



ANNUAL STATEMENT

For the Year Ended December 31, 2012
of the Condition and Affairs of the

PROGRESSIVE WEST INSURANCE COMPANY

NAIC Group Code.....155, 155 (Current Period) (Prior Period)	NAIC Company Code..... 27804	Employer's ID Number..... 95-2676519
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... July 23, 1970	Commenced Business..... October 30, 1972	
Statutory Home Office	6300 WILSON MILLS ROAD, W33..... CLEVELAND OH US 44143-2182 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	6300 WILSON MILLS ROAD, W33..... CLEVELAND OH US..... 44143-2182 440-461-5000 <i>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</i>	
Mail Address	P.O. BOX 89490..... CLEVELAND OH US 44101-6490 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	6300 WILSON MILLS ROAD, W33..... CLEVELAND OH US 44143-2182 440-395-4460 <i>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</i>	
Internet Web Site Address	PROGRESSIVE.COM	
Statutory Statement Contact	MARY BETH ANDREANO <i>(Name)</i> FINANCIAL_REPORTING@PROGRESSIVE.COM <i>(E-Mail Address)</i>	440-395-4460 <i>(Area Code) (Telephone Number) (Extension)</i> 440-446-7168 <i>(Fax Number)</i>

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

OFFICERS

Name NATHAN WINFIELD BROWN THOMAS ALFRED KING	Title PRESIDENT TREASURER	Name MICHAEL JOHN MORONEY	Title SECRETARY
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OTHER

KAREN MARIE BAILO	(VICE PRESIDENT)	MARGARET ANN ROSE	(ASSISTANT SECRETARY)
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DIRECTORS OR TRUSTEES

NATHAN WINFIELD BROWN MICHAEL JOHN MORONEY	SUSAN PATRICIA GRIFFITH	WILLIAM RAYMOND KAMPF	THOMAS ALFRED KING
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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) NATHAN WINFIELD BROWN _____ 1. (Printed Name) PRESIDENT _____ (Title)	_____ (Signature) MARGARET ANN ROSE _____ 2. (Printed Name) ASSISTANT SECRETARY _____ (Title)	_____ (Signature) THOMAS ALFRED KING _____ 3. (Printed Name) TREASURER _____ (Title)
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Subscribed and sworn to before me
This 14TH day of FEBRUARY, 2013

a. Is this an original filing? Yes [X] No []
b. If no
1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF ARIZONA 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				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			1,500
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
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,500

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.

19 AZ

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

19.CA

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.....	25,513	18,820		15,597	2,325	2,619	701		10	39	3,202	651
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.....	6,384	6,300		4,009		144	451		17	40	786	163
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			30,813	53,451	46,031	4,288	1,781	1,321		
19.2 Other private passenger auto liability.....	166,260,257	168,596,167		48,632,929	102,014,238	110,729,890	70,443,333	3,402,564	3,913,624	9,846,311	17,840,758	4,257,506
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.....	118,859,179	118,003,914		34,969,575	81,155,974	81,384,585	(791,285)	612,522	725,846	919,151	12,254,086	3,034,755
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).....	285,151,333	286,625,201	0	83,622,110	183,203,350	192,170,689	69,699,231	4,019,374	4,641,278	10,766,862	30,098,832	7,293,075

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 \$.....9,927,649.

(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....27804

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

19.CO

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			1,389
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	1,389

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....27804

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.....	25,513	18,820		15,597	2,325	2,619	701		10	39	3,202	651
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.....	6,384	6,300		4,009		144	451		17	40	786	163
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			29,345	55,773	45,495	4,288	1,673	1,347		
19.2 Other private passenger auto liability.....	166,260,257	168,596,167		48,632,929	102,013,538	110,725,974	70,443,747	3,402,604	3,913,029	9,846,436	17,840,758	4,282,822
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.....	118,859,179	118,003,914		34,969,575	81,155,773	81,384,384	(791,302)	612,522	725,846	919,151	12,254,086	3,034,755
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).....	285,151,333	286,625,201	0	83,622,110	183,200,981	192,168,894	69,699,092	4,019,414	4,640,575	10,767,013	30,098,832	7,318,391

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 \$.....9,927,649.

(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.

19.GT

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

19.ID

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			2,500
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
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	2,500

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....27804

BUSINESS IN THE STATE OF MONTANA 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				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			1,900
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
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,900

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.

19.MT

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

19.NM

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			1,850
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
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,850

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....27804

BUSINESS IN THE STATE OF NEVADA 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				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			4,741
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
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	4,741

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.

19.NV

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

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			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			8,410
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	8,410

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.

19.OH

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF OREGON 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				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			(1,236)	2,554	(536)		(108)	26		
19.2 Other private passenger auto liability.....	0	0				(3,216)	414	7	(628)	125		(3,137)
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		(17)		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	(1,236)	(662)	(139)	7	(736)	151	0	(3,137)

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.

19. OR

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

19.TX

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			700
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	700

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....27804

BUSINESS IN THE STATE OF UTAH 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			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				825
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
35. TOTALS (a).....	0	0	0	0	0		0	0		0	0	825

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
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	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.

19. UT

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....155 NAIC Company Code....27804

BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

19.WA

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			(232)	(232)			0			
19.2 Other private passenger auto liability.....	0	0			(700)	(700)	33	33				1,620
19.3 Commercial auto no-fault (personal injury protection).....	0	0			0	0			0			
19.4 Other commercial auto liability.....	0	0			0	0			0			
21.1 Private passenger auto physical damage.....	0	0			(201)	(201)			0			
21.2 Commercial auto physical damage.....	0	0			0	0			0			
22. Aircraft (all perils).....	0	0			0	0			0			
23. Fidelity.....	0	0			0	0			0			
24. Surety.....	0	0			0	0			0			
26. Burglary and theft.....	0	0			0	0			0			
27. Boiler and machinery.....	0	0			0	0			0			
28. Credit.....	0	0			0	0			0			
30. Warranty.....	0	0			0	0			0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	(1,133)	(1,133)	33	33	0	0	0	1,620

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....27804

BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

19.WY

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			3,018
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	3,018

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.

Sch. F-Pt. 1
NONE

Sch. F-Pt. 2
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. Non-Pool																			
34-6513736	24260....	Progressive Casualty Insurance Company.....	OH.....	.....2.....	.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....	.....172,832	.....67,040	.....	.....105,792	.....
0299999	Total Authorized Affiliates - U.S. Non-Pool.....				.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....0	.....172,832	.....67,040	.....0	.....105,792	.....0
0499999	Total Authorized Affiliates.....				.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....0	.....172,832	.....67,040	.....0	.....105,792	.....0
0999999	Total Authorized.....				.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....0	.....172,832	.....67,040	.....0	.....105,792	.....0
2899999	Total Authorized, Unauthorized and Certified.....				.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....0	.....172,832	.....67,040	.....0	.....105,792	.....0
9999999	Totals.....				.....256,636	.....13,761	.....2,516	.....53,153	.....16,920	.....9,576	.....1,646	.....75,260	.....0	.....172,832	.....67,040	.....0	.....105,792	.....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)		

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 Casualty Insurance Company.....	.....172,832	.....256,636	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
(2)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(3)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(4)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(5)			Yes <input type="checkbox"/>	No <input type="checkbox"/>

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						11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue				10 Total Overdue Cols. 6 + 7 + 8 + 9			
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days				
Authorized Affiliates-U.S. Non-Pool												
34-6513736..	24260.....	Progressive Casualty Insurance Company.....	OH.....	16,277					0	16,277	.00	.00
0299999.	Total Authorized - Affiliates - U.S. Non-Pool.....			16,277	0	0	0	0	0	16,277	.00	.00
0499999.	Total Authorized - Affiliates.....			16,277	0	0	0	0	0	16,277	.00	.00
0999999.	Total Authorized.....			16,277	0	0	0	0	0	16,277	.00	.00
2899999.	Total Authorized, Unauthorized and Certified.....			16,277	0	0	0	0	0	16,277	.00	.00
9999999.	Totals.....			16,277	0	0	0	0	0	16,277	.00	.00

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

**Sch. F-Pt. 6-Section 1
NONE**

**Sch. F-Pt. 6-Section 1 (continued)
NONE**

**Sch. F-Pt. 6-Section 2
NONE**

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

**Sch. F-Pt. 8
NONE**

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	61,129,306		61,129,306
2. Premiums and considerations (Line 15).....	56,310,602		56,310,602
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	16,276,933	(16,276,933)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	2,307,133		2,307,133
6. Net amount recoverable from reinsurers.....		105,792,062	105,792,062
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	136,023,974	89,515,129	225,539,103
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	9,032,895	81,295,000	90,327,895
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	2,593,801		2,593,801
11. Unearned premiums (Line 9).....	8,362,239	75,260,000	83,622,239
12. Advance premiums (Line 10).....	1,109,290		1,109,290
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	67,039,871	(67,039,871)	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.....	15,929,824		15,929,824
19. Total liabilities excluding protected cell business (Line 26).....	104,067,920	89,515,129	193,583,049
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	31,956,054	XXX	31,956,054
22. Totals (Line 38).....	136,023,974	89,515,129	225,539,103

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

If yes, give full explanation:

**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. 2003.....			.0								0	
3. 2004.....			.0								0	
4. 2005.....			.0								0	
5. 2006.....			.0								0	
6. 2007.....			.0								0	
7. 2008.....			.0								0	
8. 2009.....			.0								0	
9. 2010.....			.0								0	
10. 2011.....			.0								0	
11. 2012.....			.0								0	
12. Totals.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....											0		
2. 2003.....											0		
3. 2004.....											0		
4. 2005.....											0		
5. 2006.....											0		
6. 2007.....											0		
7. 2008.....											0		
8. 2009.....											0		
9. 2010.....											0		
10. 2011.....											0		
11. 2012.....											0		
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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. 2003.	0	0	0	0.0	0.0	0.0				0	0
3. 2004.	0	0	0	0.0	0.0	0.0				0	0
4. 2005.	0	0	0	0.0	0.0	0.0				0	0
5. 2006.	0	0	0	0.0	0.0	0.0				0	0
6. 2007.	0	0	0	0.0	0.0	0.0				0	0
7. 2008.	0	0	0	0.0	0.0	0.0				0	0
8. 2009.	0	0	0	0.0	0.0	0.0				0	0
9. 2010.	0	0	0	0.0	0.0	0.0				0	0
10. 2011.	0	0	0	0.0	0.0	0.0				0	0
11. 2012.	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(2).....	.....(2).....	.....(1).....	.....(1).....	.....0.....	.....0.....	.....0.....	.....(0).....	.....XXX.....
2. 2003.....	.....140,896.....	.....126,822.....	.....14,074.....	.....74,104.....	.....66,697.....	.....6,330.....	.....5,697.....	.....22,221.....	.....20,000.....	.....355.....	.....10,261.....	.....35,090.....
3. 2004.....	.....174,455.....	.....157,021.....	.....17,434.....	.....86,366.....	.....77,735.....	.....5,475.....	.....4,928.....	.....24,782.....	.....22,305.....	.....143.....	.....11,655.....	.....40,310.....
4. 2005.....	.....182,102.....	.....163,891.....	.....18,211.....	.....89,390.....	.....80,451.....	.....4,852.....	.....4,367.....	.....25,037.....	.....22,534.....	.....137.....	.....11,928.....	.....41,263.....
5. 2006.....	.....202,681.....	.....182,413.....	.....20,268.....	.....107,049.....	.....96,344.....	.....6,709.....	.....6,038.....	.....29,419.....	.....26,477.....	.....173.....	.....14,318.....	.....47,439.....
6. 2007.....	.....213,592.....	.....192,233.....	.....21,359.....	.....128,044.....	.....115,240.....	.....5,291.....	.....4,762.....	.....31,433.....	.....28,290.....	.....185.....	.....16,477.....	.....55,806.....
7. 2008.....	.....184,101.....	.....165,691.....	.....18,410.....	.....102,207.....	.....91,986.....	.....3,540.....	.....3,186.....	.....25,565.....	.....23,008.....	.....166.....	.....13,131.....	.....49,122.....
8. 2009.....	.....152,098.....	.....136,888.....	.....15,210.....	.....77,534.....	.....69,780.....	.....2,438.....	.....2,194.....	.....19,665.....	.....17,699.....	.....127.....	.....9,964.....	.....39,377.....
9. 2010.....	.....141,421.....	.....127,279.....	.....14,142.....	.....74,154.....	.....66,739.....	.....1,924.....	.....1,732.....	.....17,522.....	.....15,770.....	.....134.....	.....9,360.....	.....37,402.....
10. 2011.....	.....156,201.....	.....140,581.....	.....15,620.....	.....80,765.....	.....72,689.....	.....740.....	.....666.....	.....18,533.....	.....16,680.....	.....151.....	.....10,004.....	.....43,531.....
11. 2012.....	.....168,596.....	.....151,737.....	.....16,859.....	.....60,428.....	.....54,385.....	.....117.....	.....105.....	.....14,923.....	.....13,430.....	.....96.....	.....7,547.....	.....43,305.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....880,039.....	.....792,044.....	.....37,417.....	.....33,675.....	.....229,100.....	.....206,192.....	.....1,667.....	.....114,644.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												.....0.....	
2. 2003.....												.....0.....	
3. 2004.....											.....1.....	.....0.....	
4. 2005.....											.....1.....	.....0.....	
5. 2006.....	.....36.....	.....32.....			.....15.....	.....14.....			.....5.....	.....4.....	.....2.....	.....6.....	.....5.....
6. 2007.....	.....189.....	.....170.....			.....70.....	.....63.....			.....22.....	.....20.....	.....4.....	.....28.....	.....18.....
7. 2008.....	.....380.....	.....342.....			.....184.....	.....166.....			.....32.....	.....28.....	.....4.....	.....60.....	.....27.....
8. 2009.....	.....987.....	.....888.....	.....247.....	.....222.....	.....393.....	.....354.....	.....69.....	.....62.....	.....83.....	.....75.....	.....6.....	.....178.....	.....71.....
9. 2010.....	.....5,152.....	.....4,637.....	.....427.....	.....385.....	.....1,721.....	.....1,549.....	.....219.....	.....197.....	.....395.....	.....355.....	.....12.....	.....791.....	.....288.....
10. 2011.....	.....11,551.....	.....10,396.....	.....2,278.....	.....2,050.....	.....2,470.....	.....2,223.....	.....435.....	.....392.....	.....1,801.....	.....1,621.....	.....30.....	.....1,854.....	.....1,145.....
11. 2012.....	.....36,445.....	.....32,801.....	.....12,797.....	.....11,518.....	.....3,458.....	.....3,112.....	.....813.....	.....731.....	.....6,996.....	.....6,296.....	.....103.....	.....6,051.....	.....6,201.....
12. Totals.....	.....54,740.....	.....49,266.....	.....15,750.....	.....14,175.....	.....8,312.....	.....7,480.....	.....1,536.....	.....1,383.....	.....9,333.....	.....8,400.....	.....163.....	.....8,967.....	.....7,755.....

	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. 2003..	.....102,656.....	.....92,394.....	.....10,261.....	.....72.9.....	.....72.9.....	.....72.9.....				.....0.....	.....0.....
3. 2004..	.....116,623.....	.....104,968.....	.....11,655.....	.....66.8.....	.....66.8.....	.....66.9.....				.....0.....	.....0.....
4. 2005..	.....119,279.....	.....107,351.....	.....11,928.....	.....65.5.....	.....65.5.....	.....65.5.....				.....0.....	.....0.....
5. 2006..	.....143,233.....	.....128,910.....	.....14,323.....	.....70.7.....	.....70.7.....	.....70.7.....				.....4.....	.....2.....
6. 2007..	.....165,050.....	.....148,545.....	.....16,505.....	.....77.3.....	.....77.3.....	.....77.3.....				.....19.....	.....9.....
7. 2008..	.....131,908.....	.....118,717.....	.....13,191.....	.....71.6.....	.....71.6.....	.....71.6.....				.....38.....	.....22.....
8. 2009..	.....101,416.....	.....91,275.....	.....10,142.....	.....66.7.....	.....66.7.....	.....66.7.....				.....123.....	.....55.....
9. 2010..	.....101,514.....	.....91,363.....	.....10,151.....	.....71.8.....	.....71.8.....	.....71.8.....				.....558.....	.....233.....
10. 2011..	.....118,574.....	.....106,716.....	.....11,857.....	.....75.9.....	.....75.9.....	.....75.9.....				.....1,383.....	.....471.....
11. 2012..	.....135,976.....	.....122,379.....	.....13,598.....	.....80.7.....	.....80.7.....	.....80.7.....				.....4,924.....	.....1,127.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....7,049.....	.....1,918.....

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

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

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

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

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

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

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. 2003.....	177.....	160.....	17.....	5.....	4.....			1.....	1.....		1	10
3. 2004.....	231.....	208.....	23.....	2.....	2.....			1.....	1.....		0	6
4. 2005.....	203.....	182.....	21.....					0.....	0.....		0	2
5. 2006.....	142.....	128.....	14.....	20.....	18.....			1.....	1.....		2	2
6. 2007.....	110.....	99.....	11.....	10.....	9.....			6.....	5.....		2	3
7. 2008.....	65.....	58.....	7.....	3.....	3.....			1.....	1.....		0	3
8. 2009.....	12.....	10.....	2.....								0	
9. 2010.....	4.....	3.....	1.....								0	
10. 2011.....	4.....	4.....	0.....								0	
11. 2012.....	6.....	6.....	0.....								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	40.....	36.....	0.....	0.....	11.....	10.....	0.....	5.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
2. 2003.....												0	
3. 2004.....												0	
4. 2005.....												0	
5. 2006.....												0	
6. 2007.....												0	
7. 2008.....												0	
8. 2009.....												0	
9. 2010.....			0	0			0	0				0	
10. 2011.....			0	0			0	0	0	0		0	
11. 2012.....			0	0			0	0	0	0		0	
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2003.....	6.....	6.....	1.....	3.5.....	3.5.....	3.6.....				0	0
3. 2004.....	3.....	3.....	0.....	1.5.....	1.5.....	1.5.....				0	0
4. 2005.....	0.....	0.....	0.....	0.2.....	0.2.....	0.2.....				0	0
5. 2006.....	20.....	18.....	2.....	14.4.....	14.4.....	14.6.....				0	0
6. 2007.....	16.....	14.....	2.....	14.5.....	14.5.....	14.5.....				0	0
7. 2008.....	4.....	4.....	0.....	6.5.....	6.5.....	6.0.....				0	0
8. 2009.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....				0	0
9. 2010.....	0.....	0.....	0.....	0.7.....	0.9.....	0.3.....				0	0
10. 2011.....	0.....	0.....	0.....	1.8.....	1.6.....	0.0.....				0	0
11. 2012.....	0.....	0.....	0.....	7.3.....	6.5.....	0.0.....				0	0
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0	0

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

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2003.....			.0								0	
3. 2004.....			.0								0	
4. 2005.....			.0								0	
5. 2006.....			.0								0	
6. 2007.....			.0								0	
7. 2008.....			.0								0	
8. 2009.....			.0								0	
9. 2010.....			.0								0	
10. 2011.....			.0								0	
11. 2012.....			.0								0	
12. Totals.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....											0		
2. 2003.....											0		
3. 2004.....											0		
4. 2005.....											0		
5. 2006.....											0		
6. 2007.....											0		
7. 2008.....											0		
8. 2009.....											0		
9. 2010.....											0		
10. 2011.....											0		
11. 2012.....											0		
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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. 2003.	0	0	0	0.0	0.0	0.0				0	0
3. 2004.	0	0	0	0.0	0.0	0.0				0	0
4. 2005.	0	0	0	0.0	0.0	0.0				0	0
5. 2006.	0	0	0	0.0	0.0	0.0				0	0
6. 2007.	0	0	0	0.0	0.0	0.0				0	0
7. 2008.	0	0	0	0.0	0.0	0.0				0	0
8. 2009.	0	0	0	0.0	0.0	0.0				0	0
9. 2010.	0	0	0	0.0	0.0	0.0				0	0
10. 2011.	0	0	0	0.0	0.0	0.0				0	0
11. 2012.	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

**SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....								.....0.....	.....XXX.....
2. 2011.....	.....13.....	.....12.....	.....1.....								.....0.....	.....XXX.....
3. 2012.....	.....19.....	.....17.....	.....2.....	.....2.....	.....2.....			.....1.....	.....1.....		.....0.....	.....XXX.....
4. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2.....	.....2.....	.....0.....	.....0.....	.....1.....	.....1.....	.....0.....	.....0.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....			.....(0).....	.....(0).....								.....(0).....	
2. 2011.....			.....0.....	.....0.....			.....0.....	.....0.....	.....0.....	.....0.....		.....0.....	
3. 2012.....			.....1.....	.....1.....			.....0.....	.....0.....	.....0.....	.....0.....		.....0.....	
4. Totals.....	.....0.....	.....0.....	.....1.....	.....1.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....			.....XXX.....	.....(0).....	.....0.....
2. 2011.....	.....0.....	.....0.....	.....0.....	.....0.3.....	.....0.3.....	.....0.4.....				.....0.....	.....0.....
3. 2012.....	.....5.....	.....4.....	.....0.....	.....24.3.....	.....24.4.....	.....23.1.....				.....0.....	.....0.....
4. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....9	.....8	.....347	.....312	.....107	.....96	.....57	.....46	.....XXX.....
2. 2011.....	.....105,690	.....95,121	.....10,569	.....68,290	.....61,461	.....250	.....225	.....9,565	.....8,609	.....2,058	.....7,811	.....57,559
3. 2012.....	.....118,004	.....106,204	.....11,800	.....82,179	.....73,961	.....132	.....119	.....9,866	.....8,880	.....1,708	.....9,218	.....62,913
4. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....150,477	.....135,430	.....730	.....657	.....19,539	.....17,585	.....3,823	.....17,075	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....12	.....11	.....(246)	.....(221)	.....71	.....64	.....	.....	.....1	.....1	.....40	.....(16)	.....6
2. 2011.....	.....38	.....34	.....(401)	.....(361)	.....103	.....92	.....77	.....69	.....36	.....32	.....64	.....(15)	.....13
3. 2012.....	.....4,269	.....3,842	.....(4,464)	.....(4,018)	.....452	.....407	.....216	.....195	.....493	.....443	.....878	.....97	.....1,413
4. Totals.....	.....4,319	.....3,888	.....(5,111)	.....(4,600)	.....626	.....564	.....293	.....264	.....529	.....476	.....982	.....66	.....1,432

	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.....	.....(23)	.....7
2. 2011.....	.....77,957	.....70,162	.....7,796	.....73.8	.....73.8	.....73.8	.....	.....	.....	.....(36)	.....22
3. 2012.....	.....93,144	.....83,830	.....9,314	.....78.9	.....78.9	.....78.9	.....	.....	.....	.....(20)	.....116
4. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....(79)	.....145

**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	2	3	4	5	6	7	8	9	10	11	12
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year
1. Prior											0	0
2. 2003											0	0
3. 2004	XXX										0	0
4. 2005	XXX	XXX									0	0
5. 2006	XXX	XXX	XXX								0	0
6. 2007	XXX	XXX	XXX	XXX							0	0
7. 2008	XXX	XXX	XXX	XXX	XXX						0	0
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	0

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

1. Prior	1,985	1,970	2,067	2,114	2,121	2,155	2,124	2,127	2,127	2,126	(0)	(0)
2. 2003	8,270	8,000	7,888	7,898	8,170	8,204	8,024	8,042	8,040	8,040	(0)	(2)
3. 2004	XXX	9,491	9,229	9,162	9,168	9,164	9,183	9,182	9,171	9,178	7	(4)
4. 2005	XXX	XXX	9,776	9,376	9,445	9,452	9,436	9,426	9,423	9,424	1	(1)
5. 2006	XXX	XXX	XXX	11,353	11,360	11,462	11,347	11,331	11,367	11,381	14	50
6. 2007	XXX	XXX	XXX	XXX	13,745	13,695	13,638	13,435	13,353	13,359	7	(76)
7. 2008	XXX	XXX	XXX	XXX	XXX	11,619	10,935	10,866	10,704	10,631	(73)	(234)
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX	8,929	8,543	8,318	8,167	(152)	(376)
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,135	8,315	8,360	45	225
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,609	9,824	214	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,406	XXX	XXX
12. Totals											64	(419)

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

1. Prior											0	0
2. 2003											0	0
3. 2004	XXX										0	0
4. 2005	XXX	XXX									0	0
5. 2006	XXX	XXX	XXX								0	0
6. 2007	XXX	XXX	XXX	XXX							0	0
7. 2008	XXX	XXX	XXX	XXX	XXX						0	0
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	0

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

1. Prior											0	0
2. 2003											0	0
3. 2004	XXX										0	0
4. 2005	XXX	XXX									0	0
5. 2006	XXX	XXX	XXX								0	0
6. 2007	XXX	XXX	XXX	XXX							0	0
7. 2008	XXX	XXX	XXX	XXX	XXX						0	0
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior											0	0
2. 2003											0	0
3. 2004	XXX										0	0
4. 2005	XXX	XXX									0	0
5. 2006	XXX	XXX	XXX								0	0
6. 2007	XXX	XXX	XXX	XXX							0	0
7. 2008	XXX	XXX	XXX	XXX	XXX						0	0
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	0

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year
1. Prior.....											.0	.0
2. 2003.....											.0	.0
3. 2004.....	XXX										.0	.0
4. 2005.....	XXX	XXX									.0	.0
5. 2006.....	XXX	XXX	XXX								.0	.0
6. 2007.....	XXX	XXX	XXX	XXX							.0	.0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	.0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	.0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											.0	.0

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

1. Prior.....											.0	.0
2. 2003.....											.0	.0
3. 2004.....	XXX										.0	.0
4. 2005.....	XXX	XXX									.0	.0
5. 2006.....	XXX	XXX	XXX								.0	.0
6. 2007.....	XXX	XXX	XXX	XXX							.0	.0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	.0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	.0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											.0	.0

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

1. Prior.....											.0	.0
2. 2003.....											.0	.0
3. 2004.....	XXX										.0	.0
4. 2005.....	XXX	XXX									.0	.0
5. 2006.....	XXX	XXX	XXX								.0	.0
6. 2007.....	XXX	XXX	XXX	XXX							.0	.0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	.0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	.0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											.0	.0

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

1. Prior.....	.0	.1	.1	.1	.1	.1	.1	.1	.1	.1	.0	.0
2. 2003.....	.1	.1	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2004.....	XXX	.2	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2005.....	XXX	XXX	.1	.0							.0	.0
5. 2006.....	XXX	XXX	XXX	.1	.2	.2	.2	.2	.2	.2	.0	.0
6. 2007.....	XXX	XXX	XXX	XXX	.1	.1	.1	.1	.1	.1	.0	.0
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	(.0)	(.0)
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	(.0)	(.0)
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	(.0)	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											(.0)	(.0)

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

1. Prior.....											.0	.0
2. 2003.....											.0	.0
3. 2004.....	XXX										.0	.0
4. 2005.....	XXX	XXX									.0	.0
5. 2006.....	XXX	XXX	XXX								.0	.0
6. 2007.....	XXX	XXX	XXX	XXX							.0	.0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	.0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	.0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	.0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											.0	.0

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development		
	1	2	3	4	5	6	7	8	9	10	11	12	
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year	
1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	(0)	(0)	0	(0)	
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(0)	XXX	
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	
											4. Totals	(0)	(0)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	(95)	(3)	92	(5)	
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,995	6,836	(159)	XXX	
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,279	XXX	XXX	
											4. Totals	(68)	(5)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior....	XXX	XXX	XXX	XXX	NONE			XXX			0	0	
2. 2011....	XXX	XXX	XXX	XXX	NONE			XXX			0	XXX	
3. 2012....	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX	
											4. Totals	0	0

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

1. Prior....	XXX	XXX	XXX	XXX	NONE			XXX			0	0	
2. 2011....	XXX	XXX	XXX	XXX	NONE			XXX			0	XXX	
3. 2012....	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX	
											4. Totals	0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior....					NONE						0	0				
2. 2003....					NONE						0	0				
3. 2004....	XXX				NONE						0	0				
4. 2005....	XXX	XXX			NONE						0	0				
5. 2006....	XXX	XXX	XXX		NONE						0	0				
6. 2007....	XXX	XXX	XXX	XXX	NONE						0	0				
7. 2008....	XXX	XXX	XXX	XXX	XXX	NONE						0	0			
8. 2009....	XXX	XXX	XXX	XXX	XXX	XXX	NONE						0	0		
9. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	NONE						0	0	
10. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	NONE					0	XXX	
11. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	NONE					XXX	XXX
											12. Totals	0	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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012			
1. Prior.....	.....000.....												
2. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

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

1. Prior.....	.....000.....	.....1,269.....	.....1,866.....	.....2,003.....	.....2,096.....	.....2,155.....	.....2,124.....	.....2,125.....	.....2,127.....	.....2,126.....	.....1,811.....	.....260.....
2. 2003.....	.....3,326.....	.....6,095.....	.....7,158.....	.....7,651.....	.....8,123.....	.....8,182.....	.....8,018.....	.....8,039.....	.....8,040.....	.....8,040.....	.....21,653.....	.....13,437.....
3. 2004.....	XXX	4,180	6,922	8,323	8,950	9,119	9,165	9,166	9,171	9,178	24,254	16,056
4. 2005.....	XXX	XXX	4,376	7,487	8,728	9,286	9,408	9,420	9,421	9,424	24,929	16,334
5. 2006.....	XXX	XXX	XXX	5,381	9,229	10,553	11,139	11,288	11,355	11,376	29,230	18,204
6. 2007.....	XXX	XXX	XXX	XXX	6,709	11,008	12,615	13,199	13,298	13,334	34,380	21,408
7. 2008.....	XXX	XXX	XXX	XXX	XXX	5,623	8,845	10,063	10,476	10,575	30,474	18,621
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	4,491	6,824	7,661	7,997	23,331	15,975
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,206	6,637	7,608	21,716	15,398
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,133	8,151	24,997	17,389
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,054	20,960	16,144

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

1. Prior.....	.....000.....											
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1. Prior.....	.....000.....											
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.....000.....											
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012			
1. Prior.....	.....000.....												
2. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	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. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	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.....											XXX	XXX
2. 2003.....												XXX	XXX
3. 2004.....	XXX											XXX	XXX
4. 2005.....	XXX	XXX										XXX	XXX
5. 2006.....	XXX	XXX	XXX									XXX	XXX
6. 2007.....	XXX	XXX	XXX	XXX								XXX	XXX
7. 2008.....	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

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

1. Prior.....	.....000.....	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....2	.....
2. 2003.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....2	.....8
3. 2004.....	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....1	.....5
4. 2005.....	XXX	XXX											.....2
5. 2006.....	XXX	XXX	XXX		.....2	.....2	.....2	.....2	.....2	.....2	.....2	.....1	.....1
6. 2007.....	XXX	XXX	XXX	XXX	.....1	.....1	.....1	.....1	.....1	.....1	.....1	.....3	.....
7. 2008.....	XXX	XXX	XXX	XXX	XXX		.....0	.....0	.....0	.....0	.....0	.....1	.....2
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1. Prior.....	.....000.....												
2. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

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

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012			
1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			(0)	XXX	XXX
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	(22)	13	3,068	698
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,944	6,854	42,237	15,309
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,231	45,767	15,733

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior....	.000										XXX	XXX
2. 2003....											XXX	XXX
3. 2004....	XXX										XXX	XXX
4. 2005....	XXX	XXX									XXX	XXX
5. 2006....	XXX	XXX	XXX								XXX	XXX
6. 2007....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2008....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2009....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2012....	XXX	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	2	3	4	5	6	7	8	9	10
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	182	31	(2)							
2. 2003.....	1,013	202	71	(2)						
3. 2004.....	XXX	1,213	310	79	(3)					
4. 2005.....	XXX	XXX	1,417	301	91	12				
5. 2006.....	XXX	XXX	XXX	1,545	347	134	12			
6. 2007.....	XXX	XXX	XXX	XXX	1,849	400	142	43		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	1,698	343	141	41	
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	1,260	264	100	32
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	875	216	65
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,049	271
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,361

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

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	.0									
2. 2003.....	.1	.0								
3. 2004.....	XXX	.1	.0							
4. 2005.....	XXX	XXX	.1	.0						
5. 2006.....	XXX	XXX	XXX	.1	.0					
6. 2007.....	XXX	XXX	XXX	XXX	.0	.0				
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.0	.0			
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	Bulk and IBSR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	(0)	(0)
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(441)	(97)	(25)
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(352)	(32)
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(425)

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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

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

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

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

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

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

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

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

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

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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	5,062	801	161	46	15	10	105	4	2	
2. 2003.....	14,598	20,448	21,302	21,523	21,576	21,586	21,645	21,649	21,652	21,653
3. 2004.....	XXX	17,377	22,847	23,941	24,172	24,215	24,238	24,246	24,250	24,254
4. 2005.....	XXX	XXX	17,729	23,527	24,534	24,810	24,896	24,915	24,923	24,929
5. 2006.....	XXX	XXX	XXX	20,881	27,519	28,689	29,082	29,198	29,219	29,230
6. 2007.....	XXX	XXX	XXX	XXX	24,491	32,092	33,785	34,274	34,355	34,380
7. 2008.....	XXX	XXX	XXX	XXX	XXX	21,838	28,946	30,113	30,411	30,474
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	17,128	22,158	23,091	23,331
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,613	20,740	21,716
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,675	24,997
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,960

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	1,190	272	79	32	12			1		
2. 2003.....	6,983	1,358	391	106	20	9	3	2		
3. 2004.....	XXX	6,951	1,630	362	63	15	8	6		
4. 2005.....	XXX	XXX	6,936	1,418	347	72	15	4	1	
5. 2006.....	XXX	XXX	XXX	7,845	1,556	433	101	24	8	5
6. 2007.....	XXX	XXX	XXX	XXX	8,688	1,942	525	102	35	18
7. 2008.....	XXX	XXX	XXX	XXX	XXX	7,059	1,332	352	90	27
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	5,293	1,071	282	71
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,752	1,010	288
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,611	1,145
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,201

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	1,831	132	30	2	2	3	105	3	1	
2. 2003.....	32,466	34,847	34,986	35,024	35,028	35,031	35,085	35,088	35,089	35,090
3. 2004.....	XXX	37,909	40,036	40,213	40,267	40,279	40,297	40,303	40,306	40,310
4. 2005.....	XXX	XXX	38,634	40,897	41,117	41,194	41,240	41,250	41,258	41,263
5. 2006.....	XXX	XXX	XXX	44,364	46,850	47,231	47,366	47,419	47,430	47,439
6. 2007.....	XXX	XXX	XXX	XXX	51,683	55,016	55,608	55,768	55,795	55,806
7. 2008.....	XXX	XXX	XXX	XXX	XXX	45,066	48,615	49,002	49,098	49,122
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	36,646	38,955	39,299	39,377
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34,142	36,981	37,402
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39,973	43,531
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43,305

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	1									
2. 2003.....	2	2	2	2	2	2	2	2	2	2
3. 2004.....	XXX	1	1	1	1	1	1	1	1	1
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX		1	1	1	1	1	1
6. 2007.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3
7. 2008.....	XXX	XXX	XXX	XXX	XXX		1	1	1	1
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX	1						
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX	1				
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....	9	10	10	10	10	10	10	10	10	10
3. 2004.....	XXX	5	6	6	6	6	6	6	6	6
4. 2005.....	XXX	XXX	2	2	2	2	2	2	2	2
5. 2006.....	XXX	XXX	XXX	1	2	2	2	2	2	2
6. 2007.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3
7. 2008.....	XXX	XXX	XXX	XXX	XXX	3	3	3	3	3
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	.XXX										0
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.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 Prems.(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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	.XXX										0
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.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 Prems.(P-Pt 1)											.XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....	(2)										0
2. 2003.....	179	177	177	177	177	177	177	177	177	177	177
3. 2004.....	.XXX	233	231	231	231	231	231	231	231	231	231
4. 2005.....	.XXX	.XXX	205	204	204	204	204	204	204	204	204
5. 2006.....	.XXX	.XXX	.XXX	143	142	142	142	142	142	142	142
6. 2007.....	.XXX	.XXX	.XXX	.XXX	111	111	111	111	111	111	111
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX	65	65	65	65	65	65
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	12	12	12	12	12
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	4	4	4	4
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	4	4	4
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	6	6
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	6
13. Earned Prems.(P-Pt 1)	177	231	203	142	110	65	12	4	4	6	.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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....	(2)										0
2. 2003.....	162	160	160	160	160	160	160	160	160	160	160
3. 2004.....	.XXX	210	208	208	208	208	208	208	208	208	208
4. 2005.....	.XXX	.XXX	184	183	183	183	183	183	183	183	183
5. 2006.....	.XXX	.XXX	.XXX	129	128	128	128	128	128	128	128
6. 2007.....	.XXX	.XXX	.XXX	.XXX	100	100	100	100	100	100	100
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX	58	58	58	58	58	58
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	10	10	10	10	10
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	3	3	3	3
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	4	4	4
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	6	6
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	6
13. Earned Prems.(P-Pt 1)	160	208	182	128	99	58	10	3	4	6	.XXX

Sch. P-Pt. 6H-Sn. 1B

NONE

Sch. P-Pt. 6H-Sn. 2B

NONE

Sch. P-Pt. 6M-Sn. 1

NONE

Sch. P-Pt. 6M-Sn. 2

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

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

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

PROGRESSIVE WEST 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? Yes [] No [X]
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.
- 1.2 What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A[X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	2003.....	.....	.....
1.603	2004.....	.....	.....
1.604	2005.....	.....	.....
1.605	2006.....	.....	.....
1.606	2007.....	.....	.....
1.607	2008.....	.....	.....
1.608	2009.....	.....	.....
1.609	2010.....	.....	.....
1.610	2011.....	.....	.....
1.611	2012.....	.....	.....
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					Totals
	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	
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.....CAN						0
58. Aggregate Other Alien.....OT						0
59. Totals.....	0	0	0	0	0	0

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
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.....	UDP.....	The Progressive Corporation.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	24252.....	34-1094197	.....	.....	.....	Progressive American Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	17350.....	31-1193845	.....	.....	.....	Progressive Bayside Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	24260.....	34-6513736	.....	.....	.....	Progressive Casualty Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-1576555	.....	.....	.....	PC Investment Company.....	DE.....	NIA.....	Progressive Casualty Insurance Company.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	32786.....	34-1172685	.....	.....	.....	Progressive Specialty Insurance Company.....	OH.....	IA.....	Progressive Casualty Insurance Company.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	.....	.....	.....	.....	Trussville/Cahaba, AL , LLC.....	OH.....	NIA.....	Progressive Specialty Insurance Company.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	42994.....	39-1453002	.....	.....	.....	Progressive Classic Insurance Company.....	WI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	20-2625201	.....	.....	.....	Progressive DLP Corp.....	OH.....	NIA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10067.....	99-0311930	.....	.....	.....	Progressive Hawaii Insurance Corp.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10187.....	34-1787734	.....	.....	.....	Progressive Michigan Insurance Company.....	MI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	35190.....	93-0935623	.....	.....	.....	Progressive Mountain Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	38628.....	34-1318335	.....	.....	.....	Progressive Northern insurance Company.....	WI.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	42919.....	91-1187829	.....	.....	.....	Progressive Northwestern Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	37834.....	34-1287020	.....	.....	.....	Progressive Preferred Insurance Company.....	OH.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10050.....	72-1269745	.....	.....	.....	Progressive Security Insurance Company.....	LA.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	38784.....	59-1951700	.....	.....	.....	Progressive Southeastern Insurance Company.....	IN.....	IA.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	27804.....	95-2676519	.....	.....	.....	Progressive West Insurance Company.....	OH.....	.....	Drive Insurance Holdings, Inc.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	20-1583033	.....	.....	.....	Progressive Commercial Holdings, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10243.....	06-0281045	.....	.....	.....	National Continental Insurance Company.....	NY.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	12879.....	20-4093467	.....	.....	.....	Progressive Commercial Casualty Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10193.....	59-3213719	.....	.....	.....	Progressive Express Insurance Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	11770.....	36-3298008	.....	.....	.....	United Financial Casualty Company.....	OH.....	IA.....	Progressive Commercial Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	83-0371538	.....	.....	.....	Progressive Direct Holdings, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	44180.....	23-2599971	.....	.....	.....	Mountain Laurel Assurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	11851.....	62-0484104	.....	.....	.....	Progressive Advanced Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	44288.....	62-1444848	.....	.....	.....	Progressive Choice Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	16322.....	34-1524319	.....	.....	.....	Progressive Direct Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	Gadsden, AL, LLC.....	OH.....	NIA.....	Progressive Direct Insurance Company.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0155.....	The Progressive Insurance Group...	12302.....	20-3187886				Progressive Freedom Insurance Company.....	NJ.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	37605.....	33-0350911				Progressive Marathon Insurance Company.....	MI.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	24279.....	34-0472535				Progressive Max Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	44695.....	86-0686869				Progressive Paloverde Insurance Company.....	IN.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	10192.....	59-3213815				Progressive Select Insurance Company.....	OH.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	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.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	21727.....	36-3789787				Progressive Universal Insurance Company.....	WI.....	IA.....	Progressive Direct Holdings, Inc.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	99-0311966				Garden Sun Insurance Services, ilc.....	HI.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	95-2706008				Pacific Motor Club.....	CA.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	11-3203413				PROGNY Agency, Inc.....	NY.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-1574447				Progressive Adjusting Company, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	13-3673368				Progressive Capital Management Corp.....	NY.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-1378861				Progressive Investment Company, Inc.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-6530101				Progressive Premium Budget, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-1574448				Progressive RSC, Inc.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	20-2702408				Progressive Vehicle Service Company.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	51-0295493				Village Transport Corp.....	DE.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	34-1324270				Wilson Mills Land Co.....	OH.....	NIA.....	The Progressive Corporation.....	Ownership.....	...100.000	The Progressive Corporation.....	1, 3.....
0155.....	The Progressive Insurance Group...	00000.....	80-0832526				Makaira Indica, LP.....	CA.....	NIA.....	Progressive Casualty Insurance Company.....	Other.....	The Progressive Corporation.....	1, 3, 4.....

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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.
4	Makaira Indica, LP is a limited partnership in which Progressive Casualty Insurance Company is the sole limited partner.

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
	34-0963169..	THE PROGRESSIVE CORPORATION.....					465,668,268				465,668,268	
	83-0371533..	DRIVE INSURANCE HOLDINGS, INC.....	428,000,000	(12,500,000)							415,500,000	
24260	34-6513736..	PROGRESSIVE CASUALTY INSURANCE COMPANY.....	(38,500,000)		(130,313,079)		1,509,511,218	152,805,317	*		1,493,503,456	(1,698,511,000)
24252	34-1094197..	PROGRESSIVE AMERICAN INSURANCE COMPANY.....		12,000,000			(4,990,153)		*		7,009,847	
32786	34-1172685..	PROGRESSIVE SPECIALTY INSURANCE COMPANY.....	(200,000,000)		1,017,540		(17,913,724)		*		(216,896,184)	
38784	59-1951700..	PROGRESSIVE SOUTHEASTERN INSURANCE COMPANY.....					(2,622,504)		*		(2,622,504)	
38628	34-1318335..	PROGRESSIVE NORTHERN INSURANCE COMPANY.....	(46,400,000)				(35,097,441)		*		(81,497,441)	
37834	34-1287020..	PROGRESSIVE PREFERRED INSURANCE COMPANY.....	(14,500,000)				(14,739,172)		*		(29,239,172)	
42412	34-1374634..	PROGRESSIVE GULF INSURANCE COMPANY.....	(59,500,000)		(64,112)		(7,553,763)		*		(67,117,875)	
42919	91-1187829..	PROGRESSIVE NORTHWESTERN INSURANCE COMPANY.....	(43,000,000)				(33,640,459)		*		(76,640,459)	
42994	39-1453002..	PROGRESSIVE CLASSIC INSURANCE COMPANY.....	(5,800,000)				(6,515,093)		*		(12,315,093)	
17350	31-1193845..	PROGRESSIVE BAYSIDE INSURANCE COMPANY.....	(4,000,000)				(1,936,559)		*		(5,936,559)	
35190	93-0935623..	PROGRESSIVE MOUNTAIN INSURANCE COMPANY.....			(17,726,240)		(4,214,855)		*		(21,941,095)	
10187	34-1787734..	PROGRESSIVE MICHIGAN INSURANCE COMPANY.....	(12,300,000)				(8,876,181)		*		(21,176,181)	
29203	74-1082840..	PROGRESSIVE COUNTY MUTUAL INSURANCE COMPANY.....					(21,528,065)	(172,991,554)			(194,519,619)	958,418,000
27804	95-2676519..	PROGRESSIVE WEST INSURANCE COMPANY.....		500,000			(59,792,771)	1,647,292			(57,645,479)	172,832,000
10050	72-1269745..	PROGRESSIVE SECURITY INSURANCE COMPANY.....			(29,609,315)		(59,926,780)	8,557,199			(80,978,896)	286,138,000
11410	68-0004572..	DRIVE NEW JERSEY INSURANCE COMPANY.....	(1,800,000)				(38,176,749)	8,542,525			(31,434,224)	276,004,000
10067	99-0311930..	PROGRESSIVE HAWAII INSURANCE CORP.....	(2,200,000)				(23,492,208)				(25,692,208)	
	83-0371538..	PROGRESSIVE DIRECT HOLDINGS, INC.....	240,220,000	(35,014,268)							205,205,732	
16322	34-1524319..	PROGRESSIVE DIRECT INSURANCE COMPANY.....	(185,000,000)	12,014,268			(1,095,799,332)	91,243,875	*		(1,177,541,189)	(1,094,621,000)
24279	34-0472535..	PROGRESSIVE MAX INSURANCE COMPANY.....	(5,500,000)				(7,803,436)	1,439,221	*		(11,864,215)	3,916,000
44695	86-0686869..	PROGRESSIVE PALOVERDE INSURANCE COMPANY.....			(15,314,338)		(784,779)		*		(16,099,117)	
21735	36-3789786..	PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS.....	(2,000,000)		(21,844,025)		(2,758,809)		*		(26,602,834)	
21727	36-3789787..	PROGRESSIVE UNIVERSAL INSURANCE COMPANY.....	(8,000,000)				(6,577,754)		*		(14,577,754)	
37605	33-0350911..	PROGRESSIVE MARATHON INSURANCE COMPANY.....	(11,000,000)		3,999,440		(8,173,328)		*		(15,173,888)	
10192	59-3213815..	PROGRESSIVE SELECT INSURANCE COMPANY.....		19,000,000	13,596,571		(209,131,205)	(48,064,999)			(224,599,633)	666,999,000
44288	62-1444848..	PROGRESSIVE CHOICE INSURANCE COMPANY.....	(18,500,000)		18,419,093		(108,016,338)	(49,513,456)			(157,610,701)	147,324,000
11851	62-0484104..	PROGRESSIVE ADVANCED INSURANCE COMPANY.....		4,000,000			(4,107,657)		*		(107,657)	
12302	20-3187886..	PROGRESSIVE FREEDOM INSURANCE COMPANY.....	(520,000)				(1,838,229)	(805,930)			(3,164,159)	9,083,000
14800	22-2404709..	PROGRESSIVE GARDEN STATE INSURANCE COMPANY.....	(4,800,000)				(73,801,270)	7,140,510			(71,460,760)	271,215,000
44180	23-2599971..	MOUNTAIN LAUREL ASSURANCE COMPANY.....	(4,900,000)		(2,831,675)		(35,589,492)				(43,321,167)	
	20-1583033..	PROGRESSIVE COMMERCIAL HOLDINGS, INC.....	114,000,000	(8,900,000)							105,100,000	
11770	36-3298008..	UNITED FINANCIAL CASUALTY COMPANY.....	(95,000,000)				(142,282,574)	28,058,925			(209,223,649)	(753,760,000)
12879	20-4093467..	PROGRESSIVE COMMERCIAL CASUALTY COMPANY.....					(48,788)	69,466			20,678	
10243	06-0281045..	NATIONAL CONTINENTAL INSURANCE COMPANY.....	(19,000,000)		18,999,787		(34,792,848)				(34,793,061)	1,203,000
10194	59-3213819..	ARTISAN AND TRUCKERS CASUALTY COMPANY.....		7,500,000	4,902,121		(57,337,937)	(1,027,505)			(45,963,321)	362,688,000
10193	59-3213719..	PROGRESSIVE EXPRESS INSURANCE COMPANY.....		1,400,000	2,441,820		(56,616,305)	(27,100,886)			(79,875,371)	391,072,000
	34-1576555..	PC INVESTMENT COMPANY.....					(3,057,680)				(3,057,680)	
	34-1378861..	PROGRESSIVE INVESTMENT COMPANY, INC.....			154,326,412		(17,775,950)				136,550,462	
	13-3673368..	PROGRESSIVE CAPITAL MANAGEMENT CORP.....					7,146,986				7,146,986	

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.....	58-1772717..	PROGRESSIVE AUTO PRO INSURANCE AGENCY, INC.....	.....	.....	.....	.....	5,348,668	.....	.....	.....	5,348,668	.....
.....	11-3203413..	PROGNY AGENCY, INC.....	.....	.....	.....	.....	47,812	.....	.....	.....	47,812	.....
.....	34-1574448..	PROGRESSIVE RSC, INC.....	.....	.....	.....	.....	242,322,743	.....	.....	.....	242,322,743	.....
.....	34-1804869..	PROGRESSIVE SPECIALTY INSURANCE AGENCY, INC.....	.....	.....	.....	.....	(22,929,204)	.....	.....	.....	(22,929,204)	.....
.....	27-2393886..	PROGRESSIVE COMMERCIAL ADVANTAGE AGENCY, INC.....	.....	.....	.....	.....	(1,993)	.....	.....	.....	(1,993)	.....
.....	34-1574447..	PROGRESSIVE ADJUSTING COMPANY, INC.....	.....	.....	.....	.....	(125,529)	.....	.....	.....	(125,529)	.....
.....	51-0295493..	VILLAGE TRANSPORT CORP.....	.....	.....	.....	.....	321,219	.....	.....	.....	321,219	.....
9999999	Control Totals.....	.....	0	0	0	0	0	0	XXX	0	0	0

Pooling Information

Name of Insurer	Pooling %
PROGRESSIVE CASUALTY INSURANCE COMPANY	49.00%
PROGRESSIVE AMERICAN INSURANCE COMPANY	2.00%
PROGRESSIVE SPECIALTY INSURANCE COMPANY	7.00%
PROGRESSIVE SOUTHEASTERN INSURANCE COMPANY	1.00%
PROGRESSIVE NORTHERN INSURANCE COMPANY	12.00%
PROGRESSIVE PREFERRED INSURANCE COMPANY	6.00%
PROGRESSIVE GULF INSURANCE COMPANY	2.00%
PROGRESSIVE NORTHWESTERN INSURANCE COMPANY	12.00%
PROGRESSIVE CLASSIC INSURANCE COMPANY	3.00%
PROGRESSIVE BAYSIDE INSURANCE COMPANY	1.00%
PROGRESSIVE MOUNTAIN INSURANCE COMPANY	1.00%
PROGRESSIVE MICHIGAN INSURANCE COMPANY	4.00%

Name of Insurer	Pooling %
PROGRESSIVE DIRECT INSURANCE COMPANY	77.50%
PROGRESSIVE MAX INSURANCE COMPANY	6.00%
PROGRESSIVE PREMIER INSURANCE COMPANY	2.00%
PROGRESSIVE UNIVERSAL INSURANCE COMPANY	4.00%
PROGRESSIVE MARATHON INSURANCE COMPANY	6.00%
PROGRESSIVE PALOVERDE INSURANCE COMPANY	0.50%
PROGRESSIVE ADVANCED INSURANCE COMPANY	4.00%

Pooling Detailed Explanation

FOR THE ABOVE LISTED COMPANIES, SEE ANNUAL STATEMENT FOOTNOTE 26 FOR FURTHER INFORMATION.

99.1

PROGRESSIVE WEST 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.

MARCH FILING

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

APRIL FILING

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

MAY FILING

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

JUNE FILING

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

AUGUST FILING

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

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

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO

APRIL FILING

28. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO

AUGUST FILING

33. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
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Annual Statement for the year 2012 of the **PROGRESSIVE WEST 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:

- 1.
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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.

28.



29.



30.



31.



32.



33.



PROGRESSIVE WEST INSURANCE COMPANY
Overflow Page for Write-Ins

Additional Write-ins for Statement of Income:

	1 Current Year	2 Prior Year
1404. FINANCE & SERVICE CHARGE REVENUE CEDED.....	(8,934,884)	(8,481,976)
1497. Summary of remaining write-ins for Line 14.....	(8,934,884)	(8,481,976)

Overflow Page for Write-Ins

101L

NONE

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