



# ANNUAL STATEMENT

For the Year Ended December 31, 2011

of the Condition and Affairs of the

## PROGRESSIVE ADVANCED INSURANCE COMPANY

NAIC Group Code.....155	NAIC Company Code..... 11851	Employer's ID Number..... 62-0484104
(Current Period) (Prior Period)		
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... June 5, 1930	Commenced Business..... August 26, 1930	
Statutory Home Office	6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... 44143-2182	
	(Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office	6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... 44143-2182	440-461-5000
	(Street and Number) (City or Town, State and Zip Code)	(Area Code) (Telephone Number)
Mail Address	P.O. BOX 89490..... CLEVELAND ..... OH ..... 44101-6490	
	(Street and Number or P. O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records	6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... 44143-2182	440-395-4460
	(Street and Number) (City or Town, State and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address	PROGRESSIVE.COM	
Statutory Statement Contact	MARY BETH ANDREANO	440-395-4460
	(Name)	(Area Code) (Telephone Number) (Extension)
	FINANCIAL_REPORTING@PROGRESSIVE.COM	440-446-7168
	(E-Mail Address)	(Fax Number)

### POLICYHOLDER SERVICES AND CLAIMS REPORTING -- 1-800-PROGRESSIVE (1-800-776-4737)

### OFFICERS

Name	Title	Name	Title
SANJAY MAHESH VYAS #	PRESIDENT	MICHAEL ROBERT UTH	SECRETARY
CLARK HAROLD IBRAHIM KHAYAT #	TREASURER		

### OTHER

SCOTT EDWARD COLEMAN	(ASST. TREASURER)	JAMES RUSSELL HAAS	(VICE PRESIDENT)
CAROLINE MAE KORAN	(VICE PRESIDENT)	KAREN ANN KOSUDA	(ASST. SECRETARY)
MARIANN WOJTKUN MARSHALL	(VICE PRESIDENT)		

### DIRECTORS OR TRUSTEES

TOBY KRAMER ALFRED #	JAMES RUSSELL HAAS	CAROLINE MAE KORAN	SANJAY MAHESH VYAS #
SCOTT WESLEY ZIEGLER			

State of..... OHIO  
County of..... CUYAHOGA

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) SANJAY MAHESH VYAS #	(Signature) MICHAEL ROBERT UTH	(Signature) SCOTT EDWARD COLEMAN	
1. (Printed Name) PRESIDENT	2. (Printed Name) SECRETARY	3. (Printed Name) ASSISTANT TREASURER	
(Title)	(Title)	(Title)	
Subscribed and sworn to before me		a. Is this an original filing?	
This <u>16TH</u> day of <u>FEBRUARY, 2012</u>		b. If no      1. State the amendment number	Yes [X]   No [ ]
		2. Date filed	<hr/>
		3. Number of pages attached	<hr/>

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 0 2 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		2,350
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	2,350

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF ALABAMA 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.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		2,001
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					(1,240)	(1,240)			0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	(1,240)	(1,240)	0	0	0	0	2,001

## DETAILS OF WRITE-INS

3401.....	0					0				0		
3402.....	0					0				0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF ARKANSAS 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.....	0					0			0			
2.1 Allied lines.....	0					0			0			
2.2 Multiple peril crop.....	0					0			0			
2.3 Federal flood.....	0					0			0			
3. Farmowners multiple peril.....	0					0			0			
4. Homeowners multiple peril.....	0					0			0			
5.1 Commercial multiple peril (non-liability portion).....	0					0			0			
5.2 Commercial multiple peril (liability portion).....	0					0			0			
6. Mortgage guaranty.....	0					0			0			
8. Ocean marine.....	0					0			0			
9. Inland marine.....	0					0			0			
10. Financial guaranty.....	0					0			0			
11. Medical professional liability.....	0					0			0			
12. Earthquake.....	0					0			0			
13. Group accident and health (b).....	0					0			0			
14. Credit A & H (group and individual).....	0					0			0			
15.1 Collectively renewable A&H (b).....	0					0			0			
15.2 Non-cancelable A & H (b).....	0					0			0			
15.3 Guaranteed renewable A & H (b).....	0					0			0			
15.4 Non-renewable for stated reasons only (b).....	0					0			0			
15.5 Other accident only.....	0					0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0			0			
15.7 All other A & H (b).....	0					0			0			
15.8 Federal employees health benefits program premium (b).....	0					0			0			
16. Workers' compensation.....	0					0			0			
17.1 Other liability-occurrence.....	0					0			0			
17.2 Other liability-claims-made.....	0					0			0			
17.3 Excess workers' compensation.....	0					0			0			
18. Products liability.....	0					0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0					0			0			
19.2 Other private passenger auto liability.....	0					0			0			5,320
19.3 Commercial auto no-fault (personal injury protection).....	0					0			0			
19.4 Other commercial auto liability.....	0					0			0			
21.1 Private passenger auto physical damage.....	0					(550)	(550)		(162)	(162)		
21.2 Commercial auto physical damage.....	0					0			0			
22. Aircraft (all perils).....	0					0			0			
23. Fidelity.....	0					0			0			
24. Surety.....	0					0			0			
26. Burglary and theft.....	0					0			0			
27. Boiler and machinery.....	0					0			0			
28. Credit.....	0					0			0			
30. Warranty.....	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).....	0	0	0	0	0	(550)	(550)	0	(162)	(162)	0	5,320

## DETAILS OF WRITE-INS

3401.	0					0			0			
3402.	0					0			0			
3403.	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 0 3 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....	919,463	904,109		407,368	395,831	389,099	30,339	(15)	(675)	3,275	20,445	22,898
10. Financial guaranty.....		0				0				0		
11. Medical professional liability.....		0				0				0		
12. Earthquake.....		0				0				0		
13. Group accident and health (b).....		0				0				0		
14. Credit A & H (group and individual).....		0				0				0		
15.1 Collectively renewable A&H (b).....		0				0				0		
15.2 Non-cancelable A & H (b).....		0				0				0		
15.3 Guaranteed renewable A & H (b).....		0				0				0		
15.4 Non-renewable for stated reasons only (b).....		0				0				0		
15.5 Other accident only.....		0				0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0				0				0		
15.7 All other A & H (b).....		0				0				0		
15.8 Federal employees health benefits program premium (b).....		0				0				0		
16. Workers' compensation.....		0				0				0		
17.1 Other liability-occurrence.....	493,208	505,197		222,627	289,853	299,510	72,099		(825)	12,562	12,737	12,281
17.2 Other liability-claims-made.....		0				0				0		
17.3 Excess workers' compensation.....		0				0				0		
18. Products liability.....		0				0				0		
19.1 Private passenger auto no-fault (personal injury protection).....		0			37,973	38,271	41,396	5,161	5,252	12,432		
19.2 Other private passenger auto liability.....	116,311,878	115,303,666		29,780,115	60,901,580	63,004,483	54,831,456	1,289,103	1,383,124	4,808,335	174,238	2,898,708
19.3 Commercial auto no-fault (personal injury protection).....		0				0				0		
19.4 Other commercial auto liability.....		0				0				0		
21.1 Private passenger auto physical damage.....	67,093,543	66,221,362		17,833,401	46,472,478	46,144,814	13,049	78,615	107,646	182,046	204,675	1,672,044
21.2 Commercial auto physical damage.....		0				0				0		
22. Aircraft (all perils).....		0				0				0		
23. Fidelity.....		0				0				0		
24. Surety.....		0				0				0		
26. Burglary and theft.....		0				0				0		
27. Boiler and machinery.....		0				0				0		
28. Credit.....		0				0				0		
30. Warranty.....		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).....	184,818,092	182,934,334	0	48,243,511	108,097,715	109,876,177	54,988,339	1,372,864	1,494,522	5,018,650	412,095	4,605,931

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....2,641,617.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF CALIFORNIA 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.....		0				0			0			
2.1 Allied lines.....		0				0			0			
2.2 Multiple peril crop.....		0				0			0			
2.3 Federal flood.....		0				0			0			
3. Farmowners multiple peril.....		0				0			0			
4. Homeowners multiple peril.....		0				0			0			
5.1 Commercial multiple peril (non-liability portion).....		0				0			0			
5.2 Commercial multiple peril (liability portion).....		0				0			0			
6. Mortgage guaranty.....		0				0			0			
8. Ocean marine.....		0				0			0			
9. Inland marine.....		0				0			0			
10. Financial guaranty.....		0				0			0			
11. Medical professional liability.....		0				0			0			
12. Earthquake.....		0				0			0			
13. Group accident and health (b).....		0				0			0			
14. Credit A & H (group and individual).....		0				0			0			
15.1 Collectively renewable A&H (b).....		0				0			0			
15.2 Non-cancelable A & H (b).....		0				0			0			
15.3 Guaranteed renewable A & H (b).....		0				0			0			
15.4 Non-renewable for stated reasons only (b).....		0				0			0			
15.5 Other accident only.....		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0				0			0			
15.7 All other A & H (b).....		0				0			0			
15.8 Federal employees health benefits program premium (b).....		0				0			0			
16. Workers' compensation.....		0				0			0			
17.1 Other liability-occurrence.....		0				0			0			
17.2 Other liability-claims-made.....		0				0			0			
17.3 Excess workers' compensation.....		0				0			0			
18. Products liability.....		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....		0				0			0			
19.2 Other private passenger auto liability.....	23,126	36,284			24,295	15,787	2,394		(1,675)	.578	2,589	3,388
19.3 Commercial auto no-fault (personal injury protection).....		0				0			0			
19.4 Other commercial auto liability.....		0				0			0			
21.1 Private passenger auto physical damage.....	13,045	20,351			5,541	6,367	(933)	.20	(7)	.45	1,484	1,911
21.2 Commercial auto physical damage.....		0				0			0			
22. Aircraft (all perils).....		0				0			0			
23. Fidelity.....		0				0			0			
24. Surety.....		0				0			0			
26. Burglary and theft.....		0				0			0			
27. Boiler and machinery.....		0				0			0			
28. Credit.....		0				0			0			
30. Warranty.....		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).....	36,171	.56,635	0	0	29,836	.22,154	1,461	.20	(1,682)	.623	4,073	5,299

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....2,279.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 0 6 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,389
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,389

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 0 9 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,450
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,450

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF DELAWARE 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		1,800
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	1,800

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 1 0 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0			0			
2.1 Allied lines.....	0					0			0			
2.2 Multiple peril crop.....	0					0			0			
2.3 Federal flood.....	0					0			0			
3. Farmowners multiple peril.....	0					0			0			
4. Homeowners multiple peril.....	0					0			0			
5.1 Commercial multiple peril (non-liability portion).....	0					0			0			
5.2 Commercial multiple peril (liability portion).....	0					0			0			
6. Mortgage guaranty.....	0					0			0			
8. Ocean marine.....	0					0			0			
9. Inland marine.....	0					0			0			
10. Financial guaranty.....	0					0			0			
11. Medical professional liability.....	0					0			0			
12. Earthquake.....	0					0			0			
13. Group accident and health (b).....	0					0			0			
14. Credit A & H (group and individual).....	0					0			0			
15.1 Collectively renewable A&H (b).....	0					0			0			
15.2 Non-cancelable A & H (b).....	0					0			0			
15.3 Guaranteed renewable A & H (b).....	0					0			0			
15.4 Non-renewable for stated reasons only (b).....	0					0			0			
15.5 Other accident only.....	0					0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0			0			
15.7 All other A & H (b).....	0					0			0			
15.8 Federal employees health benefits program premium (b).....	0					0			0			
16. Workers' compensation.....	0					0			0			
17.1 Other liability-occurrence.....	0					0			0			
17.2 Other liability-claims-made.....	0					0			0			
17.3 Excess workers' compensation.....	0					0			0			
18. Products liability.....	0					0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0					0			0			
19.2 Other private passenger auto liability.....	0					.848,333	.48,333	.19,948	.19,948			5,100
19.3 Commercial auto no-fault (personal injury protection).....	0					0			0			
19.4 Other commercial auto liability.....	0					0			0			
21.1 Private passenger auto physical damage.....	0					0			0			
21.2 Commercial auto physical damage.....	0					0			0			
22. Aircraft (all perils).....	0					0			0			
23. Fidelity.....	0					0			0			
24. Surety.....	0					0			0			
26. Burglary and theft.....	0					0			0			
27. Boiler and machinery.....	0					0			0			
28. Credit.....	0					0			0			
30. Warranty.....	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).....	0	0	0	0	0	.848,333	.48,333	.0	.19,948	.19,948	0	5,100

## DETAILS OF WRITE-INS

3401.	0					0			0			
3402.	0					0			0			
3403.	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF GEORGIA 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....	4,891,423	5,180,206		1,311,803	3,028,369	3,217,150	2,889,287	.88,627	50,115	215,871	.817	.193,967
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....	3,159,806	3,322,351		.858,573	2,063,273	2,003,962	9,562	-(2,985)	(5,282)	.3,936	.498	.128,882
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	8,051,229	8,502,557	0	2,170,376	5,091,642	5,221,112	2,898,849	.85,642	.44,833	.219,807	.1,315	.322,849

## DETAILS OF WRITE-INS

3401.....		0					0			0		
3402.....		0					0			0		
3403.....		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 \$....90,522.

(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....155 NAIC Company Code....11851

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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....	8,416,777	8,058,834		3,828,504	4,003,682	4,129,407	458,482	40,015	46,095	36,429	312,520	169,742
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....	2,903,402	2,928,396		1,317,128	763,994	1,099,946	943,614	13,643	15,012	98,165	113,034	60,318
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....	40,717,460	39,535,496		10,478,271	24,837,512	27,408,985	16,737,968	2,312,927	3,155,325	4,182,251	7,587	1,078,406
19.2 Other private passenger auto liability.....	381,179,645	373,055,110		98,153,075	175,176,016	204,462,050	169,073,825	3,553,626	7,066,232	17,178,596	374,170	9,518,626
19.3 Commercial auto no-fault (personal injury protection).....	0	0					0			0		
19.4 Other commercial auto liability.....	0	0					0			0		
21.1 Private passenger auto physical damage.....	213,669,634	207,529,963		56,661,481	158,216,647	156,743,475	122,451	201,320	258,925	436,696	417,442	5,099,456
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	646,886,918	631,107,799	0	170,438,459	362,997,851	393,843,863	187,336,340	6,121,531	10,541,589	21,932,137	1,224,753	15,926,548

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....9,177,157.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF HAWAII 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		2,200
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	2,200

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF IOWA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 1 6 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	621

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF IDAHO 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		2,500
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	2,500

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 1 4 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		3,897
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	3,897

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 1 5 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,404
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,404

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 1 7 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		660
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	660

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF KENTUCKY 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	710

## DETAILS OF WRITE-INS

3401.		0					0			0		
3402.		0					0			0		
3403.		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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF LOUISIANA 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		4,185
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	4,185

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF MARYLAND 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.....		0					0			0			
2.1 Allied lines.....		0					0			0			
2.2 Multiple peril crop.....		0					0			0			
2.3 Federal flood.....		0					0			0			
3. Farmowners multiple peril.....		0					0			0			
4. Homeowners multiple peril.....		0					0			0			
5.1 Commercial multiple peril (non-liability portion).....		0					0			0			
5.2 Commercial multiple peril (liability portion).....		0					0			0			
6. Mortgage guaranty.....		0					0			0			
8. Ocean marine.....		0					0			0			
9. Inland marine.....	1,027,076	1,050,165		.472,253	.698,935	.694,676	.57,099	.2,175	.1,581	.6,272	.43,476	.22,649	
10. Financial guaranty.....		0					0			0			
11. Medical professional liability.....		0					0			0			
12. Earthquake.....		0					0			0			
13. Group accident and health (b).....		0					0			0			
14. Credit A & H (group and individual).....		0					0			0			
15.1 Collectively renewable A&H (b).....		0					0			0			
15.2 Non-cancelable A & H (b).....		0					0			0			
15.3 Guaranteed renewable A & H (b).....		0					0			0			
15.4 Non-renewable for stated reasons only (b).....		0					0			0			
15.5 Other accident only.....		0					0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0			
15.7 All other A & H (b).....		0					0			0			
15.8 Federal employees health benefits program premium (b).....		0					0			0			
16. Workers' compensation.....		0					0			0			
17.1 Other liability-occurrence.....	460,358	.471,905		.210,467	.184,838	.495,254	.471,799	.1,408	.25,419	.41,107	.20,758	.10,149	
17.2 Other liability-claims-made.....		0					0			0			
17.3 Excess workers' compensation.....		0					0			0			
18. Products liability.....		0					0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	5,097,198	.5,784,786		.1,111,579	.3,254,514	.2,731,561	.1,082,000	.50,026	.9,471	.288,836	.1,702	.112,657	
19.2 Other private passenger auto liability.....	45,115,712	51,375,562		10,489,546	.29,567,986	.27,332,054	.26,226,835	.617,643	.605,776	.2,070,209	.84,216	.996,755	
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0			
19.4 Other commercial auto liability.....		0					0			0			
21.1 Private passenger auto physical damage.....	24,973,817	27,549,813		.6,202,878	.16,643,892	.16,240,063	(.680,717)	.19,065	.9	.39,117	.98,861	.552,029	
21.2 Commercial auto physical damage.....		0					0			0			
22. Aircraft (all perils).....		0					0			0			
23. Fidelity.....		0					0			0			
24. Surety.....		0					0			0			
26. Burglary and theft.....		0					0			0			
27. Boiler and machinery.....		0					0			0			
28. Credit.....		0					0			0			
30. Warranty.....		0					0			0			
34. Aggregate write-ins for other lines of business.....	0	0		0	0	0	0	0	0	0	0	0	
35. TOTALS (a).....	.76,674,161	.86,232,231		.0	.18,486,723	.50,350,165	.47,493,608	.27,157,016	.690,317	.642,256	.2,445,541	.249,013	.1,694,239

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$.861,228.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF MAINE 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		600
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	600

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 2 6 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0			83,519	..99,304	.51,745	.48	(1,401)	10,892		
19.2 Other private passenger auto liability.....	31,592,327	29,156,516		8,269,534	11,623,463	14,869,501	7,697,343	.73,033	.419,576	588,599	3,553	.698,299
19.3 Commercial auto no-fault (personal injury protection).....		0				0			0			
19.4 Other commercial auto liability.....		0				0			0			
21.1 Private passenger auto physical damage.....	15,417,851	14,132,087		4,016,525	11,797,967	11,844,737	283,312	.18,466	.37,363	31,989	2,043	.340,759
21.2 Commercial auto physical damage.....		0				0			0			
22. Aircraft (all perils).....		0				0			0			
23. Fidelity.....		0				0			0			
24. Surety.....		0				0			0			
26. Burglary and theft.....		0				0			0			
27. Boiler and machinery.....		0				0			0			
28. Credit.....		0				0			0			
30. Warranty.....		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).....	47,010,178	43,288,603	0	12,286,059	23,504,949	26,813,542	8,032,400	.91,547	.455,538	631,480	.5,596	1,039,058

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$.820,680.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 2 5 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					(2,955)	(2,949)	25,000	1,356	.276	.2,556	(1,322)
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					(1,659)	(1,659)	0	.70	.70		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	(4,614)	(4,608)	25,000	1,426	.346	.2,556	(1,322)

## DETAILS OF WRITE-INS

3401.	0					0				0		
3402.	0					0				0		
3403.	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 2 7 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,900
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,900

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 4 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		4,030
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	4,030

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 5 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		797
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	797

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NEBRASKA 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	640

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 0 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,620
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,620

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 2 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,650
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,650

## DETAILS OF WRITE-INS

3401.....	0					0				0		
3402.....	0					0				0		
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 2 9 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		4,356
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	4,356

## DETAILS OF WRITE-INS

3401.....	0					0				0		
3402.....	0					0				0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF NEW YORK 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....	212	158		65			7	7		0		.5
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....	164	.261		.76			(6)	13		0		.4
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....	21,609,503	20,346,606		5,797,236	12,884,600	.15,051,826	11,096,273	1,955,038	.2,768,357	3,455,078	.2,503	.641,353
19.2 Other private passenger auto liability.....	40,289,972	39,265,695		10,041,835	15,795,931	.22,036,704	20,295,917	.502,187	1,518,739	2,901,186	.4,595	1,147,343
19.3 Commercial auto no-fault (personal injury protection).....		0					0		0			
19.4 Other commercial auto liability.....		0					0		0			
21.1 Private passenger auto physical damage.....	20,952,894	20,066,958		5,347,567	18,660,215	.18,009,760	(236,280)	.39,830	44,131	.37,539	.2,231	.467,571
21.2 Commercial auto physical damage.....		0					0		0			
22. Aircraft (all perils).....		0					0		0			
23. Fidelity.....		0					0		0			
24. Surety.....		0					0		0			
26. Burglary and theft.....		0					0		0			
27. Boiler and machinery.....		0					0		0			
28. Credit.....		0					0		0			
30. Warranty.....		0					0		0			
34. Aggregate write-ins for other lines of business.....	0	0		0	0		0	0	0	0		0
35. TOTALS (a).....	82,852,745	79,679,678		.21,186,779	47,340,746	.55,098,291	31,155,930	.2,497,055	.4,331,227	.6,393,803	.9,329	.2,256,276

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....1,012,270.

(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....155 NAIC Company Code....11851

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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		8,071
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	8,071

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 7 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0				0		0		0			
2.1 Allied lines.....	0				0		0		0			
2.2 Multiple peril crop.....	0				0		0		0			
2.3 Federal flood.....	0				0		0		0			
3. Farmowners multiple peril.....	0				0		0		0			
4. Homeowners multiple peril.....	0				0		0		0			
5.1 Commercial multiple peril (non-liability portion).....	0				0		0		0			
5.2 Commercial multiple peril (liability portion).....	0				0		0		0			
6. Mortgage guaranty.....	0				0		0		0			
8. Ocean marine.....	0				0		0		0			
9. Inland marine.....	0				0		0		0			
10. Financial guaranty.....	0				0		0		0			
11. Medical professional liability.....	0				0		0		0			
12. Earthquake.....	0				0		0		0			
13. Group accident and health (b).....	0				0		0		0			
14. Credit A & H (group and individual).....	0				0		0		0			
15.1 Collectively renewable A&H (b).....	0				0		0		0			
15.2 Non-cancelable A & H (b).....	0				0		0		0			
15.3 Guaranteed renewable A & H (b).....	0				0		0		0			
15.4 Non-renewable for stated reasons only (b).....	0				0		0		0			
15.5 Other accident only.....	0				0		0		0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0				0		0		0			
15.7 All other A & H (b).....	0				0		0		0			
15.8 Federal employees health benefits program premium (b).....	0				0		0		0			
16. Workers' compensation.....	0				0		0		0			
17.1 Other liability-occurrence.....	0				0		0		0			
17.2 Other liability-claims-made.....	0				0		0		0			
17.3 Excess workers' compensation.....	0				0		0		0			
18. Products liability.....	0				0		0		0			
19.1 Private passenger auto no-fault (personal injury protection).....	0				0		0		0			
19.2 Other private passenger auto liability.....	0				0		0		0			1,532
19.3 Commercial auto no-fault (personal injury protection).....	0				0		0		0			
19.4 Other commercial auto liability.....	0				0		0		0			
21.1 Private passenger auto physical damage.....	0				0		0		0			
21.2 Commercial auto physical damage.....	0				0		0		0			
22. Aircraft (all perils).....	0				0		0		0			
23. Fidelity.....	0				0		0		0			
24. Surety.....	0				0		0		0			
26. Burglary and theft.....	0				0		0		0			
27. Boiler and machinery.....	0				0		0		0			
28. Credit.....	0				0		0		0			
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,532

## DETAILS OF WRITE-INS

3401.....	0				0		0		0			
3402.....	0				0		0		0			
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF OREGON DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 8 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,650
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,650

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 3 9 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....	551,101	505,421		256,029	233,656	255,873	32,918	.55	2,531	3,413	11,679	11,850
10. Financial guaranty.....		0				0				0		
11. Medical professional liability.....		0				0				0		
12. Earthquake.....		0				0				0		
13. Group accident and health (b).....		0				0				0		
14. Credit A & H (group and individual).....		0				0				0		
15.1 Collectively renewable A&H (b).....		0				0				0		
15.2 Non-cancelable A & H (b).....		0				0				0		
15.3 Guaranteed renewable A & H (b).....		0				0				0		
15.4 Non-renewable for stated reasons only (b).....		0				0				0		
15.5 Other accident only.....		0				0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0				0				0		
15.7 All other A & H (b).....		0				0				0		
15.8 Federal employees health benefits program premium (b).....		0				0				0		
16. Workers' compensation.....		0				0				0		
17.1 Other liability-occurrence.....	316,762	304,366		141,688	21,712	27,800	26,133		1,149	2,499	6,910	6,803
17.2 Other liability-claims-made.....		0				0				0		
17.3 Excess workers' compensation.....		0				0				0		
18. Products liability.....		0				0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	13,864,778	13,263,708		3,518,083	8,446,180	9,257,761	4,341,957	.294,264	.359,324	408,311	.3,265	.320,881
19.2 Other private passenger auto liability.....	92,253,400	89,199,494		23,716,074	36,926,610	.47,103,584	43,023,319	.883,863	2,363,142	5,767,802	.80,138	.2,135,567
19.3 Commercial auto no-fault (personal injury protection).....		0				0			0			
19.4 Other commercial auto liability.....		0				0			0			
21.1 Private passenger auto physical damage.....	57,270,317	54,868,349		15,089,010	44,550,812	44,298,451	179,510	.47,260	.50,350	101,129	.94,172	.1,329,274
21.2 Commercial auto physical damage.....		0				0				0		
22. Aircraft (all perils).....		0				0				0		
23. Fidelity.....		0				0				0		
24. Surety.....		0				0				0		
26. Burglary and theft.....		0				0				0		
27. Boiler and machinery.....		0				0				0		
28. Credit.....		0				0				0		
30. Warranty.....		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).....	164,256,358	158,141,338	0	42,720,884	90,178,970	100,943,469	47,603,837	1,225,442	2,776,496	6,283,154	196,164	.3,804,375

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....2,420,189.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 0 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		750
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	750

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 1 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		600
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	600

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 2 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,000
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,000

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF TENNESSEE 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		5,436
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	5,436

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF TEXAS 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....	5,918,925	5,598,981		2,692,789	2,675,260	2,789,752	338,119	37,800	42,658	23,469	236,920	112,340
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....	1,632,910	1,646,667		.742,270	.267,591	.277,388	.373,570	.12,235	-(10,731)	.41,997	.72,629	.31,081
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....	.51,468	.60,143		.25,408	.12,136	.10,621	-(544)	-(93)	.78	.85	.984	
19.2 Other private passenger auto liability.....	509,350	.588,008		.243,924	.156,035	.71,435	.196,066	.12,429	7,530	.22,913	.861	.9,751
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....	891,722	1,000,906		.419,705	.658,407	.660,115	-(24,371)	4,018	2,345	.1,523	.1,466	.18,899
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	9,004,375	8,894,705	0	4,124,096	3,769,429	3,809,311	.882,840	.66,482	.41,709	.89,980	.311,961	.173,055

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....121,313.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF UTAH DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 5 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	0
												775

## DETAILS OF WRITE-INS

3401.....	0					0				0		
3402.....	0					0				0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 7 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....	94,513	80,253		25,965	118,590	219,641	125,141	8,390	14,415	6,624	32	2,531
19.2 Other private passenger auto liability.....	50,192,457	42,949,679		14,300,244	16,306,369	26,765,968	13,886,208	65,437	699,681	800,547	23,163	1,360,342
19.3 Commercial auto no-fault (personal injury protection).....	0				0		0		0			
19.4 Other commercial auto liability.....	0				0		0		0			
21.1 Private passenger auto physical damage.....	23,896,639	20,347,786		6,893,822	17,367,511	17,538,655	579,319	(2,877)	22,462	39,372	12,012	.588,087
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	74,183,609	63,377,718	0	21,220,031	33,792,470	44,524,264	14,590,668	.70,950	.736,558	.846,543	.35,207	1,950,960

## DETAILS OF WRITE-INS

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

(a) Finance and service charges not included in Lines 1 to 35 \$....1,207,059.

(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....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF VERMONT 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	829

## DETAILS OF WRITE-INS

3401.....	0						0			0		
3402.....	0						0			0		
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 8 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0					0				0		
2.1 Allied lines.....	0					0				0		
2.2 Multiple peril crop.....	0					0				0		
2.3 Federal flood.....	0					0				0		
3. Farmowners multiple peril.....	0					0				0		
4. Homeowners multiple peril.....	0					0				0		
5.1 Commercial multiple peril (non-liability portion).....	0					0				0		
5.2 Commercial multiple peril (liability portion).....	0					0				0		
6. Mortgage guaranty.....	0					0				0		
8. Ocean marine.....	0					0				0		
9. Inland marine.....	0					0				0		
10. Financial guaranty.....	0					0				0		
11. Medical professional liability.....	0					0				0		
12. Earthquake.....	0					0				0		
13. Group accident and health (b).....	0					0				0		
14. Credit A & H (group and individual).....	0					0				0		
15.1 Collectively renewable A&H (b).....	0					0				0		
15.2 Non-cancelable A & H (b).....	0					0				0		
15.3 Guaranteed renewable A & H (b).....	0					0				0		
15.4 Non-renewable for stated reasons only (b).....	0					0				0		
15.5 Other accident only.....	0					0				0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0					0				0		
15.7 All other A & H (b).....	0					0				0		
15.8 Federal employees health benefits program premium (b).....	0					0				0		
16. Workers' compensation.....	0					0				0		
17.1 Other liability-occurrence.....	0					0				0		
17.2 Other liability-claims-made.....	0					0				0		
17.3 Excess workers' compensation.....	0					0				0		
18. Products liability.....	0					0				0		
19.1 Private passenger auto no-fault (personal injury protection).....	0					0				0		
19.2 Other private passenger auto liability.....	0					0				0		1,600
19.3 Commercial auto no-fault (personal injury protection).....	0					0				0		
19.4 Other commercial auto liability.....	0					0				0		
21.1 Private passenger auto physical damage.....	0					0				0		
21.2 Commercial auto physical damage.....	0					0				0		
22. Aircraft (all perils).....	0					0				0		
23. Fidelity.....	0					0				0		
24. Surety.....	0					0				0		
26. Burglary and theft.....	0					0				0		
27. Boiler and machinery.....	0					0				0		
28. Credit.....	0					0				0		
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,600

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF WISCONSIN 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.....		0					0			0		
2.1 Allied lines.....		0					0			0		
2.2 Multiple peril crop.....		0					0			0		
2.3 Federal flood.....		0					0			0		
3. Farmowners multiple peril.....		0					0			0		
4. Homeowners multiple peril.....		0					0			0		
5.1 Commercial multiple peril (non-liability portion).....		0					0			0		
5.2 Commercial multiple peril (liability portion).....		0					0			0		
6. Mortgage guaranty.....		0					0			0		
8. Ocean marine.....		0					0			0		
9. Inland marine.....		0					0			0		
10. Financial guaranty.....		0					0			0		
11. Medical professional liability.....		0					0			0		
12. Earthquake.....		0					0			0		
13. Group accident and health (b).....		0					0			0		
14. Credit A & H (group and individual).....		0					0			0		
15.1 Collectively renewable A&H (b).....		0					0			0		
15.2 Non-cancelable A & H (b).....		0					0			0		
15.3 Guaranteed renewable A & H (b).....		0					0			0		
15.4 Non-renewable for stated reasons only (b).....		0					0			0		
15.5 Other accident only.....		0					0			0		
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0					0			0		
15.7 All other A & H (b).....		0					0			0		
15.8 Federal employees health benefits program premium (b).....		0					0			0		
16. Workers' compensation.....		0					0			0		
17.1 Other liability-occurrence.....		0					0			0		
17.2 Other liability-claims-made.....		0					0			0		
17.3 Excess workers' compensation.....		0					0			0		
18. Products liability.....		0					0			0		
19.1 Private passenger auto no-fault (personal injury protection).....		0					0			0		
19.2 Other private passenger auto liability.....		0					0			0		800
19.3 Commercial auto no-fault (personal injury protection).....		0					0			0		
19.4 Other commercial auto liability.....		0					0			0		
21.1 Private passenger auto physical damage.....		0					0			0		
21.2 Commercial auto physical damage.....		0					0			0		
22. Aircraft (all perils).....		0					0			0		
23. Fidelity.....		0					0			0		
24. Surety.....		0					0			0		
26. Burglary and theft.....		0					0			0		
27. Boiler and machinery.....		0					0			0		
28. Credit.....		0					0			0		
30. Warranty.....		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).....	0	0	0	0	0	0	0	0	0	0	0	800

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0.

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

## EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....155 NAIC Company Code....11851

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

\* 1 1 8 5 1 2 0 1 1 4 3 0 4 9 0 0 0 \*

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0				0				0			
2.1 Allied lines.....	0				0				0			
2.2 Multiple peril crop.....	0				0				0			
2.3 Federal flood.....	0				0				0			
3. Farmowners multiple peril.....	0				0				0			
4. Homeowners multiple peril.....	0				0				0			
5.1 Commercial multiple peril (non-liability portion).....	0				0				0			
5.2 Commercial multiple peril (liability portion).....	0				0				0			
6. Mortgage guaranty.....	0				0				0			
8. Ocean marine.....	0				0				0			
9. Inland marine.....	0				0				0			
10. Financial guaranty.....	0				0				0			
11. Medical professional liability.....	0				0				0			
12. Earthquake.....	0				0				0			
13. Group accident and health (b).....	0				0				0			
14. Credit A & H (group and individual).....	0				0				0			
15.1 Collectively renewable A&H (b).....	0				0				0			
15.2 Non-cancelable A & H (b).....	0				0				0			
15.3 Guaranteed renewable A & H (b).....	0				0				0			
15.4 Non-renewable for stated reasons only (b).....	0				0				0			
15.5 Other accident only.....	0				0				0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0				0				0			
15.7 All other A & H (b).....	0				0				0			
15.8 Federal employees health benefits program premium (b).....	0				0				0			
16. Workers' compensation.....	0				0				0			
17.1 Other liability-occurrence.....	0				0				0			
17.2 Other liability-claims-made.....	0				0				0			
17.3 Excess workers' compensation.....	0				0				0			
18. Products liability.....	0				0				0			
19.1 Private passenger auto no-fault (personal injury protection).....	0				0				0			
19.2 Other private passenger auto liability.....	0				0				0			1,605
19.3 Commercial auto no-fault (personal injury protection).....	0				0				0			
19.4 Other commercial auto liability.....	0				0				0			
21.1 Private passenger auto physical damage.....	0				0				0			
21.2 Commercial auto physical damage.....	0				0				0			
22. Aircraft (all perils).....	0				0				0			
23. Fidelity.....	0				0				0			
24. Surety.....	0				0				0			
26. Burglary and theft.....	0				0				0			
27. Boiler and machinery.....	0				0				0			
28. Credit.....	0				0				0			
30. Warranty.....	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).....	0	0	0	0	0	0	0	0	0	0	0	1,605

## DETAILS OF WRITE-INS

3401.....	0											
3402.....	0											
3403.....	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.....0

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

**SCHEDULE F - PART 1**

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

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held by or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							

**Affiliated - U. S. Intercompany Pooling:**

34-1524319..	16322.....	Progressive Direct Insurance Company.....	OH.....	204,169	1,492	.65,268	66,760			54,213		N.....		
0199999.	Affiliated - U. S. Intercompany Pooling.....			204,169	1,492	.65,268	66,760	0	0	54,213	0	0	0	0
0499999.	Total Affiliates.....			204,169	1,492	.65,268	66,760	0	0	54,213	0	0	0	0
9999999.	Totals.....			204,169	1,492	.65,268	66,760	0	0	54,213	0	0	0	0

**PROGRESSIVE ADVANCED INSURANCE COMPANY****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
------------------------------	------------------------------	----------------------	-----------------------	-----------------------	--------------------------

**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**

34-1524319	16322...	Progressive Direct Insurance Company	OH.....	.....	646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....	.....406,327	.....1,810	.....	.....404,517	.....
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling				646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....0	.....406,327	.....1,810	.....0	.....404,517	.....0
0499999.	Total Authorized Affiliates				646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....0	.....406,327	.....1,810	.....0	.....404,517	.....0
0999999.	Total Authorized				646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....0	.....406,327	.....1,810	.....0	.....404,517	.....0
1999999.	Total Authorized and Unauthorized				646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....0	.....406,327	.....1,810	.....0	.....404,517	.....0
9999999.	Totals				646,887	.....3,524	.....416	.....151,222	.....39,549	.....36,114	.....5,064	.....170,438	.....0	.....406,327	.....1,810	.....0	.....404,517	.....0

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

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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 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
(1) Progressive Direct Insurance Company	406,327	646,887	Yes [X] No [ ]
(2).....	.....	.....	Yes [ ] No [ ]
(3).....	.....	.....	Yes [ ] No [ ]
(4).....	.....	.....	Yes [ ] No [ ]
(5).....	.....	.....	Yes [ ] No [ ]

**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 Total Due Col. 5 + 10	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Col. 6 + 7 + 8 + 9		

**Authorized Affiliates-U.S. Intercompany Pooling**

34-1524319..	16322.....	Progressive Direct Insurance Company.....	OH.....	3,940	.....	.....	.....	.....	0	3,940	.....	0.0	0.0
0199999.		Total Authorized - Affiliates - U.S. Intercompany Pooling.....		3,940	.....	0	.....	0	0	0	3,940	.....	0.0
0499999.		Total Authorized - Affiliates.....		3,940	.....	0	.....	0	0	0	3,940	.....	0.0
0999999.		Total Authorized.....		3,940	.....	0	.....	0	0	0	3,940	.....	0.0
1999999.		Total Authorized and Unauthorized.....		3,940	.....	0	.....	0	0	0	3,940	.....	0.0
9999999.		Totals.....		3,940	.....	0	.....	0	0	0	3,940	.....	0.0

**Sch. F-Pt. 5**  
**NONE**

**Sch. F-Pt. 6**  
**NONE**

**Sch. F-Pt. 7**  
**NONE**

**SCHEDULE F - PART 8**

## Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	117,953,427		117,953,427
2. Premiums and considerations (Line 15).....	113,624,358		113,624,358
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	3,939,994	(3,939,994)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	33,964,661		33,964,661
6. Net amount recoverable from reinsurers.....		404,517,236	404,517,236
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	269,482,440	400,577,242	670,059,682
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	81,223,796	231,949,000	313,172,796
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	3,545,797		3,545,797
11. Unearned premiums (Line 9).....	54,213,475	170,438,000	224,651,475
12. Advance premiums (Line 10).....	3,001,407		3,001,407
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	1,809,758	(1,809,758)	0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	20,652,090		20,652,090
19. Total liabilities excluding protected cell business (Line 26).....	164,446,323	400,577,242	565,023,565
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	105,036,117	XXX	105,036,117
22. Totals (Line 38).....	269,482,440	400,577,242	670,059,682

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:

See Notes to Financials #26.

**Sch. H-Pt. 1**  
**NONE**

**Sch. H-Pt. 2**  
**NONE**

**Sch. H-Pt. 3**  
**NONE**

**Sch. H-Pt. 4**  
**NONE**

**Sch. H-Pt. 5**  
**NONE**

**SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported-Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....XXX.....	
2. 2002.....	160.....	156.....	4.....	110.....	102.....	5.....	4.....	18.....	18.....	2.....	.9.....	25.....	
3. 2003.....	.96.....	.94.....	2.....	.70.....	.67.....	0.....	1.....	.21.....	.17.....	.1.....	.6.....	12.....	
4. 2004.....	2.....	1.....	1.....	1.....	2.....	.....	.....	0.....	0.....	.....	(0).....	0.....	
5. 2005.....	.26.....	0.....	.26.....	.11.....	.2.....	1.....	0.....	.2.....	(1).....	0.....	.12.....	.8.....	
6. 2006.....	.60.....	0.....	.59.....	.59.....	1.....	3.....	0.....	11.....	.....	0.....	.72.....	.29.....	
7. 2007.....	.81.....	1.....	.81.....	.37.....	(1).....	1.....	0.....	.12.....	.....	.1.....	.51.....	.21.....	
8. 2008.....	.98.....	1.....	.97.....	.64.....	(0).....	0.....	.....	.18.....	.....	.1.....	.82.....	.42.....	
9. 2009.....	110.....	1.....	110.....	106.....	(0).....	0.....	.....	.22.....	.....	0.....	129.....	.61.....	
10. 2010.....	121.....	1.....	120.....	.62.....	.....	1.....	.....	.9.....	.....	.....	.71.....	.27.....	
11. 2011.....	130.....	1.....	129.....	.70.....	.....	0.....	.....	.14.....	.....	0.....	.85.....	.43.....	
12. Totals....	XXX.....	XXX.....	XXX.....	.591.....	.173.....	11.....	.5.....	.128.....	.34.....	.5.....	.518.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
3. 2003.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
4. 2004.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
5. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
6. 2006.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
7. 2007.....	0.....	.....	.....	.....	0.....	.....	.....	.....	0.....	.....	.....	1.....	0.....
8. 2008.....	0.....	0.....	0.....	.....	0.....	.....	0.....	.....	0.....	.....	.....	1.....	0.....
9. 2009.....	0.....	0.....	0.....	.....	0.....	.....	0.....	.....	0.....	.....	.....	1.....	0.....
10. 2010.....	.....	1.....	.....	.....	.....	0.....	0.....	0.....	0.....	.....	0.....	1.....	.....
11. 2011.....	14.....	4.....	.....	1.....	.....	0.....	0.....	1.....	.....	0.....	20.....	1.....	.....
12. Totals....	15.....	0.....	5.....	0.....	1.....	0.....	1.....	0.....	1.....	0.....	0.....	.23.....	1.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	.....	.....	.....	.....	.....	.....	.....	.....		.....	.....
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	0.....	0.....
2. 2002.....	133.....	124.....	9.....	83.5.....	79.6.....	.232.1.....	.....	.....	4.00.....	0.....	0.....
3. 2003.....	.91.....	.85.....	.6.....	.94.5.....	.90.4.....	.257.0.....	.....	.....	4.00.....	0.....	0.....
4. 2004.....	1.....	.2.....	(0).....	.89.6.....	.201.3.....	(81.8).....	.....	.....	4.00.....	0.....	0.....
5. 2005.....	.14.....	.1.....	12.....	.52.9.....	.596.9.....	.47.9.....	.....	.....	4.00.....	0.....	0.....
6. 2006.....	.73.....	.1.....	72.....	.122.6.....	.185.0.....	.122.2.....	.....	.....	4.00.....	0.....	0.....
7. 2007.....	.51.....	(1).....	52.....	.62.2.....	(181.9).....	.63.9.....	.....	.....	4.00.....	0.....	0.....
8. 2008.....	.83.....	(0).....	83.....	.84.9.....	(0.5).....	.85.4.....	.....	.....	4.00.....	0.....	0.....
9. 2009.....	130.....	(0).....	130.....	.117.7.....	(5.4).....	.118.5.....	.....	.....	4.00.....	1.....	0.....
10. 2010.....	.72.....	0.....	72.....	.59.5.....	0.0.....	.59.9.....	.....	.....	4.00.....	1.....	0.....
11. 2011.....	104.....	0.....	104.....	.80.3.....	0.0.....	.80.9.....	.....	.....	4.00.....	18.....	.2.....
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	20.....	.3.....

## 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.....	.....32	.....1	.....1	.....1	.....1	.....3	.....34	.....XXX.....		
2. 2002.....	33,005	27,363	5,642	17,403	14,974	861	595	3,634	3,011	259	3,317	8,132	
3. 2003.....	42,467	35,972	6,495	20,973	18,614	890	916	4,396	3,807	563	2,923	9,833	
4. 2004.....	58,377	0	58,377	28,834	2	1,363	.....	6,103	0	903	36,298	13,102	
5. 2005.....	73,894	589	73,305	38,058	477	1,731	1	7,835	39	1,039	47,108	14,989	
6. 2006.....	83,661	1,023	82,639	42,973	498	1,805	1	8,619	0	1,146	52,898	16,362	
7. 2007.....	87,845	1,295	86,550	48,212	567	1,892	1	8,617	.....	1,300	58,153	18,112	
8. 2008.....	91,875	1,352	90,523	50,073	574	1,616	0	9,382	.....	1,338	60,498	19,445	
9. 2009.....	105,009	1,678	103,330	55,431	661	1,385	1	9,706	.....	1,501	65,860	22,253	
10. 2010.....	120,206	2,035	118,171	57,394	821	920	1	10,125	.....	1,510	67,617	25,385	
11. 2011.....	132,809	2,610	130,200	37,757	541	236	0	7,514	.....	838	44,966	24,590	
12. Totals....	XXX.....	XXX.....	XXX.....	397,141	37,728	12,700	1,515	75,932	6,857	10,400	439,672	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....	.....3	.....	.....	.....	.....1	.....	.....	.....	.....0	.....	.....	.....4	.....0
2. 2002.....	12	.....	0	.....	1	.....	.....	.....	0	.....	.....	14	.....0
3. 2003.....	9	.....	3	.....	2	.....	.....	.....	1	.....	3	14	1
4. 2004.....	47	.....	4	.....	5	.....	.....	.....	2	.....	8	58	2
5. 2005.....	681	509	4	.....	15	.....	.....	.....	6	.....	16	197	5
6. 2006.....	250	28	5	.....	37	.....	.....	.....	15	.....	27	278	10
7. 2007.....	813	242	7	.....	98	.....	.....	.....	39	.....	52	716	29
8. 2008.....	2,613	717	860	302	314	.....	109	.....	143	.....	109	3,020	83
9. 2009.....	5,947	401	1,819	337	1,048	.....	185	.....	514	.....	278	8,775	272
10. 2010.....	14,648	1,964	3,105	208	1,768	.....	391	.....	1,504	.....	753	19,245	771
11. 2011.....	29,227	1,100	10,659	940	2,100	.....	817	.....	4,604	.....	1,675	45,367	3,680
12. Totals....	54,250	4,961	16,466	1,786	5,390	0	1,502	0	6,828	0	2,920	77,689	4,854

	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
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	Loss Expense	26 Direct and Assumed	36 Loss Expenses Unpaid	
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	3	1
2. 2002.....	21,911	18,579	3,331	66.4	67.9	59.0	.....	.....	4.00	12	1
3. 2003.....	26,274	23,337	2,937	61.9	64.9	45.2	.....	.....	4.00	12	3
4. 2004.....	36,358	2	36,356	62.3	935.5	62.3	.....	.....	4.00	50	8
5. 2005.....	48,331	1,025	47,305	65.4	174.1	64.5	.....	.....	4.00	176	21
6. 2006.....	53,703	527	53,176	64.2	51.6	64.3	.....	.....	4.00	226	52
7. 2007.....	59,679	810	58,869	67.9	62.6	68.0	.....	.....	4.00	579	137
8. 2008.....	65,111	1,593	63,518	70.9	117.8	70.2	.....	.....	4.00	2,454	566
9. 2009.....	76,035	1,400	74,635	72.4	83.4	72.2	.....	.....	4.00	7,028	1,747
10. 2010.....	89,855	2,993	86,862	74.8	147.1	73.5	.....	.....	4.00	15,582	3,663
11. 2011.....	92,914	2,581	90,332	70.0	98.9	69.4	.....	.....	4.00	37,846	7,521
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	63,968	13,720

## 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)	....XXX.....	
2. 2002.....	1,000	390	610	439	152	33	9	66	25	.....7	352	.....119	
3. 2003.....	1,362	546	816	612	233	40	16	80	31	.....7	452	.....140	
4. 2004.....	1,637	.....	1,637	650	0	61	0	118	.....	10	829	.....152	
5. 2005.....	1,702	.....	1,702	987	.....	66	.....	96	.....	16	1,149	.....149	
6. 2006.....	1,082	.....	1,082	542	.....	48	.....	62	.....	6	653	.....94	
7. 2007.....	699	.....	699	325	.....	16	.....	52	.....	3	393	.....65	
8. 2008.....	410	.....	410	143	.....	5	.....	25	.....	2	172	.....39	
9. 2009.....	496	.....	496	169	.....	10	.....	28	.....	5	208	.....46	
10. 2010.....	693	.....	693	235	.....	14	.....	34	.....	2	283	.....63	
11. 2011.....	888	.....	888	128	.....	1	.....	27	.....	2	156	.....70	
12. Totals....	XXX.....	XXX.....	XXX.....	4,229	385	294	26	590	55	60	4,648	....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
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....	.....0
3. 2003.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0	.....0
4. 2004.....	0	.....	.....	.....	0	.....	.....	.....	.....	0	.....0	.....0	.....0
5. 2005.....	33	.....	.....	.....	2	.....	.....	.....	1	.....	.....0	.....35	.....0
6. 2006.....	3	.....	.....	.....	1	.....	.....	.....	0	.....	.....0	.....4	.....0
7. 2007.....	18	.....	.....	.....	2	.....	.....	.....	1	.....	.....0	.....20	.....0
8. 2008.....	16	.....	2	.....	2	.....	1	.....	1	.....	.....0	.....22	.....0
9. 2009.....	48	.....	7	.....	9	.....	1	.....	3	.....	2	.....68	.....1
10. 2010.....	290	.....	21	.....	34	.....	3	.....	15	.....	2	.....363	.....4
11. 2011.....	406	.....	87	.....	37	.....	7	.....	37	.....	4	.....574	.....14
12. Totals....	814	0	118	0	86	0	12	0	58	0	9	1,087	19

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	.....	.....	.....	.....	.....	.....	.....	.....		.....	.....
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....0	.....0
2. 2002.....	538	186	352	53.8	47.7	57.7	.....	.....	4.00	.....0	.....0
3. 2003.....	732	280	452	53.7	51.2	55.4	.....	.....	4.00	.....0	.....0
4. 2004.....	829	0	829	50.7	0.0	50.7	.....	.....	4.00	.....0	.....0
5. 2005.....	1,184	0	1,184	69.5	0.0	69.5	.....	.....	4.00	.....33	.....2
6. 2006.....	657	0	657	60.7	0.0	60.7	.....	.....	4.00	.....3	.....1
7. 2007.....	414	0	414	59.2	0.0	59.2	.....	.....	4.00	.....18	.....2
8. 2008.....	194	0	194	47.4	0.0	47.4	.....	.....	4.00	.....18	.....3
9. 2009.....	276	0	276	55.6	0.0	55.6	.....	.....	4.00	.....55	.....13
10. 2010.....	647	0	647	93.2	0.0	93.2	.....	.....	4.00	.....311	.....52
11. 2011.....	730	0	730	82.2	0.0	82.2	.....	.....	4.00	.....493	.....81
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	.....932	.....155

**Sch. P-Pt. 1D**  
**NONE**

**Sch. P-Pt. 1E**  
**NONE**

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

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

**Sch. P-Pt. 1G**  
**NONE**

## 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.....XXX.....	
2. 2002.....	29.....	23.....	6.....	4.....	3.....	2.....	0.....	1.....	0.....	0.....	0.....	3.....2.....	
3. 2003.....	47.....	38.....	8.....	25.....	18.....	3.....	1.....	3.....	1.....	0.....	0.....	11.....3.....	
4. 2004.....	97.....	.....	97.....	20.....	.....	1.....	.....	3.....	.....	0.....	0.....	23.....7.....	
5. 2005.....	179.....	.....	179.....	99.....	.....	9.....	.....	19.....	.....	0.....	0.....	127.....16.....	
6. 2006.....	297.....	.....	297.....	63.....	.....	9.....	.....	9.....	.....	1.....	0.....	81.....19.....	
7. 2007.....	417.....	.....	417.....	151.....	.....	8.....	.....	14.....	.....	1.....	0.....	173.....25.....	
8. 2008.....	505.....	.....	505.....	177.....	.....	6.....	.....	17.....	.....	1.....	0.....	201.....32.....	
9. 2009.....	652.....	.....	652.....	190.....	.....	8.....	.....	23.....	.....	2.....	0.....	221.....39.....	
10. 2010.....	773.....	.....	773.....	155.....	.....	3.....	.....	20.....	.....	1.....	0.....	178.....44.....	
11. 2011.....	841.....	.....	841.....	188.....	.....	2.....	.....	18.....	.....	1.....	0.....	208.....43.....	
12. Totals....	XXX.....	XXX.....	XXX.....	1,072.....	21.....	50.....	1.....	128.....	2.....	9.....	1,227.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
3. 2003.....	.....	.....	0.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
4. 2004.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
5. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
6. 2006.....	1.....	.....	.....	.....	1.....	.....	.....	.....	0.....	.....	.....	2.....	0.....
7. 2007.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	0.....
8. 2008.....	4.....	.....	1.....	.....	1.....	.....	0.....	.....	0.....	.....	.....	6.....	0.....
9. 2009.....	45.....	.....	4.....	.....	9.....	.....	1.....	.....	1.....	.....	.....	59.....	1.....
10. 2010.....	43.....	.....	9.....	.....	11.....	.....	2.....	.....	2.....	.....	.....	67.....	1.....
11. 2011.....	129.....	.....	51.....	.....	12.....	.....	2.....	.....	11.....	.....	.....	205.....	4.....
12. Totals....	222.....	0.....	65.....	0.....	32.....	0.....	6.....	0.....	15.....	0.....	1.....	339.....	6.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	.....	.....	.....	.....	.....	.....	.....	.....		.....	.....
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	0.....	0.....
2. 2002.....	7.....	3.....	3.....	22.8.....	15.0.....	55.3.....	.....	.....	4.00.....	0.....	0.....
3. 2003.....	31.....	20.....	11.....	66.6.....	51.8.....	134.0.....	.....	.....	4.00.....	0.....	0.....
4. 2004.....	23.....	0.....	23.....	24.2.....	0.0.....	24.2.....	.....	.....	4.00.....	0.....	0.....
5. 2005.....	127.....	0.....	127.....	71.1.....	0.0.....	71.1.....	.....	.....	4.00.....	0.....	0.....
6. 2006.....	83.....	0.....	83.....	27.9.....	0.0.....	27.9.....	.....	.....	4.00.....	1.....	1.....
7. 2007.....	173.....	0.....	173.....	41.5.....	0.0.....	41.5.....	.....	.....	4.00.....	0.....	0.....
8. 2008.....	207.....	0.....	207.....	40.9.....	0.0.....	40.9.....	.....	.....	4.00.....	5.....	1.....
9. 2009.....	280.....	0.....	280.....	43.0.....	0.0.....	43.0.....	.....	.....	4.00.....	.48.....	.11.....
10. 2010.....	245.....	0.....	245.....	31.8.....	0.0.....	31.8.....	.....	.....	4.00.....	.52.....	.15.....
11. 2011.....	413.....	0.....	413.....	49.1.....	0.0.....	49.1.....	.....	.....	4.00.....	179.....	.25.....
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	286.....	.53.....

## 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.....XXX.....	
2. 2002.....	10.....	9.....	1.....	.....	11.....	.....	0.....	.....	1.....	.....	.....	(12).....	
3. 2003.....	10.....	9.....	1.....	.....	11.....	.....	0.....	.....	1.....	.....	.....	(12).....	
4. 2004.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
5. 2005.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
6. 2006.....	10.....	.....	10.....	32.....	.....	.....	.....	0.....	.....	.....	.....	32.....0.....	
7. 2007.....	10.....	.....	10.....	84.....	.....	.....	.....	0.....	.....	.....	.....	84.....0.....	
8. 2008.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
9. 2009.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
10. 2010.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
11. 2011.....	10.....	.....	10.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	
12. Totals....	XXX.....	XXX.....	XXX.....	116.....	22.....	0.....	1.....	1.....	1.....	0.....	92.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
3. 2003.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
4. 2004.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
5. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
6. 2006.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
7. 2007.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....	.....
8. 2008.....	.....	.....	7.....	.....	.....	.....	1.....	.....	1.....	.....	.....	9.....	.....
9. 2009.....	.....	.....	8.....	.....	.....	.....	1.....	.....	1.....	.....	.....	10.....	.....
10. 2010.....	.....	.....	7.....	.....	.....	.....	1.....	.....	2.....	.....	.....	10.....	.....
11. 2011.....	.....	.....	7.....	.....	.....	.....	1.....	.....	2.....	.....	.....	10.....	.....
12. Totals....	0.....	0.....	28.....	0.....	0.....	0.....	4.....	0.....	6.....	0.....	0.....	38.....0.....	.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	0.....
2. 2002.....	0.....	12.....	(12).....	0.....	135.8.....	(1,222.1).....	.....	.....	4.00.....	.....	0.....
3. 2003.....	0.....	12.....	(12).....	0.....	125.8.....	(1,131.9).....	.....	.....	4.00.....	.....	0.....
4. 2004.....	0.....	0.....	0.....	0.....	0.0.....	0.0.....	.....	.....	4.00.....	.....	0.....
5. 2005.....	0.....	0.....	0.....	0.....	0.0.....	0.0.....	.....	.....	4.00.....	.....	0.....
6. 2006.....	32.....	0.....	32.....	325.3.....	0.0.....	325.3.....	.....	.....	4.00.....	.....	0.....
7. 2007.....	84.....	0.....	84.....	840.8.....	0.0.....	840.8.....	.....	.....	4.00.....	.....	0.....
8. 2008.....	9.....	0.....	9.....	86.1.....	0.0.....	86.1.....	.....	.....	4.00.....	7.....	2.....
9. 2009.....	10.....	0.....	10.....	100.3.....	0.0.....	100.3.....	.....	.....	4.00.....	8.....	2.....
10. 2010.....	10.....	0.....	10.....	98.8.....	0.0.....	98.8.....	.....	.....	4.00.....	7.....	3.....
11. 2011.....	10.....	0.....	10.....	98.8.....	0.0.....	98.8.....	.....	.....	4.00.....	7.....	3.....
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	28.....	10.....

**SCHEDULE P - PART 1I - 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.....	.....2	.....2	.....1	.....5	.....6	.....XXX.....				
2. 2010.....	.....1,731		.....1,731	.....895	.....6	.....137	.....62	.....1,038	.....XXX.....				
3. 2011.....	.....1,969		.....1,969	.....962	.....2	.....152	.....39	.....1,116	.....XXX.....				
4. Totals....	....XXX.....	....XXX.....	....XXX.....	....1,859	....0	....11	....0	....290	....0	....107	....2,160	....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....	.....6		.....1		.....0		.....0		.....0		.....3	.....8	.....0
2. 2010....	.....1		.....5		.....0		.....2		.....0		.....6	.....9	.....0
3. 2011....	.....42		.....51		.....4		.....4		.....10		.....38	.....110	.....8
4. Totals...	....49	....0	....58	....0	....4	....0	....6	....0	....10	....0	....47	....127	....8

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			....XXX.....	.....7	.....0
2. 2010.....	.....1,047	.....0	.....1,047	.....60.5	.....0.0	.....60.5			.....4.00	.....6	.....2
3. 2011.....	.....1,227	.....0	.....1,227	.....62.3	.....0.0	.....62.3			.....4.00	.....93	.....18
4. Totals....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....0	....0	....XXX.....	....106	....20

**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.....	.....(99)	.....	.....47	.....	.....28	.....	.....220	.....(24)	XXX.....	
2. 2010.....	63,255	.....	63,255	.....41,583	.....	.....52	.....	.....7,232	.....	.....10,585	.....48,867	.....51,250	
3. 2011.....	66,151	.....	66,151	.....46,836	.....	.....37	.....	.....7,253	.....	.....8,288	.....54,125	.....55,636	
4. Totals....	XXX.....	XXX.....	XXX.....	.....88,320	.....0	.....136	.....0	.....14,512	.....0	.....19,092	.....102,968	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....	.....10	.....	.....(166)	.....	.....8	.....	.....	.....	.....3	.....	.....238	.....(146)	.....2
2. 2010...	.....14	.....	.....(246)	.....	.....10	.....	.....1	.....	.....27	.....	.....334	.....(193)	.....6
3. 2011...	.....2,096	.....	.....(1,660)	.....	.....71	.....	.....51	.....	.....210	.....	.....4,042	.....768	.....1,045
4. Totals...	.....2,120	.....0	.....(2,071)	.....0	.....89	.....0	.....52	.....0	.....240	.....0	.....4,614	.....429	.....1,054

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)				Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	35 Losses Unpaid	36 Loss Expenses Unpaid		
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	....XXX.....	....XXX.....	.....	.....	.....XXX.....	.....(157)	.....10	.....
2. 2010.....	48,673	.....0	48,673	76.9	.....0.0	.....76.9	.....	.....	.....4.00	.....(232)	.....38	.....
3. 2011.....	54,893	.....0	54,893	83.0	.....0.0	.....83.0	.....	.....	.....4.00	.....436	.....332	.....
4. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	....XXX.....	....XXX.....	.....0	.....0	.....XXX.....	.....48	.....380	.....

**Sch. P-Pt. 1K**  
**NONE**

**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**

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

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

**Sch. P-Pt. 1S**  
**NONE**

**Sch. P-Pt. 1T**  
**NONE**

**SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year	12 Two Year
1. Prior....	0	.1	.1	1	.1	.1	.1	.1	.1	.1	.0	.0
2. 2002....	3	.1	.5	10	.11	.9	.9	.9	.9	.9	.0	.0
3. 2003....	XXX	.3	.3	3	.2	.2	.2	.2	.2	.2	.0	.0
4. 2004....	XXX	XXX	(1)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	.0	.0
5. 2005....	XXX	XXX	XXX	8	.7	.7	.9	.10	.10	.10	.0	(0)
6. 2006....	XXX	XXX	XXX	XXX	.57	.60	.60	.62	.61	.61	.0	(1)
7. 2007....	XXX	XXX	XXX	XXX	XXX	.36	.39	.40	.39	.40	.0	(0)
8. 2008....	XXX	XXX	XXX	XXX	XXX	.65	.66	.65	.65	.65	.0	(1)
9. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111	112	107	(5)	(3)
10. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57	63	6	XXX
11. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	89	XXX	XXX
											1	(5)
											12. Totals	

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

1. Prior....	1,121	1,073	.988	1,024	985	.999	.986	.955	.957	.954	(3)	(1)
2. 2002....	3,294	3,254	3,133	2,785	2,692	2,693	2,691	2,689	2,692	2,708	.16	18
3. 2003....	XXX	3,543	3,452	2,846	2,423	2,401	2,344	2,352	2,359	2,347	(12)	(5)
4. 2004....	XXX	XXX	31,933	30,988	30,506	30,277	30,117	30,161	30,161	30,251	.91	.91
5. 2005....	XXX	XXX	XXX	40,628	40,004	40,172	39,847	39,449	39,441	39,503	.62	.54
6. 2006....	XXX	XXX	XXX	XXX	44,671	45,225	45,620	45,020	44,588	44,543	(45)	(477)
7. 2007....	XXX	XXX	XXX	XXX	XXX	51,367	51,890	51,590	51,049	50,213	(836)	(1,378)
8. 2008....	XXX	XXX	XXX	XXX	XXX	XXX	55,730	55,299	54,802	53,992	(809)	(1,306)
9. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67,769	65,222	64,416	(806)	(3,353)
10. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76,171	75,232	(939)	XXX
11. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	78,215	XXX	XXX
											12. Totals	(3,282)
												(6,356)

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

1. Prior....	229	223	.164	174	170	183	179	177	177	177	(0)	(0)
2. 2002....	377	338	337	316	315	323	313	313	311	311	(0)	(2)
3. 2003....	XXX	437	485	429	381	406	367	391	402	403	1	12
4. 2004....	XXX	XXX	773	777	777	754	707	719	711	711	(0)	(8)
5. 2005....	XXX	XXX	XXX	898	1,000	1,022	1,050	1,073	1,089	1,087	(2)	14
6. 2006....	XXX	XXX	XXX	XXX	529	537	651	648	607	.594	(13)	(54)
7. 2007....	XXX	XXX	XXX	XXX	XXX	351	305	339	358	361	3	22
8. 2008....	XXX	XXX	XXX	XXX	XXX	XXX	184	171	181	168	(13)	(3)
9. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	304	249	244	(5)	(60)
10. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	535	.598	.63	XXX
11. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.665	XXX	XXX
											.33	(79)

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

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

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

1. Prior....	1	.1	(1)	20	.18	17	15	.13	13	13	0	.0
2. 2002....											0	.0
3. 2003....	XXX										0	.0
4. 2004....	XXX	XXX									0	.0
5. 2005....	XXX	XXX	XXX								0	.0
6. 2006....	XXX	XXX	XXX	XXX							0	.0
7. 2007....	XXX	XXX	XXX	XXX	XXX						0	.0
8. 2008....	XXX	XXX	XXX	XXX	XXX	XXX					0	.0
9. 2009....	XXX				0	.0						
10. 2010....	XXX			0	XXX							
11. 2011....	XXX		XXX	XXX								
											0	.0

12. Totals

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

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

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

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

**NONE****SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)**

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

**NONE****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....	2	2	2	3	3	3	3	3	3	3	0	0
3. 2003....	XXX	3	5	10	11	9	9	9	9	9	0	0
4. 2004....	XXX	XXX	27	18	19	20	20	20	20	20	0	0
5. 2005....	XXX	XXX	XXX	92	115	114	108	108	108	108	0	0
6. 2006....	XXX	XXX	XXX	XXX	80	74	82	79	74	74	(1)	(5)
7. 2007....	XXX	XXX	XXX	XXX	XXX	167	155	170	163	159	(4)	(11)
8. 2008....	XXX	XXX	XXX	XXX	XXX	234	196	189	189	189	(0)	(6)
9. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	296	243	257	257	13	(39)
10. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	284	222	(62)	XXX	...
11. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	383	XXX	XXX	...
											(54)	(62)

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

1. Prior....	10	9	155	247	227	227	227	227	227	227	0	0
2. 2002....	2	1	18	5	(12)	(12)	(12)	(12)	(12)	(12)	0	0
3. 2003....	XXX	1	24	4	15	(11)	(11)	(11)	(11)	(11)	0	0
4. 2004....	XXX	XXX	34	19	25	15	17	21	19	19	0	0
5. 2005....	XXX	XXX	XXX	21	35	19	21	21	21	21	0	0
6. 2006....	XXX	XXX	XXX	XXX	33	19	19	53	32	32	0	(21)
7. 2007....	XXX	XXX	XXX	XXX	XXX	19	19	19	11	84	.73	.65
8. 2008....	XXX	XXX	XXX	XXX	XXX	XXX	18	18	10	7	(3)	(10)
9. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	12	9	(4)	(12)
10. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	8	(3)	XXX
11. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	XXX	XXX
											12. Totals	.63

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year	12 Two Year
1. Prior....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....119	....94	....94	.....(0)	.....(25)
2. 2010....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....934	....910	.....(24)	....XXX.....
3. 2011....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....1,065	....XXX.....	....XXX.....
										4. Totals	.....(24)	.....(25)

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior....	....XXX.....	....(174)	....(229)	....(23)	....206	....151						
2. 2010....	....XXX.....	....42,273	....41,415	....(858)	....XXX.....	....XXX.....						
3. 2011....	....XXX.....	....47,430	....XXX.....	....XXX.....	....XXX.....							
										4. Totals	.....(652)	.....151

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

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

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

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

**SCHEDULE P - PART 2M - INTERNATIONAL**

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

**Sch. P-Pt. 2N**  
**NONE**

**Sch. P-Pt. 2O**  
**NONE**

**Sch. P-Pt. 2P**  
**NONE**

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

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

**Sch. P-Pt. 2S**  
**NONE**

**Sch. P-Pt. 2T**  
**NONE**

## SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011		
1. Prior.....	.....000.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....0.....	.....0.....
2. 2002.....	.....2.....	.....1.....	.....1.....	.....9.....	.....11.....	.....9.....	.....9.....	.....9.....	.....9.....	.....9.....	.....17.....	.....8.....
3. 2003.....	.....XXX.....	.....2.....	.....2.....	.....2.....	.....2.....	.....2.....	.....2.....	.....2.....	.....2.....	.....2.....	.....7.....	.....4.....
4. 2004.....	.....XXX.....	.....XXX.....	.....(1).....	.....(0).....	.....(0).....	.....(0).....	.....(0).....	.....(0).....	.....(0).....	.....(0).....	.....0.....	.....0.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....6.....	.....7.....	.....7.....	.....8.....	.....10.....	.....10.....	.....4.....	.....4.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....40.....	.....44.....	.....58.....	.....60.....	.....61.....	.....61.....	.....20.....	.....9.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....31.....	.....38.....	.....39.....	.....39.....	.....39.....	.....11.....	.....10.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....54.....	.....63.....	.....64.....	.....64.....	.....25.....	.....17.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....96.....	.....98.....	.....107.....	.....41.....	.....19.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....62.....	.....16.....	.....11.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....70.....	.....27.....	.....15.....

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

1. Prior.....	.....000.....	.....593.....	.....88.....	.....588.....	.....777.....	.....865.....	.....909.....	.....913.....	.....916.....	.....950.....	.....381.....	.....87.....
2. 2002.....	.....1,589.....	.....2,546.....	.....871.....	.....1,883.....	.....2,364.....	.....2,582.....	.....2,646.....	.....2,666.....	.....2,677.....	.....2,694.....	.....5,047.....	.....3,085.....
3. 2003.....	.....XXX.....	.....1,731.....	.....(3,160).....	.....(465).....	.....1,160.....	.....1,922.....	.....2,195.....	.....2,289.....	.....2,325.....	.....2,333.....	.....6,398.....	.....3,434.....
4. 2004.....	.....XXX.....	.....XXX.....	.....15,023.....	.....22,653.....	.....26,418.....	.....28,524.....	.....29,527.....	.....29,907.....	.....30,054.....	.....30,196.....	.....8,371.....	.....4,729.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....19,175.....	.....30,268.....	.....35,383.....	.....38,002.....	.....38,882.....	.....39,195.....	.....39,312.....	.....9,488.....	.....5,497.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....21,839.....	.....34,383.....	.....39,967.....	.....42,814.....	.....43,919.....	.....44,279.....	.....10,358.....	.....5,995.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....24,797.....	.....39,570.....	.....45,608.....	.....48,399.....	.....49,536.....	.....11,814.....	.....6,269.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....25,944.....	.....42,373.....	.....48,229.....	.....51,115.....	.....12,740.....	.....6,621.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....30,505.....	.....48,997.....	.....56,155.....	.....14,490.....	.....7,491.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....35,156.....	.....57,492.....	.....15,979.....	.....8,635.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....37,452.....	.....12,759.....	.....8,151.....

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

1. Prior.....	.....000.....	.....117.....	.....104.....	.....118.....	.....138.....	.....164.....	.....175.....	.....177.....	.....177.....	.....177.....	.....9.....	.....3.....
2. 2002.....	.....131.....	.....199.....	.....203.....	.....253.....	.....287.....	.....303.....	.....311.....	.....311.....	.....311.....	.....311.....	.....75.....	.....44.....
3. 2003.....	.....XXX.....	.....133.....	.....111.....	.....246.....	.....319.....	.....338.....	.....360.....	.....370.....	.....372.....	.....403.....	.....90.....	.....50.....
4. 2004.....	.....XXX.....	.....XXX.....	.....213.....	.....440.....	.....524.....	.....620.....	.....676.....	.....698.....	.....706.....	.....711.....	.....97.....	.....55.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....267.....	.....523.....	.....686.....	.....925.....	.....965.....	.....1,039.....	.....1,053.....	.....97.....	.....52.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....150.....	.....264.....	.....433.....	.....540.....	.....581.....	.....590.....	.....59.....	.....35.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....116.....	.....163.....	.....238.....	.....283.....	.....341.....	.....40.....	.....25.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....57.....	.....105.....	.....114.....	.....147.....	.....25.....	.....14.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....70.....	.....140.....	.....179.....	.....29.....	.....16.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....99.....	.....249.....	.....40.....	.....19.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....129.....	.....129.....	.....37.....	.....19.....

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

1. Prior.....	.....000.....	.....117.....	.....104.....	.....118.....	.....138.....	.....164.....	.....175.....	.....177.....	.....177.....	.....177.....	.....9.....	.....3.....
2. 2002.....	.....131.....	.....199.....	.....203.....	.....253.....	.....287.....	.....303.....	.....311.....	.....311.....	.....311.....	.....311.....	.....75.....	.....44.....
3. 2003.....	.....XXX.....	.....133.....	.....111.....	.....246.....	.....319.....	.....338.....	.....360.....	.....370.....	.....372.....	.....403.....	.....90.....	.....50.....
4. 2004.....	.....XXX.....	.....XXX.....	.....213.....	.....440.....	.....524.....	.....620.....	.....676.....	.....698.....	.....706.....	.....711.....	.....97.....	.....55.....
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....267.....	.....523.....	.....686.....	.....925.....	.....965.....	.....1,039.....	.....1,053.....	.....97.....	.....52.....
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....150.....	.....264.....	.....433.....	.....540.....	.....581.....	.....590.....	.....59.....	.....35.....
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....116.....	.....163.....	.....238.....	.....283.....	.....341.....	.....40.....	.....25.....
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....57.....	.....105.....	.....114.....	.....147.....	.....25.....	.....14.....
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....70.....	.....140.....	.....179.....	.....29.....	.....16.....
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....99.....	.....249.....	.....40.....	.....19.....
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....129.....	.....129.....	.....37.....	.....19.....

**NONE**

## SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.....000.....	.....0.....	.....(12).....	.....(8).....	.....11.....	.....11.....	.....15.....	.....13.....	.....13.....	.....13.....	.....0.....	
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
3. 2003.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
4. 2004.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
5. 2005.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	
6. 2006.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	
7. 2007.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	
8. 2008.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	
9. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	
10. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	
11. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	

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

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

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

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

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

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

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

1. Prior....	....000....			(0)	(0)	(0)	(0)	(0)	(0)	(0)	0	0
2. 2002....	....1....	....2....	....2....	....2....	....2....	....2....	....3....	....3....	....3....	....3....	....1....	....1....
3. 2003....	XXX....		....1....	(10)	(1)	....0....	....5....	....9....	....9....	....9....	....2....	....1....
4. 2004....	XXX....	XXX....		....11....	....13....	....17....	....17....	....20....	....20....	....20....	....4....	....3....
5. 2005....	XXX....	XXX....	XXX....	....40....	....71....	....94....	....107....	....108....	....108....	....108....	....11....	....5....
6. 2006....	XXX....	XXX....	XXX....	XXX....	....25....	....46....	....63....	....69....	....71....	....72....	....9....	....11....
7. 2007....	XXX....	XXX....	XXX....	XXX....	XXX....	....66....	....116....	....132....	....154....	....159....	....14....	....10....
8. 2008....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	....76....	....148....	....182....	....183....	....20....	....12....
9. 2009....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	....106....	....176....	....198....	....24....	....14....
10. 2010....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	....101....	....158....	....27....	....16....
11. 2011....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	....190....	....24....	....15....

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

1. Prior....	....000....	....4....	....7....	....187....	....227....	....227....	....227....	....227....	....227....	....227....	....0....	....0....
2. 2002....				(12)	(12)	(12)	(12)	(12)	(12)	(12)		
3. 2003....	XXX....			(11)	(11)	(11)	(11)	(11)	(11)	(11)		
4. 2004....	XXX....	XXX....										
5. 2005....	XXX....	XXX....	XXX....									
6. 2006....	XXX....	XXX....	XXX....	XXX....								
7. 2007....	XXX....	XXX....	XXX....	XXX....	XXX....							
8. 2008....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....						
9. 2009....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....					
10. 2010....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....				
11. 2011....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....	XXX....			

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

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011		
1. Prior....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....000.....	.....82	.....86	....XXX.....	....XXX.....
2. 2010....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....825	.....901	....XXX.....	....XXX.....
3. 2011....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....964	....XXX.....	....XXX.....

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior....	....XXX.....	....000.....	.....178	.....126	.....2,513	.....481						
2. 2010....	....XXX.....	.....41,441	.....41,635	.....39,578	.....11,665							
3. 2011....	....XXX.....	.....XXX.....	.....46,872	.....42,283	.....12,307							

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

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

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

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

**SCHEDULE P - PART 3M - INTERNATIONAL**

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

**Sch. P-Pt. 3N**  
**NONE**

**Sch. P-Pt. 3O**  
**NONE**

**Sch. P-Pt. 3P**  
**NONE**

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

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

**Sch. P-Pt. 3S**  
**NONE**

**Sch. P-Pt. 3T**  
**NONE**

**SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS**

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

**SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior.....	189	.66	85	37	.32	.32	.32	.34	.32	
2. 2002.....	430	157	452	87	0	0	0	2	0	0
3. 2003.....	XXX	508	1,497	630	130	0	0	2	3	.3
4. 2004.....	XXX	XXX	4,889	1,826	703	.195	.1	2	4	.4
5. 2005.....	XXX	XXX	XXX	6,148	2,069	.936	.309	0	4	.4
6. 2006.....	XXX	XXX	XXX	XXX	6,941	.2,375	.1,159	.435	4	.5
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.7,756	.2,551	.1,264	.644	.7
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.9,004	.2,779	.1,479	.667
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,379	.3,148	.1,668
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,375	.3,288
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.10,536

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

1. Prior.....	.24	.8	3	.0						
2. 2002.....	.60	.21	15	.3						
3. 2003.....	XXX	.79	46	23	.3					
4. 2004.....	XXX	XXX	167	.56	.27	6				
5. 2005.....	XXX	XXX	XXX	161	.58	.25	.7			
6. 2006.....	XXX	XXX	XXX	XXX	.88	.33	.16	.5		
7. 2007.....	XXX	XXX	XXX	XXX	XXX	.58	.24	.11	.4	
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	.40	.15	.6	.3
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.59	.18	.8
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.71	.25
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.94

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

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

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

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

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

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

**NON E****SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

**NON E****SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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

**SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	.0	0	0	0	.0					
2. 2002.....	.0	0	0	0						
3. 2003.....	XXX.....		1	1	.1					0
4. 2004.....	XXX.....	XXX.....		8	.3	.1				
5. 2005.....	XXX.....	XXX.....	XXX.....		16	.5				
6. 2006.....	XXX.....	XXX.....	XXX.....		XXX.....	.25				
7. 2007.....	XXX.....	XXX.....	XXX.....		XXX.....		31	.9	.3	1
8. 2008.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.38	.11	2
9. 2009.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.46	.9	.5
10. 2010.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.XXX	.57	11
11. 2011.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.XXX	.XXX	53

**SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....	10	5	.86							
2. 2002.....	.2	1	.29		16					
3. 2003.....	XXX.....		1		16	.26				
4. 2004.....	XXX.....	XXX.....		34	.19	.25				
5. 2005.....	XXX.....	XXX.....	XXX.....		21	.35				
6. 2006.....	XXX.....	XXX.....	XXX.....		XXX.....	.33				
7. 2007.....	XXX.....	XXX.....	XXX.....		XXX.....		19	.19	.19	11
8. 2008.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.18	.18	10
9. 2009.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.21	.12	.9
10. 2010.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.XXX	.11	8
11. 2011.....	XXX.....	XXX.....	XXX.....		XXX.....		XXX.....	.XXX	.XXX	8

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

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....42	.....7	.....1
2. 2010.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....46	.....7
3. 2011.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....55

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior.....	....XXX.....	.....(2,375)	.....(440)	.....(166)						
2. 2010.....	....XXX.....	.....(1,521)	.....(244)							
3. 2011.....	....XXX.....	.....(1,609)								

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

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

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

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

**SCHEDULE P - PART 4M - INTERNATIONAL**

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

**Sch. P-Pt. 4N**  
**NONE**

**Sch. P-Pt. 4O**  
**NONE**

**Sch. P-Pt. 4P**  
**NONE**

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

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

**Sch. P-Pt. 4S**  
**NONE**

**Sch. P-Pt. 4T**  
**NONE**

**SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS****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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	3	0	0							0
2. 2002.....	13	17	17	17	17	17	17	17	17	17
3. 2003.....	XXX	7	7	7	7	7	7	7	7	7
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	3	4	4	4	4	4	4
6. 2006.....	XXX	XXX	XXX	XXX	19	19	20	20	20	20
7. 2007.....	XXX	XXX	XXX	XXX	XXX	10	11	11	11	11
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	22	25	25	25
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40	41	41
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	16
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	0	0								
2. 2002.....	3	0	0	0						
3. 2003.....	XXX	0	0							
4. 2004.....	XXX	XXX								
5. 2005.....	XXX	XXX	XXX	0				0	0	
6. 2006.....	XXX	XXX	XXX	XXX	1	0	0	0		
7. 2007.....	XXX	XXX	XXX	XXX	XXX	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	1	
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	1	0	0							
2. 2002.....	23	25	25	25	25	25	25	25	25	25
3. 2003.....	XXX	12	12	12	12	12	12	12	12	12
4. 2004.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2005.....	XXX	XXX	XXX	7	8	8	8	8	8	8
6. 2006.....	XXX	XXX	XXX	XXX	28	28	29	29	29	29
7. 2007.....	XXX	XXX	XXX	XXX	XXX	20	21	21	21	21
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	38	42	42	42
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59	61	61
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	27
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	845	134	52	13	5	2	9	15	1	0
2. 2002.....	3,795	4,768	4,964	5,006	5,021	5,028	5,037	5,045	5,046	5,047
3. 2003.....	XXX.....	4,614	6,085	6,271	6,331	6,354	6,380	6,394	6,397	6,398
4. 2004.....	XXX.....	XXX.....	6,460	7,968	8,190	8,263	8,322	8,355	8,366	8,371
5. 2005.....	XXX.....	XXX.....	XXX.....	7,239	8,946	9,203	9,366	9,445	9,476	9,488
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	7,818	9,625	10,077	10,253	10,325	10,358
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8,338	11,096	11,580	11,737	11,814
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9,128	12,088	12,553	12,740
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10,458	13,867	14,490
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	12,083	15,979
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	12,759

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	243	92	34	15	6	3	2	1	0	0
2. 2002.....	1,122	221	93	36	15	5	2	1	1	0
3. 2003.....	XXX.....	1,237	324	126	49	18	6	3	1	1
4. 2004.....	XXX.....	XXX.....	1,804	376	150	56	21	8	4	2
5. 2005.....	XXX.....	XXX.....	XXX.....	2,035	432	165	57	21	10	5
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	2,140	454	174	64	26	10
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,347	486	180	79	29
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,621	487	207	83
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,232	649	272
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,649	771
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,680

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	296	35	27	5	2	1	8	11	1	0
2. 2002.....	7,593	7,974	8,102	8,111	8,115	8,116	8,123	8,131	8,132	8,132
3. 2003.....	XXX.....	8,979	9,735	9,783	9,796	9,800	9,819	9,831	9,833	9,833
4. 2004.....	XXX.....	XXX.....	12,445	12,953	13,016	13,032	13,065	13,090	13,098	13,102
5. 2005.....	XXX.....	XXX.....	XXX.....	14,155	14,752	14,820	14,903	14,957	14,981	14,989
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	15,324	15,956	16,198	16,295	16,341	16,362
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	16,225	17,724	17,983	18,072	18,112
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	17,493	19,073	19,343	19,445
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	20,235	21,893	22,253
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	23,419	25,385
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	24,590

**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	14	4	1	0	0	0	0	0	0	0
2. 2002.....	58	71	73	74	75	75	75	75	75	75
3. 2003.....	XXX	69	85	88	89	90	90	90	90	90
4. 2004.....	XXX	XXX	77	92	94	95	96	97	97	97
5. 2005.....	XXX	XXX	XXX	78	90	93	95	96	96	97
6. 2006.....	XXX	XXX	XXX	XXX	47	55	57	58	59	59
7. 2007.....	XXX	XXX	XXX	XXX	XXX	30	38	39	40	40
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	19	24	25	25
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	28	29
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31	40
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	8	3	1	1	0	0	0	0	0	0
2. 2002.....	15	4	2	1	0	0	0	0	0	0
3. 2003.....	XXX	17	6	3	1	0	0	0	0	0
4. 2004.....	XXX	XXX	17	6	4	2	0	0	0	0
5. 2005.....	XXX	XXX	XXX	15	6	3	1	1	0	0
6. 2006.....	XXX	XXX	XXX	XXX	9	3	2	1	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	6	2	1	1	0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	4	1	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	2	1
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	4
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	7	1	0	0	0	0	0	0	0	0
2. 2002.....	111	118	119	119	119	119	119	119	119	119
3. 2003.....	XXX	129	138	139	140	140	140	140	140	140
4. 2004.....	XXX	XXX	141	150	151	152	152	152	152	152
5. 2005.....	XXX	XXX	XXX	139	147	148	149	149	149	149
6. 2006.....	XXX	XXX	XXX	XXX	86	91	93	94	94	94
7. 2007.....	XXX	XXX	XXX	XXX	XXX	57	64	65	65	65
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	35	39	39	39
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	46	46
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57	63
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**
**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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....										
2. 2002.....										
3. 2003.....	XXX.....									
4. 2004.....	XXX.....	XXX.....								
5. 2005.....	XXX.....	XXX.....	XXX.....							
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

**NONE****SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....										
2. 2002.....										
3. 2003.....	XXX.....									
4. 2004.....	XXX.....	XXX.....								
5. 2005.....	XXX.....	XXX.....	XXX.....							
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

**NONE****SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....										
2. 2002.....										
3. 2003.....	XXX.....									
4. 2004.....	XXX.....	XXX.....								
5. 2005.....	XXX.....	XXX.....	XXX.....							
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

**NONE**

**SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL****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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**NONE****SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....	.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**NONE**

**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**

**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE****SECTION 1A**

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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	0									
2. 2002.....	1	1	1	1	1	1	1	1	1	1
3. 2003.....	XXX	1	1	1	1	1	2	2	2	2
4. 2004.....	XXX	XXX	3	4	4	4	4	4	4	4
5. 2005.....	XXX	XXX	XXX	8	10	11	11	11	11	11
6. 2006.....	XXX	XXX	XXX	XXX	7	8	9	9	9	9
7. 2007.....	XXX	XXX	XXX	XXX	XXX	10	13	14	14	14
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	15	20	20	20
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	24	24
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23	27
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....										
2. 2002.....	0	0		0	0	0				
3. 2003.....	XXX	0	0	0	0	0				
4. 2004.....	XXX	XXX	0	0	0	0				
5. 2005.....	XXX	XXX	XXX	1	1	0				
6. 2006.....	XXX	XXX	XXX	XXX	1	1	0	0	0	0
7. 2007.....	XXX	XXX	XXX	XXX	XXX	3	1	1	0	
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	4	1	0	0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	1	1
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	1
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	0									
2. 2002.....	2	2	2	2	2	2	2	2	2	2
3. 2003.....	XXX	2	2	2	3	3	3	3	3	3
4. 2004.....	XXX	XXX	6	7	7	7	7	7	7	7
5. 2005.....	XXX	XXX	XXX	14	16	16	16	16	16	16
6. 2006.....	XXX	XXX	XXX	XXX	18	19	19	19	19	19
7. 2007.....	XXX	XXX	XXX	XXX	XXX	22	24	24	25	25
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	29	32	32	32
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	38	39
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	44
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

**SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE****SECTION 1B**

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

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	.....	.....	0	0	.....	.....	.....	.....	.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	0	.....	.....
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**SECTION 3B**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior.....	.....	.....	0	0	0	.....	.....	.....	.....	.....
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	0	0	0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	0	0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

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

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

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

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

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

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

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

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

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

**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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	.....(11)										.....0
2. 2002.....	1,010	.998	.998	.998	.998	.998	.998	.998	.998	.998	.998
3. 2003.....	XXX	1,374	1,361	1,361	1,361	1,361	1,361	1,361	1,361	1,361	1,361
4. 2004.....	XXX	XXX	1,650	1,628	1,628	1,628	1,628	1,628	1,628	1,628	1,628
5. 2005.....	XXX	XXX	XXX	1,724	1,703	1,703	1,703	1,703	1,703	1,703	1,703
6. 2006.....	XXX	XXX	XXX	XXX	1,103	1,089	1,089	1,089	1,089	1,089	1,089
7. 2007.....	XXX	XXX	XXX	XXX	XXX	713	707	707	707	707	707
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX	416	412	412	412	412
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	494	494	494
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	699	691	(8)
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	896	.896
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.888
13. Earned Prem.(P-Pt 1).....	1,000	1,362	1,637	1,702	1,082	699	410	496	693	888	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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	.....(5)										.....0
2. 2002.....	395	.389	.389	.389	.389	.389	.389	.389	.389	.389	.389
3. 2003.....	XXX	.552	.552	.552	.552	.552	.552	.552	.552	.552	.552
4. 2004.....	XXX	XXX									.....0
5. 2005.....	XXX	XXX	XXX								.....0
6. 2006.....	XXX	XXX	XXX	XXX							.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX						.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.....0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0
13. Earned Prem.(P-Pt 1).....	390	.546									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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....											.....0
2. 2002.....											.....0
3. 2003.....	XXX										.....0
4. 2004.....	XXX	XXX									.....0
5. 2005.....	XXX	XXX	XXX								.....0
6. 2006.....	XXX	XXX	XXX	XXX							.....0
7. 2007.....	XXX	XXX	XXX	XXX	XXX						.....0
8. 2008.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0
9. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0
10. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0
11. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.....0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....0
13. Earned Prem.(P-Pt 1).....											XXX.....

**SECTION 2**

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

**NONE****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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
2. 2002.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
3. 2003.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.0
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.0
12. Total.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0
13. Earned Prem.(P-Pt 1).....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....

**NONE****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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	.....(0)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
2. 2002.....	.....29	.....29	.....29	.....29	.....29	.....29	.....29	.....29	.....29	.....29	.....29
3. 2003.....	XXX.....	.....47	.....47	.....47	.....47	.....47	.....47	.....47	.....47	.....47	.....47
4. 2004.....	XXX.....	XXX.....	.....98	.....97	.....97	.....97	.....97	.....97	.....97	.....97	.....97
5. 2005.....	XXX.....	XXX.....	XXX.....	.....179	.....178	.....178	.....178	.....178	.....178	.....178	.....178
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....299	.....297	.....297	.....297	.....297	.....297	.....297
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....419	.....416	.....416	.....416	.....416	.....416
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....508	.....504	.....504	.....504	.....504
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....656	.....651	.....651	.....(0)
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....777	.....772	.....(6)
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....847	.....847
12. Total.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....841
13. Earned Prem.(P-Pt 1).....	.....29	.....47	.....97	.....179	.....297	.....417	.....505	.....652	.....773	.....841	.....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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	.....(0)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
2. 2002.....	.....23	.....23	.....23	.....23	.....23	.....23	.....23	.....23	.....23	.....23	.....23
3. 2003.....	XXX.....	.....39	.....39	.....39	.....39	.....39	.....39	.....39	.....39	.....39	.....39
4. 2004.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.0
5. 2005.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.0
6. 2006.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.0
7. 2007.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.0
8. 2008.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.0
9. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.0
10. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.0
11. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.0
12. Total.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0
13. Earned Prem.(P-Pt 1).....	.....23	.....38	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....

**SCHEDULE P - PART 6H - OTHER 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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	0										.0
2. 2002.....	10	10	10	10	10	10	10	10	10	10	10
3. 2003.....	XXX.	10	10	10	10	10	10	10	10	10	10
4. 2004.....	XXX.	XXX.	10	11	11	11	11	11	11	11	11
5. 2005.....	XXX.	XXX.	XXX.	10	10	10	10	10	10	10	10
6. 2006.....	XXX.	XXX.	XXX.	XXX.	10	10	10	10	10	10	10
7. 2007.....	XXX.	XXX.	XXX.	XXX.	XXX.	10	10	10	10	10	10
8. 2008.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	10	10	10	10	10
9. 2009.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	10	10	10	10
10. 2010.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	10	10	10
11. 2011.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	10	10
12. Total.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	10
13. Earned Prem.(P-Pt 1). ....	10	10	10	10	10	10	10	10	10	10	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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....	0										.0
2. 2002.....	9	9	9	9	9	9	9	9	9	9	9
3. 2003.....	XXX.	9	9	9	9	9	9	9	9	9	9
4. 2004.....	XXX.	XXX									0
5. 2005.....	XXX.	XXX	XXX								0
6. 2006.....	XXX.	XXX	XXX	XXX							0
7. 2007.....	XXX.	XXX	XXX	XXX	XXX						0
8. 2008.....	XXX.	XXX	XXX	XXX	XXX	XXX					0
9. 2009.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX				0
10. 2010.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11. 2011.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
12. Total.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	XXX	0
13. Earned Prem.(P-Pt 1). ....	9	9									XXX.....

**SCHEDULE P - PART 6M - INTERNATIONAL****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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior.....											.0
2. 2002.....											.0
3. 2003.....	XXX.										.0
4. 2004.....	XXX.	XXX									.0
5. 2005.....	XXX.	XXX	XXX								.0
6. 2006.....	XXX.	XXX	XXX	XXX							.0
7. 2007.....	XXX.	XXX	XXX	XXX	XXX						.0
8. 2008.....	XXX.	XXX	XXX	XXX	XXX	XXX					.0
9. 2009.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX				.0
10. 2010.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0
11. 2011.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0
12. Total.....	XXX.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	XXX	0
13. Earned Prem.(P-Pt 1). ....											XXX.....

**SECTION 2**

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

**NONE**

**Sch. P-Pt. 6N-Sn. 1**

**NONE**

**Sch. P-Pt. 6N-Sn. 2**

**NONE**

**Sch. P-Pt. 6O-Sn. 1**

**NONE**

**Sch. P-Pt. 6O-Sn. 2**

**NONE**

**Sch. P-Pt. 6R-Sn. 1A**

**NONE**

**Sch. P-Pt. 6R-Sn. 2A**

**NONE**

**Sch. P-Pt. 6R-Sn. 1B**

**NONE**

**Sch. P-Pt. 6R-Sn. 2B**

**NONE**

**Sch. P-Pt. 7A-Sn. 1**

**NONE**

**Sch. P-Pt. 7A-Sn. 2**

**NONE**

**Sch. P-Pt. 7A-Sn. 3**

**NONE**

**Sch. P-Pt. 7A-Sn. 4**

**NONE**

**Sch. P-Pt. 7A-Sn. 5**

**NONE**

**Sch. P-Pt. 7B-Sn. 1**

**NONE**

**Sch. P-Pt. 7B-Sn. 2**

**NONE**

**Sch. P-Pt. 7B-Sn. 3**

**NONE**

**Sch. P-Pt. 7B-Sn. 4**

**NONE**

**Sch. P-Pt. 7B-Sn. 5**

**NONE**

**Sch. P-Pt. 7B-Sn. 6**

**NONE**

**Sch. P-Pt. 7B-Sn. 7**

**NONE**

# PROGRESSIVE ADVANCED INSURANCE COMPANY

## SCHEDULE P INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [ ]   No [ X ]

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

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

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

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

6. Claim count information is reported per claim or per claimant. (Indicate which). PER CLAIMANT  
 If not the same in all years, explain in Interrogatory 7.

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

7.2 An extended statement may be attached.

## SCHEDULE T - PART 2

## INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

**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 Compan 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)	*
<b>Members</b>														
0155	The Progressive Insurance Group...	00000	34-0963169	.....	0000080661..	New York Stock Exchange...	The Progressive Corporation.....	OH.....	UIP.....	Board, Management.....	Board.....	.....	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	83-0371533	.....	.....	.....	Drive Insurance Holdings, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	11410	68-0004572	.....	.....	.....	Drive New Jersey Insurance Company.....	NJ.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	24252	34-1094197	.....	.....	.....	Progressive American Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	17350	31-1193845	.....	.....	.....	Progressive Bayside Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	24260	34-6513736	.....	.....	.....	Progressive Casualty Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1576555	.....	.....	.....	PC Investment Company.....	DE.....	NIA.....	Progressive Casualty Insurance Company.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	29203	74-1082840	.....	.....	.....	Progressive County Mutual Insurance Company.....	TX.....	IA.....	Progressive Casualty Insurance Company.....	Management.....	.....	The Progressive Corporation.....	2, 3.....
0155	The Progressive Insurance Group...	42412	34-1374634	.....	.....	.....	Progressive Gulf Insurance Company.....	OH.....	IA.....	Progressive Casualty Insurance Company.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	32786	34-1172685	.....	.....	.....	Progressive Specialty Insurance Company.....	OH.....	IA.....	Progressive Casualty Insurance Company.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	.....	.....	.....	.....	Trussville/Cahaba, AL , LLC.....	OH.....	NIA.....	Progressive Specialty Insurance Company.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	42994	39-1453002	.....	.....	.....	Progressive Classic Insurance Company.....	WI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	20-2625201	.....	.....	.....	Progressive DLP Corp.....	OH.....	NIA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10067	99-0311930	.....	.....	.....	Progressive Hawaii Insurance Corp.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10187	34-1787734	.....	.....	.....	Progressive Michigan Insurance Company.....	MI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	35190	93-0935623	.....	.....	.....	Progressive Mountain Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	38628	34-1318335	.....	.....	.....	Progressive Northern Insurance Company.....	WI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	42919	91-1187829	.....	.....	.....	Progressive Northwestern Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	37834	34-1287020	.....	.....	.....	Progressive Preferred Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10050	72-1269745	.....	.....	.....	Progressive Security Insurance Company.....	LA.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	38784	59-1951700	.....	.....	.....	Progressive Southeastern Insurance Company.....	IN.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	27804	95-2676519	.....	.....	.....	Progressive West Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	27-2393886	.....	.....	.....	Progressive Commercial Advantage Agency, Inc.....	OH.....	NIA.....	Drive Insurance Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	20-1583033	.....	.....	.....	Progressive Commercial Holdings, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10194	59-3213819	.....	.....	.....	Artisan and Truckers Casualty Company.....	WI.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10243	06-0281045	.....	.....	.....	National Continental Insurance Company.....	NY.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	12879	20-4093467	.....	.....	.....	Progressive Commercial Casualty Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10193	59-3213719	.....	.....	.....	Progressive Express Insurance Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	11770	36-3298008	.....	.....	.....	United Financial Casualty Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	83-0371538	.....	.....	.....	Progressive Direct Holdings, Inc.....	DE.....	UDP.....	The Progressive Corporation.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	44180	23-2599971	.....	.....	.....	Mountain Laurel Assurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	11851	62-0484104	.....	.....	.....	Progressive Advanced Insurance Company.....	OH.....	.....	Progressive Direct Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	58-1772717	.....	.....	.....	Progressive Auto Pro Insurance Agency, Inc.....	FL.....	NIA.....	Progressive Direct Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	44288	62-1444848	.....	.....	.....	Progressive Choice Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	16322	34-1524319	.....	.....	.....	Progressive Direct Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	.....	.....	.....	.....	Gadsden, AL, LLC.....	OH.....	NIA.....	Progressive Direct Insurance Company.....	Ownership.....	100.00	The Progressive Corporation.....	1, 3.....

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

1 Group Code	2 Group Name	3 NAIC Compan Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0155	The Progressive Insurance Group...	12302	20-3187886				Progressive Freedom Insurance Company.....	NJ.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	14800	22-2404709				Progressive Garden State Insurance Company.....	NJ.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	37605	33-0350911				Progressive Marathon Insurance Company.....	MI.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	24279	34-0472535				Progressive Max Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	44695	86-0686869				Progressive Paloverde Insurance Company.....	IN.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	21735	36-3789786				Progressive Premier Insurance Company of Illinois.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	10192	59-3213815				Progressive Select Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1804869				Progressive Specialty Insurance Agency, Inc.....	OH.....	NIA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	21727	36-3789787				Progressive Universal Insurance Company.....	WI.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	99-0311966				Garden Sun Insurance Services, ilc.....	HI.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	95-2706008				Pacific Motor Club.....	CA.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	11-3203413				PROGNY Agency, Inc.....	NY.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1574447				Progressive Adjusting Company, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	13-3673368				Progressive Capital Management Corp.....	NY.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1378861				Progressive Investment Company, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-6530101				Progressive Premium Budget, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1574448				Progressive RSC, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	20-2702408				Progressive Vehicle Service Company.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	51-0295493				Village Transport Corp.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....
0155	The Progressive Insurance Group...	00000	34-1324270				Wilson Mills Land Co.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	....100.00	The Progressive Corporation.....	1, 3.....

**Asterisk Explanation**

1	Schedule Y Part 1A is a common schedule for all companies in The Progressive Insurance Group, however column 10 requires specific relationship information relative to the reporting entity.
2	Progressive County Mutual Insurance Company is a Texas county mutual insurance company that is controlled, but not owned by Progressive Casualty Insurance Company.
3	None of the companies in The Progressive Insurance Group are Federally chartered or insured institutions and therefore, do not have Federal RSSD numbers.

## SCHEDULE Y

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

1 NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 * Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	11 Tots	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
<b>Affiliated Transactions</b>												
.....	34-0963169..	THE PROGRESSIVE CORPORATION.....	.....	513,300,000	.....(1,290,000)	.....	.....	489,873,765	.....	.....	489,873,765	.....
.....	83-0371533..	DRIVE INSURANCE HOLDINGS, INC.....	.....	47,000,000	.....(77,297,647)	.....	.....	992,617,419	.....251,059,984	.....*	.....	512,010,000
24260..	34-6513736..	PROGRESSIVE CASUALTY INSURANCE COMPANY.....	.....	.....(9,000,000)	.....	.....	.....	.....(6,400,450)	.....	.....*	.....1,213,379,756	.....(1,556,835,000)
24252..	34-1094197..	PROGRESSIVE AMERICAN INSURANCE COMPANY.....	.....	.....(275,000,000)	.....166,789,803	.....	.....	.....(27,529,816)	.....	.....*	.....	.....(15,400,450)
32786..	34-1172685..	PROGRESSIVE SPECIALTY INSURANCE COMPANY.....	.....	.....(5,000,000)	.....	.....	.....	.....(3,251,532)	.....	.....*	.....	.....(135,740,013)
38784..	59-1951700..	PROGRESSIVE SOUTHEASTERN INSURANCE COMPANY.....	.....	.....(56,000,000)	.....154,316	.....	.....	.....(36,536,817)	.....	.....*	.....	.....(8,251,532)
38628..	34-1318335..	PROGRESSIVE NORTHERN INSURANCE COMPANY.....	.....	.....(32,000,000)	.....(171,601)	.....	.....	.....(17,979,298)	.....	.....*	.....	.....(92,382,501)
37834..	34-1287020..	PROGRESSIVE PREFERRED INSURANCE COMPANY.....	.....	.....(75,000,000)	.....50,408,650	.....	.....	.....(6,997,454)	.....	.....*	.....	.....(50,150,899)
42412..	34-1374634..	PROGRESSIVE GULF INSURANCE COMPANY.....	.....	.....(58,000,000)	.....149,624	.....	.....	.....(34,859,691)	.....	.....*	.....	.....(31,588,804)
42919..	91-1187829..	PROGRESSIVE NORTHWESTERN INSURANCE COMPANY.....	.....	.....(14,000,000)	.....	.....	.....	.....(8,222,519)	.....	.....*	.....	.....(92,710,067)
42994..	39-1453002..	PROGRESSIVE CLASSIC INSURANCE COMPANY.....	.....	.....(5,000,000)	.....6,832,030	.....	.....	.....(2,743,297)	.....	.....*	.....	.....(22,222,519)
17350..	31-1193845..	PROGRESSIVE BAYSIDE INSURANCE COMPANY.....	.....	.....(4,000,000)	.....6,708,300	.....	.....	.....(3,298,548)	.....	.....*	.....	.....(911,267)
35190..	93-0935623..	PROGRESSIVE MOUNTAIN INSURANCE COMPANY.....	.....	.....(21,700,000)	.....6,048,300	.....	.....	.....(9,175,964)	.....	.....*	.....	.....(590,248)
10187..	34-1787734..	PROGRESSIVE MICHIGAN INSURANCE COMPANY.....	.....	.....(500,000)	.....	.....	.....	.....(20,797,619)	.....(205,864,077)	.....	.....	.....(24,827,664)
29203..	74-1082840..	PROGRESSIVE COUNTY MUTUAL INSURANCE COMPANY.....	.....	.....(540,000)	.....	.....	.....	.....(56,513,309)	.....(10,296,478)	.....	.....	.....(226,661,696)
27804..	95-2676519..	PROGRESSIVE WEST INSURANCE COMPANY.....	.....	.....(5,100,000)	.....12,844,374	.....	.....	.....(58,111,568)	.....(33,536,676)	.....	.....	.....(66,269,787)
10050..	72-1269745..	PROGRESSIVE SECURITY INSURANCE COMPANY.....	.....	.....(750,000)	.....	.....	.....	.....(31,809,588)	.....(1,236,027)	.....	.....	.....(271,632,000)
11410..	68-0004572..	DRIVE NEW JERSEY INSURANCE COMPANY.....	.....	.....(500,000)	.....	.....	.....	.....(22,515,489)	.....	.....	.....	.....(253,020,000)
10067..	99-0311930..	PROGRESSIVE HAWAII INSURANCE CORP.....	.....	.....(198,424,000)	.....(34,591,462)	.....	.....	.....(1,081,614,423)	.....135,960,619	.....*	.....	.....(163,832,538)
.....	83-0371538..	PROGRESSIVE DIRECT HOLDINGS, INC.....	.....	.....(161,000,000)	.....18,741,462	.....29,156,352	.....	.....(8,700,476)	.....(126,726)	.....*	.....	.....(1,058,755,990)
16322..	34-1524319..	PROGRESSIVE DIRECT INSURANCE COMPANY.....	.....	.....(11,000,000)	.....	.....	.....	.....(840,800)	.....	.....*	.....	.....(1,037,159,000)
24279..	34-0472535..	PROGRESSIVE MAX INSURANCE COMPANY.....	.....	.....(3,500,000)	.....	.....	.....	.....(2,320,186)	.....	.....*	.....	.....(840,800)
44695..	86-0686869..	PROGRESSIVE PALOVERDE INSURANCE COMPANY.....	.....	.....(3,500,000)	.....	.....	.....	.....(7,887,908)	.....	.....*	.....	.....(5,820,186)
21735..	36-3789786..	PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS.....	.....	.....(784,000)	.....	.....17,635,590	.....	.....(9,080,193)	.....	.....*	.....	.....(9,747,682)
21727..	36-3789787..	PROGRESSIVE UNIVERSAL INSURANCE COMPANY.....	.....	.....(5,800,000)	.....	.....	.....	.....(61,494,287)	.....	.....*	.....	.....(18,880,193)
37605..	33-0350911..	PROGRESSIVE MARATHON INSURANCE COMPANY.....	.....	.....(4,900,000)	.....	.....	.....	.....(138,124,637)	.....(58,555,075)	.....	.....	.....(222,353,574)
10192..	59-3213815..	PROGRESSIVE SELECT INSURANCE COMPANY.....	.....	.....(5,040,250)	.....	.....	.....	.....(5,562,500)	.....	.....*	.....	.....(544,941,000)
44288..	62-1444848..	PROGRESSIVE CHOICE INSURANCE COMPANY.....	.....	.....(24,703,466)	.....	.....	.....	.....(2,958,436)	.....(4,516,139)	.....	.....	.....(199,039,462)
11851..	62-0484104..	PROGRESSIVE ADVANCED INSURANCE COMPANY.....	.....	.....(450,000)	.....	.....	.....	.....(4,516,139)	.....(11,395,118)	.....	.....	.....(247,328,000)
12302..	20-3187886..	PROGRESSIVE FREEDOM INSURANCE COMPANY.....	.....	.....(1,500,000)	.....	.....	.....	.....(61,376,217)	.....	.....	.....	.....(22,640,966)
14800..	22-2404709..	PROGRESSIVE GARDEN STATE INSURANCE COMPANY.....	.....	.....(7,000,000)	.....	.....	.....	.....(143,004,494)	.....66,031,463	.....	.....	.....(8,708,575)
44180..	23-2599971..	MOUNTAIN LAUREL ASSURANCE COMPANY.....	.....	.....(1,500,000)	.....	.....136,163	.....	.....(77,728)	.....66,389	.....	.....	.....(65,771,335)
20-1583033..	20-1583033..	PROGRESSIVE COMMERCIAL HOLDINGS, INC.....	.....	.....(145,000,000)	.....	.....227,863	.....	.....(11,395,118)	.....	.....	.....	.....(39,210,301)
11770..	36-3298008..	UNITED FINANCIAL CASUALTY COMPANY.....	.....	.....(1,500,000)	.....	.....	.....	.....(221,745,168)	.....	.....	.....	.....(161,700,000)
20-4093467..	20-4093467..	PROGRESSIVE COMMERCIAL CASUALTY COMPANY.....	.....	.....(145,000,000)	.....	.....	.....	.....(221,745,168)	.....	.....	.....	.....(653,030,000)
12879..	34-1378861..	PROGRESSIVE COMMERCIAL CASUALTY COMPANY.....	.....	.....(145,000,000)	.....	.....	.....	.....(221,745,168)	.....	.....	.....	.....(11,339)
10243..	06-0281045..	NATIONAL CONTINENTAL INSURANCE COMPANY.....	.....	.....(12,500,000)	.....	.....900,000	.....8,485,482	.....	.....(31,746,797)	.....	.....	.....(34,861,315)
10194..	59-3213819..	ARTISAN AND TRUCKERS CASUALTY COMPANY.....	.....	.....(4,600,000)	.....	.....(386,772)	.....	.....(48,440,967)	.....(8,474,760)	.....	.....	.....(52,702,499)
10193..	59-3213719..	PROGRESSIVE EXPRESS INSURANCE COMPANY.....	.....	.....(5,700,000)	.....	.....894,928	.....	.....(57,149,119)	.....(57,623,092)	.....	.....	.....(288,209,000)
.....	34-1576555..	PC INVESTMENT COMPANY.....	.....	.....(108,649,192)	.....	.....	.....(8,661,121)	.....	.....	.....	.....	.....(364,821,000)
.....	34-1378861..	PROGRESSIVE INVESTMENT COMPANY, INC.....	.....	.....(157,843,271)	.....	.....	.....8,311,776	.....	.....	.....	.....	.....(117,310,313)
.....	13-3673368..	PROGRESSIVE CAPITAL MANAGEMENT CORP.....	.....	.....	.....	.....	.....5,706,400	.....	.....	.....	.....	.....(149,531,495)
.....	58-1722717..	PROGRESSIVE AUTO PRO INSURANCE AGENCY, INC.....	.....	.....	.....	.....	.....5,522,322	.....	.....	.....	.....	.....(5,706,400)
.....	11-3203413..	PROGNY AGENCY, INC.....	.....	.....	.....	.....	.....(40,744)	.....	.....	.....	.....	.....(5,522,322)
.....	34-1574448..	PROGRESSIVE RSC, INC.....	.....	.....	.....	.....	.....606,266,327	.....	.....	.....	.....	.....(40,744)
.....	34-1804869..	PROGRESSIVE SPECIALTY INSURANCE AGENCY, INC.....	.....	.....	.....	.....	.....55,039,029	.....	.....	.....	.....	.....(55,039,029)
.....	27-2393886..	PROGRESSIVE COMMERCIAL ADVANTAGE AGENCY, INC.....	.....	.....	.....	.....	.....(2,507)	.....	.....	.....	.....	.....(2,507)

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

1 NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.....	34-1574447..	PROGRESSIVE ADJUSTING COMPANY, INC.....						(115,211)				(115,211)
.....	51-0295493..	VILLAGE TRANSPORT CORP.....						309,128				309,128
99999999.	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

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

## MARCH FILING

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

**Responses**

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YES

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YES

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YES

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YES

## APRIL FILING

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

YES  
YES  
YES

**MAY FILING**

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

YES

## JUNE FILING

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

YES  
YES

## AUGUST FILING

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

YES

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

## MARCH FILING

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

## APRIL FILING

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

NO  
NO  
NO  
NO  
NO

## AUGUST FILING

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

YES

Annual Statement for the year 2011 of the **PROGRESSIVE ADVANCED INSURANCE COMPANY**  
**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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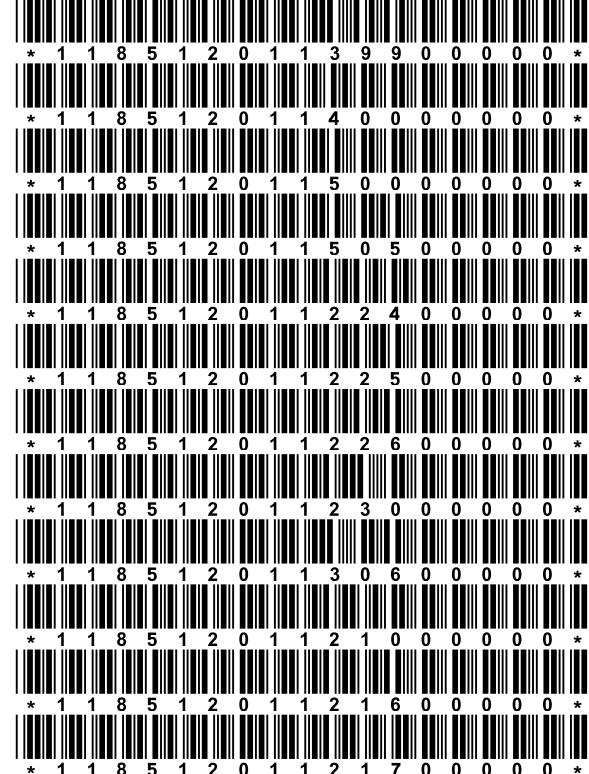
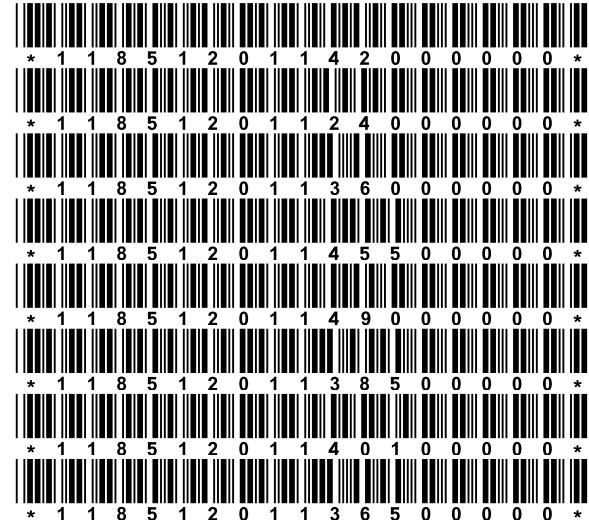
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