
3.1 Lines 1.1 and 2.1.....	887	0	0	0	0	0	0	0	887
3.2 Claim reserves and liabilities, December 31, prior year.....	1,380	0	0	0	0	0	0	0	1,380
3.3 Line 3.1 minus Line 3.2.....	(493)	0	0	0	0	0	0	0	(493)

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	19	0	0	0	0	0	0	0	19
2. Premiums earned.....	40	0	0	0	0	0	0	0	40
3. Incurred claims.....	(493)	0	0	0	0	0	0	0	(493)
4. Commissions.....	0	0	0	0	0	0	0	0	0
B. Reinsurance Ceded:									
1. Premiums written.....	0	0	0	0	0	0	0	0	0
2. Premiums earned.....	0	0	0	0	0	0	0	0	0
3. Incurred claims.....	0	0	0	0	0	0	0	0	0
4. Commissions.....	0	0	0	0	0	0	0	0	0

(a) Includes \$.00 premium deficiency reserve.

STATE AUTO INSURANCE COMPANY OF OHIO
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....	0	0	0	0
2. Beginning claim reserves and liabilities.....	0	0	0	0
3. Ending claim reserves and liabilities.....	0	0	0	0
4. Claims paid.....	0	0	0	0
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	0	0
6. Beginning claim reserves and liabilities.....	0	0	0	0
7. Ending claim reserves and liabilities.....	0	0	0	0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:	NONE			
9. Incurred claims.....				
10. Beginning claim reserves and liabilities.....				
11. Ending claim reserves and liabilities.....				
12. Claims paid.....				
D. Net:				
13. Incurred claims.....	0	0	0	0
14. Beginning claim reserves and liabilities.....	0	0	0	0
15. Ending claim reserves and liabilities.....	0	0	0	0
16. Claims paid.....	0	0	0	0
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	0	0
18. Beginning reserves and liabilities.....	0	0	0	0
19. Ending reserves and liabilities.....	0	0	0	0
20. Paid claims and cost containment expenses.....	0	0	0	0

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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....0	.....6	.....(6)	.....0	.....17	.....0	.....0	.....0	.....0	.....0	.....(17)	.....0
3. 2003.....	.....0	.....32	.....(32)	.....0	.....12	.....0	.....0	.....0	.....0	.....0	.....(12)	.....0
4. 2004.....	.....0	.....7	.....(7)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....9	.....(9)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....12	.....(12)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....20	.....(20)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....13	.....(13)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....29	.....0	.....0	.....0	.....0	.....0	.....(29)	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....17	.....(17)	.....0.0	.....283.3	.....283.3	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....12	.....(12)	.....0.0	.....37.5	.....37.5	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....0	.....4	.....(4)	.....0	.....25	.....0	.....0	.....0	.....0	.....0	.....(25)	.....0
3. 2003.....	.....0	.....36	.....(36)	.....0	.....16	.....0	.....0	.....0	.....0	.....0	.....(16)	.....0
4. 2004.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....41	.....0	.....0	.....0	.....0	.....0	.....(41)	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....25	.....(25)	.....0.0	.....625.0	.....625.0	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....16	.....(16)	.....0.0	.....44.4	.....44.4	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

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

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....0	.....1	.....(1)	.....0	.....9	.....0	.....0	.....0	.....0	.....0	.....(9)	.....0
3. 2003.....	.....0	.....12	.....(12)	.....0	.....5	.....0	.....0	.....0	.....0	.....0	.....(5)	.....0
4. 2004.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....14	.....0	.....0	.....0	.....0	.....0	.....(14)	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....9	.....(9)	.....0.0	.....900.0	.....900.0	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....5	.....(5)	.....0.0	.....41.7	.....41.7	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$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.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
2. 2002.....	.....0.....	.....1.....	.....(1).....	.....0.....	.....5.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(5).....	.....0.....
3. 2003.....	.....0.....	.....6.....	.....(6).....	.....0.....	.....3.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(3).....	.....0.....
4. 2004.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	.....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.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....8.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(8).....	.....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	15 Direct and Assumed	16	17 Direct and Assumed	18	19 Direct and Assumed	20					
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....
2. 2002.	.....0.....	.....5.....	.....(5).....	.....0.0.....	.....500.0.....	.....500.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
3. 2003.	.....0.....	.....3.....	.....(3).....	.....0.0.....	.....50.0.....	.....50.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
4. 2004.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
5. 2005.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
6. 2006.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
7. 2007.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
8. 2008.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
9. 2009.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
10. 2010.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
11. 2011.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....0	.....2	.....(2)	.....0	.....10	.....0	.....0	.....0	.....0	.....0	.....(10)	.....0
3. 2003.....	.....0	.....14	.....(14)	.....0	.....6	.....0	.....0	.....0	.....0	.....0	.....(6)	.....0
4. 2004.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....16	.....0	.....0	.....0	.....0	.....0	.....(16)	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....10	.....(10)	.....0.0	.....500.0	.....500.0	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....6	.....(6)	.....0.0	.....42.9	.....42.9	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

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

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

SCHEDULE P - PART 1G - SPECIAL LIABILITY
(OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)
(\$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.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
2. 2002.....	.....0.....	.....2.....	.....(2).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
3. 2003.....	.....0.....	.....3.....	.....(3).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
4. 2004.....	.....0.....	.....3.....	.....(3).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
5. 2005.....	.....0.....	.....3.....	.....(3).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
6. 2006.....	.....0.....	.....3.....	.....(3).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
7. 2007.....	.....0.....	.....3.....	.....(3).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
8. 2008.....	.....0.....	.....1.....	.....(1).....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
9. 2009.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
10. 2010.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
11. 2011.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
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	15 Direct and Assumed	16	17 Direct and Assumed	18	19 Direct and Assumed	20					
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....
2. 2002.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
3. 2003.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
4. 2004.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
5. 2005.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
6. 2006.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
7. 2007.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
8. 2008.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
9. 2009.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
10. 2010.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
11. 2011.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

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

(\$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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....0	.....1	.....(1)	.....0	.....5	.....0	.....0	.....0	.....0	.....0	.....(5)	.....0
3. 2003.....	.....0	.....8	.....(8)	.....0	.....4	.....0	.....0	.....0	.....0	.....0	.....(4)	.....0
4. 2004.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....9	.....0	.....0	.....0	.....0	.....0	.....(9)	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....5	.....(5)	.....0.0	.....500.0	.....500.0	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....4	.....(4)	.....0.0	.....50.0	.....50.0	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2002.....	.....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
4. 2004.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10. 2010.....	.....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
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 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2002.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
3. 2003.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
4. 2004.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
5. 2005.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
6. 2006.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
7. 2007.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
8. 2008.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
9. 2009.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
10. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
11. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
(\$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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2010.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
3. 2011.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2010...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2011...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2010	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
3. 2011	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2010.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2011.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2010...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2011...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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	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	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2010	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
3. 2011	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
2. 2010.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....
3. 2011.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2010...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2011...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0
2. 2010	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
3. 2011	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.00	.....0	.....0
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

Sch. P-Pt. 1L
NONE

Sch. P-Pt. 1M
NONE

Sch. P-Pt. 1N
NONE

Sch. P-Pt. 1O
NONE

Sch. P-Pt. 1P
NONE

SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

(\$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.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....XXX.....
2. 2002.....	.....0.....	.....0.....	.....0.....	.....0.....	.....1.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(1).....	.....0.....
3. 2003.....	.....0.....	.....2.....	.....(2).....	.....0.....	.....1.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(1).....	.....0.....
4. 2004.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	.....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.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....2.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....(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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....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...	.....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	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....
2. 2002.	.....0.....	.....1.....	.....(1).....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
3. 2003.	.....0.....	.....1.....	.....(1).....	.....0.0.....	.....50.0.....	.....50.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
4. 2004.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
5. 2005.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
6. 2006.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
7. 2007.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
8. 2008.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
9. 2009.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
10. 2010.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
11. 2011.	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....0.....	.....0.....	.....0.00.....	.....0.....	.....0.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

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	2	3	4	5	6	7	8	9	10	11	12
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	One Year	Two Year
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....(17)	.....0	.....0
3. 2003.....	XXX.....	.....(12)	.....(12)	.....(12)	.....(12)	.....(12)	.....(12)	.....(12)	.....(12)	.....(12)	.....0	.....0
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....
12. Totals											.....0	.....0

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....(25)	.....0	.....0
3. 2003.....	XXX.....	.....(16)	.....(16)	.....(16)	.....(16)	.....(16)	.....(16)	.....(16)	.....(16)	.....(16)	.....0	.....0
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....
12. Totals											.....0	.....0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

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

SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

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

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....(10)	.....0	.....0
3. 2003.....	XXX.....	.....(6)	.....(6)	.....(6)	.....(6)	.....(6)	.....(6)	.....(6)	.....(6)	.....(6)	.....0	.....0
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	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	2	3	4	5	6	7	8	9	10	11	12
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	One Year	Two Year
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	XXX
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	XXX	XXX
12. Totals											.....0	.....0

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

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

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

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

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

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

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

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

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

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

SCHEDULE P - PART 2K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 2M - INTERNATIONAL

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

SCHEDULE P - PART 2N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

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

SCHEDULE P - PART 2O - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

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

SCHEDULE P - PART 2P - REINSURANCE

NONPROPORTIONAL ASSUMED FINANCIAL LINES

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

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS 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	2	3	4	5	6	7	8	9	10	11	12
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	One Year	Two Year
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....0	.....0
3. 2003.....	XXX.....	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....(1)	.....0	.....0
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....
12. Totals											.....0	.....0

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

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

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

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

SCHEDULE P - PART 2T - WARRANTY

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

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	2	3	4	5	6	7	8	9	10		
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011		
1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....(17).....	.....0.....	.....0.....
3. 2003.....	XXX.....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....(12).....	.....0.....	.....0.....
4. 2004.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....(25).....	.....0.....	.....0.....
3. 2003.....	XXX.....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....(16).....	.....0.....	.....0.....
4. 2004.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....(9).....	.....0.....	.....0.....
3. 2003.....	XXX.....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....0.....	.....0.....
4. 2004.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....(5).....	.....0.....	.....0.....
3. 2003.....	XXX.....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....(3).....	.....0.....	.....0.....
4. 2004.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....(10).....	.....0.....	.....0.....
3. 2003.....	XXX.....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....(6).....	.....0.....	.....0.....
4. 2004.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0.....	.....0.....	.....0.....

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	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011		
1. Prior.....	.....000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0

NONE

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	.....000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0

NONE

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	.....000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
3. 2003.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	XXX	XXX
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	XXX	XXX
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	XXX	XXX
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	XXX	XXX
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	XXX	XXX
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	.....000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....(5)	.....0	.....0
3. 2003.....	XXX	.....(4)	.....(4)	.....(4)	.....(4)	.....(4)	.....(4)	.....(4)	.....(4)	.....(4)	.....0	.....0
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	.....000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0	.....0	.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0	.....0

NONE

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	2	3	4	5	6	7	8	9	10		
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011		
1. Prior....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...000.....	.....0	.....0	XXX.....	XXX.....
2. 2010....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
3. 2011....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...000.....	.....0	.....0	.....0	.....0
2. 2010....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0
3. 2011....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...000.....	.....0	.....0	XXX.....	XXX.....
2. 2010....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
3. 2011....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

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

1. Prior....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...000.....	.....0	.....0	XXX.....	XXX.....
2. 2010....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
3. 2011....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior....	...000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
2. 2002....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
3. 2003....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
4. 2004....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
5. 2005....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
6. 2006....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
7. 2007....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
8. 2008....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	XXX.....	XXX.....
9. 2009....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
10. 2010....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
11. 2011....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

NONE

SCHEDULE P - PART 3N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

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	2	3	4	5	6	7	8	9	10		
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011		
1. Prior.....	000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
3. 2003.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	XXX.....	XXX.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

SCHEDULE P - PART 3O - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
3. 2003.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	XXX.....	XXX.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

SCHEDULE P - PART 3P - REINSURANCE

NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....	000.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
3. 2003.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	XXX.....	XXX.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	XXX.....	XXX.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	XXX.....	XXX.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	XXX.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	XXX.....	XXX.....

SCHEDULE P - PART 3R-SECTION 1 - PRODUCTS 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	2	3	4	5	6	7	8	9	10		
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011		
1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....0.....	.....0.....
3. 2003.....	.....XXX.....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....(1).....	.....0.....	.....0.....
4. 2004.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....

SCHEDULE P - PART 3R-SECTION 2 - PRODUCTS LIABILITY- CLAIMS-MADE

1. Prior.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2002.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
3. 2003.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
4. 2004.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....

NONE

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....000.....	.....0.....	.....0.....	.....XXX.....	.....XXX.....
2. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....XXX.....
3. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....XXX.....	.....XXX.....

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....000.....	.....0.....	.....0.....	.....0.....	.....0.....
2. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....	.....0.....
3. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....0.....

NONE

Sch. P-Pt. 4A
NONE

Sch. P-Pt. 4B
NONE

Sch. P-Pt. 4C
NONE

Sch. P-Pt. 4D
NONE

Sch. P-Pt. 4E
NONE

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

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

Sch. P-Pt. 4G
NONE

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

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

Sch. P-Pt. 4I
NONE

Sch. P-Pt. 4J
NONE

Sch. P-Pt. 4K
NONE

Sch. P-Pt. 4L
NONE

Sch. P-Pt. 4M
NONE

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

STATE AUTO INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 5T - WARRANTY

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0
2. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0
3. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

SCHEDULE P - PART 5T - WARRANTY

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0
2. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0
3. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

SCHEDULE P - PART 5T - WARRANTY

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0
2. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0
3. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....0
3. 2003.....	.XXX.....	.....12	.....12	.....12	.....12	.....12	.....12	.....12	.....12	.....12	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....1	.....12	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....0
3. 2003.....	.XXX.....	.....6	.....6	.....6	.....6	.....6	.....6	.....6	.....6	.....6	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....1	.....6	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	....XXX.....

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....2	.....2	.....2	.....2	.....2	.....2	.....2	.....2	.....2	.....2	.....0
3. 2003.....	....XXX.....	.....14	.....14	.....14	.....14	.....14	.....14	.....14	.....14	.....14	.....0
4. 2004.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....0
11. 2011.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0	.....0
12. Total.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....2	.....14	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	....XXX.....

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	....XXX.....

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....0
3. 2003.....	.XXX.....	.....8	.....8	.....8	.....8	.....8	.....8	.....8	.....8	.....8	.....0
4. 2004.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0	.....0
9. 2009.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0	.....0
10. 2010.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0	.....0
11. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0	.....0
12. Total.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....0
13. Earned Prems.(P-Pt 1).....	.....1	.....8	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	....XXX.....

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

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	2	2	2	2	2	2	2	2	2	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).	0	2	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	.....0	.....0	.....0.0	.....1,806	.....0	.....0.0
2. Private passenger auto liability/medical.....	.....0	.....0	.....0.0	.....2,280	.....0	.....0.0
3. Commercial auto/truck liability/medical.....	.....0	.....0	.....0.0	.....1,106	.....0	.....0.0
4. Workers' compensation.....	.....0	.....0	.....0.0	.....607	.....0	.....0.0
5. Commercial multiple peril.....	.....0	.....0	.....0.0	.....1,002	.....0	.....0.0
6. Medical professional liability - occurrence.....	.....0	.....0	.....0.0	.....0	.....0	.....0.0
7. Medical professional liability - claims-made.....	.....0	.....0	.....0.0	.....35	.....0	.....0.0
8. Special liability.....	.....0	.....0	.....0.0	.....6	.....0	.....0.0
9. Other liability - occurrence.....	.....0	.....0	.....0.0	.....523	.....0	.....0.0
10. Other liability - claims-made.....	.....0	.....0	.....0.0	.....107	.....0	.....0.0
11. Special property.....	.....0	.....0	.....0.0	.....883	.....0	.....0.0
12. Auto physical damage.....	.....0	.....0	.....0.0	.....1,813	.....0	.....0.0
13. Fidelity/surety.....	.....0	.....0	.....0.0	.....29	.....0	.....0.0
14. Other.....	.....0	.....0	.....0.0	.....0	.....0	.....0.0
15. International.....	.....0	.....0	.....0.0	.....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	.....75	.....0	.....0.0
20. Products liability - claims-made.....	.....0	.....0	.....0.0	.....0	.....0	.....0.0
21. Financial guaranty/mortgage guaranty.....	.....0	.....0	.....0.0	.....0	.....0	.....0.0
22. Warranty.....	.....0	.....0	.....0.0	.....0	.....0	.....0.0
23. Totals.....	.....0	.....0	.....0.0	.....10,273	.....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	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	.....XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	.....XXX	.....XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	.....XXX	.....XXX	.....XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	.....XXX	.....XXX	.....XXX	.....XXX	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....0	.....0	.....0	.....0	.....0
8. 2008.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....0	.....0	.....0	.....0
9. 2009.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....0	.....0	.....0
10. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....0	.....0
11. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....0

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

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

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. 2002.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2003.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2004.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	0	0	0.0	1,806	0	0.0
2. Private passenger auto liability/medical.....	0	0	0.0	2,280	0	0.0
3. Commercial auto/truck liability/medical.....	0	0	0.0	1,106	0	0.0
4. Workers' compensation.....	0	0	0.0	607	0	0.0
5. Commercial multiple peril.....	0	0	0.0	1,002	0	0.0
6. Medical professional liability - occurrence.....	0	0	0.0	0	0	0.0
7. Medical professional liability - claims-made.....	0	0	0.0	35	0	0.0
8. Special liability.....	0	0	0.0	6	0	0.0
9. Other liability - occurrence.....	0	0	0.0	523	0	0.0
10. Other liability - claims-made.....	0	0	0.0	107	0	0.0
11. Special property.....	0	0	0.0	883	0	0.0
12. Auto physical damage.....	0	0	0.0	1,813	0	0.0
13. Fidelity/surety.....	0	0	0.0	29	0	0.0
14. Other.....	0	0	0.0	0	0	0.0
15. International.....	0	0	0.0	0	0	0.0
16. Reinsurance - nonproportional assumed property.....	0	0	0.0	0	0	0.0
17. Reinsurance - nonproportional assumed liability.....	0	0	0.0	0	0	0.0
18. Reinsurance - nonproportional assumed financial lines.....	0	0	0.0	0	0	0.0
19. Products liability - occurrence.....	0	0	0.0	75	0	0.0
20. Products liability - claims-made.....	0	0	0.0	0	0	0.0
21. Financial guaranty/mortgage guaranty.....	0	0	0.0	0	0	0.0
22. Warranty.....	0	0	0.0	0	0	0.0
23. Totals	0	0	0.0	10,273	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	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

Annual Statement for the year 2011 of the

STATE AUTO INSURANCE COMPANY OF OHIO

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

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2002.....	0	0	0	0	0	0	0	0	0	0
3. 2003.....	XXX	0	0	0	0	0	0	0	0	0
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2006.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

STATE AUTO INSURANCE COMPANY OF OHIO
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?

Yes [] No [X]

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)?

\$.....0
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve?

Yes [] No [X]
- 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?

Yes [] No [] N/A[X]
- 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	2
	Section 1: Occurrence	Section 2: Claims-Made
1.601 Prior.....	.....0	.....0
1.602 2002.....	.....0	.....0
1.603 2003.....	.....0	.....0
1.604 2004.....	.....0	.....0
1.605 2005.....	.....0	.....0
1.606 2006.....	.....0	.....0
1.607 2007.....	.....0	.....0
1.608 2008.....	.....0	.....0
1.609 2009.....	.....0	.....0
1.610 2010.....	.....0	.....0
1.611 2011.....	.....0	.....0
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

\$.....7

5.2 Surety

\$.....22

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 [X] No []

- 7.2 An extended statement may be attached.

Effective 1/1/2011, the Pooling Arrangement was amended, adding four companies as zero percentage participants. On 12/31/2011, the Pooling Arrangement was amended, and the Company became a zero percentage participant. See Note 26 for additional disclosure.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
0175.....	State Auto Group.....	45934.....	41-1719183	0.....	0.....		American Compensation Insurance Company	MN.....	IA.....	RTW, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11284.....	75-2829084	0.....	0.....		Beacon Lloyds Insurance Company.....	TX.....	IA.....	Beacon Lloyds, Inc.....	Attorney-in-Fact.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	20028.....	75-0899679	0.....	0.....		Beacon National Insurance Company.....	TX.....	IA.....	State Auto Holdings, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	12311.....	41-1988144	0.....	0.....		Bloomington Compensation Insurance Company	MN.....	IA.....	American Compensation Insurance Company	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	13811.....	42-0248110	0.....	0.....		Farmers Casualty Insurance Company.....	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	32085.....	06-0429900	0.....	0.....		Litchfield Mutual Fire Insurance Company	CT.....	IA.....	State Automobile Mutual Insurance Co.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	10502.....	41-0190580	0.....	0.....		Meridian Citizens Mutual Insurance Company	IN.....	IA.....	Meridian Insurance Group, Inc.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	23353.....	35-1135866	0.....	0.....		Meridian Security Insurance Company.....	IN.....	IA.....	Meridian Insurance Group, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	41653.....	46-0368854	0.....	0.....		Milbank Insurance Company.....	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	14923.....	06-0487440	0.....	0.....		Patrons Mutual Insurance Company of Connecticut	CT.....	IA.....	State Automobile Mutual Insurance Co.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	30945.....	58-1140651	0.....	0.....		Plaza Insurance Company.....	MO.....	IA.....	Rockhill Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	28053.....	06-1149847	0.....	0.....		Rockhill Insurance Company.....	DE.....	IA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11502.....	31-1753341	0.....	0.....		State Auto Florida Insurance Company.....	IN.....	IA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11017.....	31-1651026	0.....	0.....		State Auto Insurance Company f Ohio.....	OH.....		State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	31755.....	39-1211058	0.....	0.....		State Auto Insurance Company of Wisconsin	WI.....	IA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	25127.....	57-6010814	0.....	0.....		State Auto Property & Casualty Insurance Company	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	25135.....	31-4316080	0.....	0.....		State Automobile Mutual Insurance Company	OH.....	IA.....	Members.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1579525	0.....	0.....		518 Property & Mgmt. Leasing, LLC.....	OH.....	NIA.....	Stateco Financial Services, Inc.....	Ownership.....	.....85.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	74-2977457	0.....	0.....		Beacon Lloyds, Inc.....	TX.....	NIA.....	Beacon National Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-0982037	0.....	0.....		BroadStreet Capital Partners, Inc.....	OH.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	41-0686701	0.....	0.....		C.O. Brown Agency, Inc.....	MN.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....98.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	57-0405583	0.....	0.....		Correll Insurance Group, Inc.....	SC.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-0829544	0.....	0.....		Dimond Bros. Insurance Agency, Inc.....	IL.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	62-1283005	0.....	0.....		The Geny Insurance Agency, Inc.....	TN.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....82.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	34-1056653	0.....	0.....		Insurance Partners Agency, Inc.....	OH.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....90.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	55-0570408	0.....	0.....		Jim Lively Insurance, Inc.....	WV.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....83.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	52-0373470	0.....	0.....		Keller-Stonebraker Insurance, Inc.....	MD.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	35-1689161	0.....	0000809801..		Meridian Insurance Group, Inc.....	IN.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	13-3632811	0.....	0.....		National Environmental Coverage Corporation	NY.....	NIA.....	Rockhill Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0.....	State Auto Group.....	0.....	72-1420919	0.....	0.....		National Environmental Coverage Corporation of the South	LA.....	NIA.....	Rockhill Insurance Company & National Environmental Coverage Corporation	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	1.....
0.....	State Auto Group.....	0.....	16-1248910	0.....	0.....		The Partners, Ellis-Edson-Beaudry-Barrett & Chubb, Inc.	NY.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	06-1551131	0.....	0.....		Patrons Specialty Agency, Inc.....	CT.....	NIA.....	Patrons Mutual Insurance Company of Connecticut	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	26-3664017	0.....	0.....		Pharr Insurance Service LLC.....	GA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....65.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-0706400	0.....	0.....		Pillar Group Risk Management, Inc.....	IA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	27-0231394	0.....	0.....		Risk Evaluation & Design, LLC.....	MO.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	25-1923260	0.....	0001347161..		Rockhill Holding Company.....	DE.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-8406742	0.....	0.....		Rockhill Insurance Services LLC.....	CA.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	01-0712531	0.....	0.....		Rockhill Underwriting Management LLC...	MO.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	41-1440870	0.....	0000915781..		RTW, Inc.....	MN.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1425223	0.....	0.....		SA Software Shelf, Inc.....	OH.....	NIA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1324304	0.....	0000874977..	NASDAQ.....	State Auto Financial Corp.....	OH.....	UDP.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....62.60	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-8756040	0.....	0.....		State Auto Holdings, Inc.....	OH.....	NIA.....	Meridian Insurance Group, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-0676465	0.....	0.....		Stateco Financial Services, Inc.....	OH.....	NIA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	26-1836540	0.....	0.....		Taylor, Turner & Hartsfield, LLC.....	GA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	38-2330200	0.....	0.....		Valenti Trobec Chandler, Inc.....	MI.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
Asterisk Explanation														
1	Ownership is 50/50% by Rockhill Insurance Company and National Environmental Coverage Corporation													

95.1

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
25135.....	31-4316080.....	State Automobile Mutual Insurance Company.....	17,803,629	0	0	0	0	1,934,898	*	0	19,738,527	(13,266,829)
25127.....	57-6010814.....	State Auto Property & Casualty Insurance Company.....	0	0	81,357,627	0	0	(22,836)	*	0	81,334,791	0
31755.....	39-1211058.....	State Auto Insurance Company of Wisconsin.....	0	0	0	0	0	0	*	0	0	0
11017.....	31-1651026.....	State Auto Insurance Company of Ohio.....	0	0	0	0	0	0	*	0	0	0
13811.....	42-0248110.....	Farmers Casualty Insurance Company.....	0	0	0	0	0	0	*	0	0	0
41653.....	46-0368854.....	Milbank Insurance Company.....	0	0	0	0	0	(2,079)	*	0	(2,079)	0
23353.....	35-1135866.....	Meridian Security Insurance Company.....	0	0	0	0	0	(110,002)	*	0	(110,002)	0
10502.....	41-0190580.....	Meridian Citizens Mutual Insurance Company.....	0	0	0	0	0	0	*	0	0	0
11502.....	31-1753341.....	State Auto Florida Insurance Company.....	0	0	0	0	0	0	*	0	0	0
20028.....	75-0899679.....	Beacon National Insurance Company.....	14,984	0	0	0	0	0	*	0	14,984	(8,498,065)
11284.....	75-2829084.....	Beacon Lloyds Insurance Company.....	0	0	0	0	0	0	*	0	0	8,498,065
14923.....	06-0487440.....	Patrons Mutual Insurance Company of Connecticut.....	0	0	0	0	0	(20,370)	*	0	(20,370)	0
32085.....	06-0429900.....	Litchfield Mutual Fire Insurance Company.....	0	0	0	0	0	0	*	0	0	0
28053.....	06-1149847.....	Rockhill Insurance Company.....	0	(13,250,000)	(47,384,295)	0	0	(15,110,239)	*	0	(75,744,534)	8,588,723
30945.....	58-1140651.....	Plaza Insurance Company.....	0	13,250,000	0	0	0	(536,809)	*	0	12,713,191	3,929,677
45934.....	41-1719183.....	American Compensation Insurance Company.....	0	0	(32,376,370)	0	0	397,861	*	0	(31,978,509)	427,429
12311.....	41-1988144.....	Bloomington Compensation Insurance Company.....	0	0	(1,596,962)	0	0	0	*	0	(1,596,962)	321,000
0.....	31-1324304.....	State Auto Financial Corporation.....	(15,170,447)	0	0	0	0	0	.....	0	(15,170,447)	0
0.....	75-1916378.....	Beacon Hill Financial Services, Inc.....	(14,984)	0	0	0	0	0	.....	0	(14,984)	0
0.....	25-1923260.....	Rockhill Holding Company.....	(2,633,182)	0	0	0	0	0	.....	0	(2,633,182)	0
0.....	27-0231394.....	Risk Evaluation & Design, LLC.....	0	0	0	0	0	13,469,576	.....	0	13,469,576	0
9999999.....	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

Detailed Explanation
See Note 26 for detailed list of pooling percentages.

STATE AUTO INSURANCE COMPANY OF OHIO
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		Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will the Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	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?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Supplement be filed with the state of domicile and the NAIC by March 1?	NO
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?	NO
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?	NO
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?	NO
APRIL FILING		
28.	Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
29.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
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?	NO
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
AUGUST FILING		
33.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO


STATE AUTO INSURANCE COMPANY OF OHIO
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:


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STATE AUTO INSURANCE COMPANY OF OHIO
Overflow Page for Write-Ins

Additional Write-ins for Statement of Income:

	1 Current Year	2 Prior Year
1404. Retroactive reinsurance gain (loss).....	12,563	0
1405. Post-retirement health care curtailment gain.....	96,128	0
1497. Summary of remaining write-ins for Line 14.....	108,691	0

Overflow Page for Write-Ins

NONE

2011 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

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SCHEDULE F - PART 5

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

1	2	3	4	5	6	7	Letter of Credit Issuing or Confirming Bank (a)			11	12	13	14	15	16	17	18	19	20
							8	9	10										
Federal ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Recoverable all Items Schedule F, Part 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name	Ceded Balances Payable	Miscellaneous Balances	Other Allowed Offset Items	Cols. 6 + 7 + 11 + 12 + 13 but not in Excess of Col. 5	Subtotal Col. 5 minus Col. 14	Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute	20% of Amount in Col. 16	Smaller of Col. 14 or Col. 17	Smaller of Col. 14 or 20% of Amount in Dispute Included in Col. 5	Total Provision for Unauthorized Reinsurance Smaller of Col. 5 or Cols. 15 + 18 + 19

Other Non-U.S. Insurers

AA-3194128.	00000.....	Allied World Assurance Co Ltd.....	BM.....	.....11	......0	......5	021000089.....	.....1	Citibank NA.....	......6	......0	......0	.....11	......0	......0	......0	......0	......0	......0
AA-3190932.	00000.....	Argo Re.....	BM.....	.....10	......0	......6	021000089.....	.....1	Citibank NA.....	......4	......0	......0	.....10	......0	......0	......0	......0	......0	......0
AA-3194139.	00000.....	Axis Specialty Ltd.....	BM.....	......8	......0	......3	021000089.....	.....1	Citibank NA.....	......5	......0	......0	......8	......0	......0	......0	......0	......0	......0
AA-3190060.	00000.....	Hanover Re (Bermuda) Ltd.....	BM.....	......6	......0	......4	002100021.....	.....1	JPMorgan Chase Bank.....	......2	......0	......0	......6	......0	......0	......0	......0	......0	......0
AA-3190463.	00000.....	Ipcr Ltd.....	BM.....	......5	......0	......5	021000089.....	.....1	Citibank NA.....	......0	......0	......0	......5	......0	......0	......0	......0	......0	......0
AA-3190829.	00000.....	Max Bermuda Ltd.....	BM.....	......3	......0	......1	026009593.....	.....1	Bank of America.....	......2	......0	......0	......3	......0	......0	......0	......0	......0	......0
AA-1320034.	00000.....	Paris Re.....	FR.....	......8	......0	......8	002100021.....	.....1	JPMorgan Chase Bank.....	......0	......0	......0	......8	......0	......0	......0	......0	......0	......0
AA-3190686.	00000.....	Partnerre Grp.....	BM.....	......2	......0	......0	0.....	.....	.....	......5	......0	......0	......2	......0	......0	......0	......0	......0	......0
AA-1340004.	00000.....	R V Versicherung Ag.....	DE.....	......2	......0	......1	021000089.....	.....1	Citibank NA.....	......1	......0	......0	......2	......0	......0	......0	......0	......0	......0
AA-3190870.	00000.....	Validus Reins Ltd.....	BM.....	......0	......0	......0	0.....	.....	.....	.....(4)	......0	......0	.....(4)	......4	......0	......0	......0	......0	......0
AA-3190757.	00000.....	XI Re Ltd.....	BM.....	......1	......0	......3	002100021.....	.....1	JPMorgan Chase Bank.....	.....(2)	......0	......0	......1	......0	......0	......0	......0	......0	......0
0899999.	Total Other Non-U.S. Insurers.....			.....56	......0	.....36	....XXX.....	....XXX.....	.....XXX.....	.....19	......0	......0	.....52	......4	......0	......0	......0	......0	......0
0999999.	Total Affiliates and Others.....			.....56	......0	.....36	....XXX.....	....XXX.....	.....XXX.....	.....19	......0	......0	.....52	......4	......0	......0	......0	......0	......0
9999999.	Totals.....			.....56	......0	.....36	....XXX.....	....XXX.....	.....XXX.....	.....19	......0	......0	.....52	......4	......0	......0	......0	......0	......0

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

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
0175.....	State Auto Group.....	45934.....	41-1719183	0.....	0.....		American Compensation Insurance Company	MN.....	IA.....	RTW, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11284.....	75-2829084	0.....	0.....		Beacon Lloyds Insurance Company.....	TX.....	IA.....	Beacon Lloyds, Inc.....	Attorney-in-Fact.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	20028.....	75-0899679	0.....	0.....		Beacon National Insurance Company.....	TX.....	IA.....	State Auto Holdings, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	12311.....	41-1988144	0.....	0.....		Bloomington Compensation Insurance Company	MN.....	IA.....	American Compensation Insurance Company	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	13811.....	42-0248110	0.....	0.....		Farmers Casualty Insurance Company.....	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	32085.....	06-0429900	0.....	0.....		Litchfield Mutual Fire Insurance Company	CT.....	IA.....	State Automobile Mutual Insurance Co.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	10502.....	41-0190580	0.....	0.....		Meridian Citizens Mutual Insurance Company	IN.....	IA.....	Meridian Insurance Group, Inc.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	23353.....	35-1135866	0.....	0.....		Meridian Security Insurance Company.....	IN.....	IA.....	Meridian Insurance Group, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	41653.....	46-0368854	0.....	0.....		Milbank Insurance Company.....	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	14923.....	06-0487440	0.....	0.....		Patrons Mutual Insurance Company of Connecticut	CT.....	IA.....	State Automobile Mutual Insurance Co.....	Board of Directors.....	.....0.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	30945.....	58-1140651	0.....	0.....		Plaza Insurance Company.....	MO.....	IA.....	Rockhill Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	28053.....	06-1149847	0.....	0.....		Rockhill Insurance Company.....	DE.....	IA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11502.....	31-1753341	0.....	0.....		State Auto Florida Insurance Company.....	IN.....	IA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	11017.....	31-1651026	0.....	0.....		State Auto Insurance Company f Ohio.....	OH.....		State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	31755.....	39-1211058	0.....	0.....		State Auto Insurance Company of Wisconsin	WI.....	IA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	25127.....	57-6010814	0.....	0.....		State Auto Property & Casualty Insurance Company	IA.....	IA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0175.....	State Auto Group.....	25135.....	31-4316080	0.....	0.....		State Automobile Mutual Insurance Company	OH.....	IA.....	Members.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1579525	0.....	0.....		518 Property & Mgmt. Leasing, LLC.....	OH.....	NIA.....	Stateco Financial Services, Inc.....	Ownership.....	.....85.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	74-2977457	0.....	0.....		Beacon Lloyds, Inc.....	TX.....	NIA.....	Beacon National Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-0982037	0.....	0.....		BroadStreet Capital Partners, Inc.....	OH.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	41-0686701	0.....	0.....		C.O. Brown Agency, Inc.....	MN.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....98.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	57-0405583	0.....	0.....		Correll Insurance Group, Inc.....	SC.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-0829544	0.....	0.....		Dimond Bros. Insurance Agency, Inc.....	IL.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	62-1283005	0.....	0.....		The Geny Insurance Agency, Inc.....	TN.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....82.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	34-1056653	0.....	0.....		Insurance Partners Agency, Inc.....	OH.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....90.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	55-0570408	0.....	0.....		Jim Lively Insurance, Inc.....	WV.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....83.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	52-0373470	0.....	0.....		Keller-Stonebraker Insurance, Inc.....	MD.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	35-1689161	0.....	0000809801..		Meridian Insurance Group, Inc.....	IN.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	13-3632811	0.....	0.....		National Environmental Coverage Corporation	NY.....	NIA.....	Rockhill Insurance Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0.....	State Auto Group.....	0.....	72-1420919	0.....	0.....		National Environmental Coverage Corporation of the South	LA.....	NIA.....	Rockhill Insurance Company & National Environmental Coverage Corporation	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	1.....
0.....	State Auto Group.....	0.....	16-1248910	0.....	0.....		The Partners, Ellis-Edson-Beaudry-Barrett & Chubb, Inc.	NY.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	06-1551131	0.....	0.....		Patrons Specialty Agency, Inc.....	CT.....	NIA.....	Patrons Mutual Insurance Company of Connecticut	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	26-3664017	0.....	0.....		Pharr Insurance Service LLC.....	GA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....65.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-0706400	0.....	0.....		Pillar Group Risk Management, Inc.....	IA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	27-0231394	0.....	0.....		Risk Evaluation & Design, LLC.....	MO.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	25-1923260	0.....	0001347161..		Rockhill Holding Company.....	DE.....	NIA.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-8406742	0.....	0.....		Rockhill Insurance Services LLC.....	CA.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	01-0712531	0.....	0.....		Rockhill Underwriting Management LLC...	MO.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	41-1440870	0.....	0000915781..		RTW, Inc.....	MN.....	NIA.....	Rockhill Holding Company.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1425223	0.....	0.....		SA Software Shelf, Inc.....	OH.....	NIA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-1324304	0.....	0000874977..	NASDAQ.....	State Auto Financial Corp.....	OH.....	UDP.....	State Automobile Mutual Insurance Co.....	Ownership.....	.....62.60	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	20-8756040	0.....	0.....		State Auto Holdings, Inc.....	OH.....	NIA.....	Meridian Insurance Group, Inc.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	31-0676465	0.....	0.....		Stateco Financial Services, Inc.....	OH.....	NIA.....	State Auto Financial Corp.....	Ownership.....	.....100.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	26-1836540	0.....	0.....		Taylor, Turner & Hartsfield, LLC.....	GA.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
0.....	State Auto Group.....	0.....	38-2330200	0.....	0.....		Valenti Trobec Chandler, Inc.....	MI.....	NIA.....	BroadStreet Capital Partners, Inc.....	Ownership.....	.....80.00	State Automobile Mutual Insurance Co.....	0.....
Asterisk Explanation														
1	Ownership is 50/50% by Rockhill Insurance Company and National Environmental Coverage Corporation													

95.1