



# ANNUAL STATEMENT

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

## Stonewood National Insurance Company

NAIC Group Code.....3494, 3494 (Current Period) (Prior Period)	NAIC Company Code..... 31925	Employer's ID Number..... 42-1019055
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... February 6, 1974	Commenced Business..... February 21, 1974	
Statutory Home Office	52 East Gay Street..... Columbus ..... OH ..... US ..... 43215 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	6131 Falls of Neuse Rd., Suite 306..... Raleigh ..... NC ..... US..... 27609 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	919-900-1200 <i>(Area Code) (Telephone Number)</i>
Mail Address	6131 Falls of Neuse Rd., Suite 306..... Raleigh ..... NC ..... US ..... 27609 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	6131 Falls of Neuse Rd., Suite 306..... Raleigh ..... NC ..... US ..... 27609 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	919-900-1200 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	www.stonewoodins.com	
Statutory Statement Contact	Aileen K. Celentano <i>(Name)</i> acelentano@stonewoodins.com <i>(E-Mail Address)</i>	919-882-3536 <i>(Area Code) (Telephone Number) (Extension)</i> 919-900-1201 <i>(Fax Number)</i>

### OFFICERS

Name	Title	Name	Title
1. Steven J. Hartman #	President	2. Thomas R. Fauerbach #	Chief Financial Officer/Secretary
3. Michael E. Crow	Treasurer	4. Gregg T. Davis	Chairman

### OTHER

Thomas R. Fauerbach # Chief Financial Officer

### DIRECTORS OR TRUSTEES

Gregg T. Davis	Steven J. Hartman #	Ann Person	Michael E. Crow
Thomas R. Fauerbach #			

State of..... North Carolina  
County of..... Wake

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) Steven J. Hartman	_____ (Signature) Thomas R. Fauerbach	_____ (Signature) Michael E. Crow
1. (Printed Name) President	2. (Printed Name) Chief Financial Officer/Secretary	3. (Printed Name) Treasurer
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

19.AK

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			1,175
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			1,175
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	2,350

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

19.6AL

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			14,374	(20,791)	45,465	1,251	(14,782)			995
19.3 Commercial auto no-fault (personal injury protection).....	0	0							0			
19.4 Other commercial auto liability.....	0	0							0			
21.1 Private passenger auto physical damage.....	0	0			(937)	(937)			0			995
21.2 Commercial auto physical damage.....	0	0							0			
22. Aircraft (all perils).....	0	0							0			
23. Fidelity.....	0	0							0			
24. Surety.....	0	0							0			
26. Burglary and theft.....	0	0							0			
27. Boiler and machinery.....	0	0							0			
28. Credit.....	0	0							0			
30. Warranty.....	0	0							0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	13,437	(21,728)	45,465	1,251	(14,782)	0	0	1,990

**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....3494 NAIC Company Code....31925

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

19.AR

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			331
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			330
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	661

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

19.AZ

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			218
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			217
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	435

**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....3494 NAIC Company Code....31925

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			
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			(84)	(84)			0			1,389
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	(84)	(84)	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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

19.DC

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			238
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			237
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	475

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			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			
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	0

**NONE**

**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.DE

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



NAIC Group Code....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0				0			0			
2.1 Allied lines.....		0				0			0			
2.2 Multiple peril crop.....		0				0			0			
2.3 Federal flood.....		0				0			0			
3. Farmowners multiple peril.....		0				0			0			
4. Homeowners multiple peril.....		0				0			0			
5.1 Commercial multiple peril (non-liability portion).....		0				0			0			
5.2 Commercial multiple peril (liability portion).....		0				0			0			
6. Mortgage guaranty.....		0				0			0			
8. Ocean marine.....		0				0			0			
9. Inland marine.....		0				0			0			
10. Financial guaranty.....		0				0			0			
11. Medical professional liability.....		0				0			0			
12. Earthquake.....		0				0			0			
13. Group accident and health (b).....		0				0			0			
14. Credit A & H (group and individual).....		0				0			0			
15.1 Collectively renewable A&H (b).....		0				0			0			
15.2 Non-cancelable A & H (b).....		0				0			0			
15.3 Guaranteed renewable A & H (b).....		0				0			0			
15.4 Non-renewable for stated reasons only (b).....		0				0			0			
15.5 Other accident only.....		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0				0			0			
15.7 All other A & H (b).....		0				0			0			
15.8 Federal employees health benefits program premium (b).....		0				0			0			
16. Workers' compensation.....		0				0			0			
17.1 Other liability-occurrence.....		0				0			0			
17.2 Other liability-claims-made.....		0				0			0			
17.3 Excess workers' compensation.....		0				0			0			
18. Products liability.....		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	206,810	206,810			416,067	424,360	8,293	28,369	31,829	3,460	37,935	3,609
19.2 Other private passenger auto liability.....	309,342	309,342			247,624	128,022	44,708	58,209	46,294		57,276	5,699
19.3 Commercial auto no-fault (personal injury protection).....						0			0			
19.4 Other commercial auto liability.....						0			0			
21.1 Private passenger auto physical damage.....	12,107	12,107			4,585	4,585		2,102	2,102		2,305	190
21.2 Commercial auto physical damage.....						0			0			
22. Aircraft (all perils).....						0			0			
23. Fidelity.....						0			0			
24. Surety.....						0			0			
26. Burglary and theft.....						0			0			
27. Boiler and machinery.....						0			0			
28. Credit.....						0			0			
30. Warranty.....						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).....	528,259	528,259	0	0	668,276	556,967	53,001	88,680	80,225	3,460	97,516	9,498

**DETAILS OF WRITE-INS**

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

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

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

19.FL

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



NAIC Group Code....3494 NAIC Company Code....31925

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

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			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			93,143	9,369	30,372	139,888	158,842	75,000		375
19.3 Commercial auto no-fault (personal injury protection).....	0	0							0			
19.4 Other commercial auto liability.....	0	0							0			
21.1 Private passenger auto physical damage.....	0	0			(1,978)	(1,978)			0			375
21.2 Commercial auto physical damage.....	0	0							0			
22. Aircraft (all perils).....	0	0							0			
23. Fidelity.....	0	0							0			
24. Surety.....	0	0							0			
26. Burglary and theft.....	0	0							0			
27. Boiler and machinery.....	0	0							0			
28. Credit.....	0	0							0			
30. Warranty.....	0	0							0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	91,165	7,391	30,372	139,888	158,842	75,000	0	750

**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.GA

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



NAIC Group Code....3494 NAIC Company Code....31925

BUSINESS IN GRAND TOTAL DURING THE YEAR

19.GT

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....		0				0			0			
2.1 Allied lines.....		0				0			0			
2.2 Multiple peril crop.....		0				0			0			
2.3 Federal flood.....		0				0			0			
3. Farmowners multiple peril.....		0				0			0			
4. Homeowners multiple peril.....		0				0			0			
5.1 Commercial multiple peril (non-liability portion).....		0				0			0			
5.2 Commercial multiple peril (liability portion).....		0				0			0			
6. Mortgage guaranty.....		0				0			0			
8. Ocean marine.....		0				0			0			
9. Inland marine.....		0				0			0			
10. Financial guaranty.....		0				0			0			
11. Medical professional liability.....		0				0			0			
12. Earthquake.....		0				0			0			
13. Group accident and health (b).....		0				0			0			
14. Credit A & H (group and individual).....		0				0			0			
15.1 Collectively renewable A&H (b).....		0				0			0			
15.2 Non-cancelable A & H (b).....		0				0			0			
15.3 Guaranteed renewable A & H (b).....		0				0			0			
15.4 Non-renewable for stated reasons only (b).....		0				0			0			
15.5 Other accident only.....		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....		0				0			0			
15.7 All other A & H (b).....		0				0			0			
15.8 Federal employees health benefits program premium (b).....		0				0			0			
16. Workers' compensation.....		0				0			0			
17.1 Other liability-occurrence.....		0				0			0			
17.2 Other liability-claims-made.....		0				0			0			
17.3 Excess workers' compensation.....		0				0			0			
18. Products liability.....		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	206,810	206,810			416,067	434,360	18,293	29,540	34,298	4,758	37,935	3,734
19.2 Other private passenger auto liability.....	309,403	309,403			355,177	109,501	125,725	199,418	190,741	76,181	57,290	22,501
19.3 Commercial auto no-fault (personal injury protection).....						0			0			
19.4 Other commercial auto liability.....						0			0			
21.1 Private passenger auto physical damage.....	12,114	12,114			237	237		2,102	2,102		2,305	18,257
21.2 Commercial auto physical damage.....						0			0			
22. Aircraft (all perils).....						0			0			
23. Fidelity.....						0			0			
24. Surety.....						0			0			
26. Burglary and theft.....						0			0			
27. Boiler and machinery.....						0			0			
28. Credit.....						0			0			
30. Warranty.....						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).....	528,327	528,327	0	0	771,481	544,098	144,018	231,060	227,141	80,939	97,530	44,492

**DETAILS OF WRITE-INS**

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

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

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

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



NAIC Group Code....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF IOWA DURING THE YEAR

191A

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			300
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			300
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	600

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

191D

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			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			500
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	1,000

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

191L

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			348
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			347
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	695

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

19'61

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			734
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			734
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	1,468

**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....3494 NAIC Company Code....31925

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

19.KS

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			85
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			85
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	170

**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....3494 NAIC Company Code....31925

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

19.KY

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			303
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			302
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	605

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

19.LA

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			523
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			523
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	1,046

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

19.MD

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			
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	0

NONE

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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

19.MN

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			481
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			481
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	962

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

19.MO

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.....61	61	61			36	36		6	6		14	1
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.....7	7	7			1	1			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	0
35. TOTALS (a).....68	68	68	0	0	37	37	0	6	6	0	14	1

**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	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....0	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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

19.MS

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			
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	0

NONE

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

19.MT

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			950
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			950
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	1,900

**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.

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



NAIC Group Code....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

19.NC

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			1,375
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			1,375
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	2,750

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

19.ND

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			205
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			206
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	411

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

19.NE

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			300
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			300
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	600

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

19.NJ

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			300
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			300
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	600

**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....3494 NAIC Company Code....31925

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			531
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			532
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	1,063

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

19.NV

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			2,089
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			2,089
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	4,178

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

19.NY

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				10,000	10,000	1,171	2,469	1,298		125
19.2 Other private passenger auto liability.....	0	0				(7,135)	5,180	64	381	1,181		125
19.3 Commercial auto no-fault (personal injury protection).....	0	0				0	0	0	0	0		0
19.4 Other commercial auto liability.....	0	0				0	0	0	0	0		0
21.1 Private passenger auto physical damage.....	0	0				0	0	0	0	0		0
21.2 Commercial auto physical damage.....	0	0				0	0	0	0	0		0
22. Aircraft (all perils).....	0	0				0	0	0	0	0		0
23. Fidelity.....	0	0				0	0	0	0	0		0
24. Surety.....	0	0				0	0	0	0	0		0
26. Burglary and theft.....	0	0				0	0	0	0	0		0
27. Boiler and machinery.....	0	0				0	0	0	0	0		0
28. Credit.....	0	0				0	0	0	0	0		0
30. Warranty.....	0	0				0	0	0	0	0		0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	2,865	15,180	1,235	2,850	2,479	0	250

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

19.OH

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			87
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			88
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	175

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

19.0K

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			325
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			325
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	650

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF OREGON DURING THE YEAR

19. OR

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			750
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			750
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	1,500

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

19.PA

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			
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	0

NONE

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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

19.RI

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			312
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			313
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	625

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF SOUTH CAROLINA 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			
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			(1,350)	(1,350)			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	(1,350)	(1,350)	0	0	0	0	0	0

**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.SC

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



NAIC Group Code....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

19.SD

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			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			850
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	1,700

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			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			332
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			333
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	665

**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.TN

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



NAIC Group Code....3494 NAIC Company Code....31925

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			350
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			350
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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF UTAH DURING THE YEAR

19.UT

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			312
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			313
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	625

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

19.VA

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			250
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			250
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	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....3494 NAIC Company Code....31925

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				0			0			
19.2 Other private passenger auto liability.....	0	0				0			0			300
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			300
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	600

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

19.WI

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			300
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			300
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	600

**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....3494 NAIC Company Code....31925

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

19.WV

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			
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	0

NONE

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....3494 NAIC Company Code....31925

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			152
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			153
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	305

**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			
<b>Authorized Other U.S. Unaffiliated Insurers</b>																			
31-0943862	22268....	Infinity Insurance Company.....	IN.....		.....528	.....	.....	.....19	.....84	.....125	.....	.....	.....	.....	.....228	.....	.....	.....228	.....
0599999	Total Authorized Other U.S. Unaffiliated Insurers.....				.....528	.....0	.....0	.....19	.....84	.....125	.....0	.....0	.....0	.....0	.....228	.....0	.....0	.....228	.....0
0999999	Total Authorized.....				.....528	.....0	.....0	.....19	.....84	.....125	.....0	.....0	.....0	.....0	.....228	.....0	.....0	.....228	.....0
2899999	Total Authorized, Unauthorized and Certified.....				.....528	.....0	.....0	.....19	.....84	.....125	.....0	.....0	.....0	.....0	.....228	.....0	.....0	.....228	.....0
9999999	Totals.....				.....528	.....0	.....0	.....19	.....84	.....125	.....0	.....0	.....0	.....0	.....228	.....0	.....0	.....228	.....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) Infinity Insurance Company.....	.....228	.....528	Yes <input type="checkbox"/>	No <input checked="" 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"/>

**Sch. F-Pt. 4**  
**NONE**

**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)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	42,392,478		42,392,478
2. Premiums and considerations (Line 15).....			0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	156,005		156,005
6. Net amount recoverable from reinsurers.....		228,107	228,107
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	42,548,483	228,107	42,776,590
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....		228,107	228,107
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	93,158		93,158
11. Unearned premiums (Line 9).....			0
12. Advance premiums (Line 10).....			0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	378,379		378,379
19. Total liabilities excluding protected cell business (Line 26).....	471,537	228,107	699,644
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	42,076,946	.XXX	42,076,946
22. Totals (Line 38).....	42,548,483	228,107	42,776,590

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:

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**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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				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		0					0	0
3. 2004.....			0	0		0					0	0
4. 2005.....	6	5	1	2	2	0				0	0	0
5. 2006.....	1	1	0								0	0
6. 2007.....			0								0	0
7. 2008.....			0								0	0
8. 2009.....			0								0	0
9. 2010.....			0								0	0
10. 2011.....			0								0	0
11. 2012.....			0								0	0
12. Totals.....	XXX	XXX	XXX	2	2	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	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.....	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.....	2	2	0	37.3	44.2	3.1				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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	448	448	59	59				0	XXX
2. 2003.....	96		96	49	184	(7)	15	(33)		6	(189)	226
3. 2004.....	3,276	13	3,263	1,727	48	159	5	465		8	2,298	648
4. 2005.....	583	6	577	309	7	15	1	78		3	393	151
5. 2006.....	577	4	573	317	13	141	125	85		3	405	151
6. 2007.....	636	2	634	397	28	21	2	76		4	464	179
7. 2008.....	555	2	553	332	5	20	0	71		4	417	154
8. 2009.....	511	1	509	345	30	42	21	65		3	401	147
9. 2010.....	562	1	561	403	26	27	2	66		4	468	166
10. 2011.....	638	1	637	402		24		65		3	491	148
11. 2012.....	516	516	0								0	
12. Totals.....	XXX	XXX	XXX	4,730	789	500	231	938	0	40	5,149	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.....	4	4			25	25						0	3
2. 2003.....												0	
3. 2004.....												0	
4. 2005.....												0	
5. 2006.....												0	
6. 2007.....			43	43			2	2	1	1		0	
7. 2008.....	10	10	28	28	1	1	1	1	1	1		0	1
8. 2009.....			33	33	50	50	1	1	1	1		0	
9. 2010.....	8	8	18	18			1	1				0	1
10. 2011.....												0	
11. 2012.....												0	
12. Totals.....	22	22	122	122	76	76	5	5	3	3	0	0	5

	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.....	10	199	(189)	10.0	0.0	(197.3)				0	0
3. 2004.....	2,351	53	2,298	71.8	409.6	70.4				0	0
4. 2005.....	402	8	393	68.9	137.9	68.2				0	0
5. 2006.....	543	138	405	94.1	3,445.6	70.7				0	0
6. 2007.....	540	76	464	84.9	3,794.9	73.2				0	0
7. 2008.....	463	46	417	83.5	2,305.1	75.4				0	0
8. 2009.....	537	136	401	105.2	12,534.9	78.8				0	0
9. 2010.....	523	55	468	93.0	5,027.4	83.4				0	0
10. 2011.....	491	0	491	77.0	0.0	77.2				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 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				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	1	2	0	0	0	0	0	0	(1)
3. 2004.....			0	2		(1)	0	(2)	0	0	0	(0)
4. 2005.....	35	3	32	17	1	0	0	2	2	0	0	18
5. 2006.....	34	3	31	19	1	0	0	2	2	0	0	21
6. 2007.....	31	2	29	18	2	1	0	3	3	0	0	19
7. 2008.....	31	2	29	16	2	1	0	2	2	0	0	18
8. 2009.....	38	3	35	26	2	2	0	3	3	0	0	29
9. 2010.....	45	3	42	30	1	3	0	4	4	0	0	36
10. 2011.....	50	4	46	31		2		5	5			38
11. 2012.....			0									0
12. Totals.....	XXX	XXX	XXX	160	10	9	0	20	0	0	0	178

	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	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.....	1	2	(1)	0.0	0.0	0.0				0	0
3. 2004.....	(0)	0	(0)	0.0	0.0	0.0				0	0
4. 2005.....	19	1	18	55.0	48.2	55.6				0	0
5. 2006.....	22	1	21	65.2	43.2	67.3				0	0
6. 2007.....	21	2	19	68.8	108.1	66.1				0	0
7. 2008.....	19	2	18	62.6	81.3	61.3				0	0
8. 2009.....	31	2	29	81.2	58.5	83.0				0	0
9. 2010.....	37	1	36	81.9	22.4	86.5				0	0
10. 2011.....	38	0	38	76.0	0.0	82.7				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

**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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				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	(1)							0	(1)
3. 2004.....			0	0							0	0
4. 2005.....			0	1		0					0	1
5. 2006.....			0	0							0	0
6. 2007.....			0								0	0
7. 2008.....			0								0	0
8. 2009.....			0								0	0
9. 2010.....			0								0	0
10. 2011.....			0								0	0
11. 2012.....			0								0	0
12. Totals.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
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	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.....	(1)	0	(1)	0.0	0.0	0.0				0	0
3. 2004.....	0	0	0	0.0	0.0	0.0				0	0
4. 2005.....	1	0	1	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 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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				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	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.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
3. 2012.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21  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. 2011...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....	
3. 2012...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....	
4. Totals..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34  Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26  Direct and Assumed	27  Ceded	28  Net	29  Direct and Assumed	30  Ceded	31  Net	32  Loss	33  Loss Expense		35  Losses Unpaid	36  Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0	.....0
2. 2011	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
3. 2012	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

## SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....			.....2.....	.....2.....				.....0.....	.....XXX.....
2. 2011.....	.....337.....	.....1.....	.....336.....	.....192.....		.....5.....		.....37.....		.....29.....	.....234.....	.....130.....
3. 2012.....	.....12.....	.....12.....	.....0.....								.....0.....	
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....192.....	.....0.....	.....7.....	.....2.....	.....37.....	.....0.....	.....29.....	.....234.....	.....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. 2011.....												.....0.....	
3. 2012.....												.....0.....	
4. Totals....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34  Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26  Direct and Assumed	27  Ceded	28  Net	29  Direct and Assumed	30  Ceded	31  Net	32  Loss	33  Loss Expense		35  Losses Unpaid	36  Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....			.....XXX.....	.....0.....	.....0.....
2. 2011	.....234.....	.....0.....	.....234.....	.....69.4.....	.....0.0.....	.....69.6.....				.....0.....	.....0.....
3. 2012	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....				.....0.....	.....0.....
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

**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.....			1				1	1	1	1	0	0
2. 2003.....							0	0	0	0	0	0
3. 2004.....	XXX						0	0	0	0	0	0
4. 2005.....	XXX	XXX	3	1	1		0	0	0	0	(0)	0
5. 2006.....	XXX	XXX	XXX				0				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
12. Totals											(0)	1

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

1. Prior.....	66	86	92	91	99	104	99	98	99	99	0	1
2. 2003.....	57	(137)	(145)	(146)	(147)	(153)	(155)	(156)	(156)	(156)	0	(0)
3. 2004.....	XXX	1,863	1,860	1,853	1,850	1,842	1,836	1,833	1,832	1,832	0	(1)
4. 2005.....	XXX	XXX	361	350	342	330	322	318	315	315	0	(2)
5. 2006.....	XXX	XXX	XXX	360	354	338	327	323	320	320	0	(3)
6. 2007.....	XXX	XXX	XXX	XXX	412	416	403	392	388	388	0	(4)
7. 2008.....	XXX	XXX	XXX	XXX	XXX	371	367	350	346	346	0	(4)
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	358	337	336	336	0	(1)
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	387	402	402	0	15
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	427	427	0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	0

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

1. Prior.....				1		10	10	10	10	10	0	(0)
2. 2003.....			1	2		(1)	(1)	(1)	(1)	(1)	0	(0)
3. 2004.....	XXX		2	2	2	3	2	2	2	2	0	(0)
4. 2005.....	XXX	XXX	19	23	19	16	16	16	15	15	0	(0)
5. 2006.....	XXX	XXX	XXX	25	24	23	20	19	18	18	0	(0)
6. 2007.....	XXX	XXX	XXX	XXX	22	19	18	17	17	17	0	(1)
7. 2008.....	XXX	XXX	XXX	XXX	XXX	20	18	15	15	15	0	(0)
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	30	27	26	26	0	(1)
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	33	33	0	(2)
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals											0	(4)

**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
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
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
<b>12. Totals</b>											.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
<b>12. Totals</b>											.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
<b>12. Totals</b>											.0	0

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

1. Prior.....								.0	.0	.0	.0	.0	0
2. 2003.....				(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	.0	(0)
3. 2004.....	XXX			1	1	1		0	0	0	0	.0	0
4. 2005.....	XXX	XXX			1	1		1	1	1	1	.0	0
5. 2006.....	XXX	XXX	XXX					0	0	0	0	.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
<b>12. Totals</b>											.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
<b>12. Totals</b>											.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	XXX
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals											0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	12	12	0	(0)
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197	197	0	XXX
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals											0	(0)

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

1. Prior.....	XXX	XXX	XXX	XXX	<b>NONE</b>							0	0
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	XXX	
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
4. Totals											0	0	

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

1. Prior.....	XXX	XXX	XXX	XXX	<b>NONE</b>							0	0
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	XXX	
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
4. Totals											0	0	

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

1. Prior.....											0	0	
2. 2003.....											0	0	
3. 2004.....	XXX										0	0	
4. 2005.....	XXX	XXX									0	0	
5. 2006.....	XXX	XXX	XXX		<b>NONE</b>							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	
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						.0	.1	.1	.1	.0	.0
2. 2003.....							.0	.0	.0	.0	.0	.0
3. 2004.....	XXX						.0	.0	.0	.0	.0	.0
4. 2005.....	XXX	XXX					.0	.0	.0	.0	.0	.0
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	(573)	.7	.50	.65	.89	.91	.93	.99	.99	.71	.20
2. 2003.....	25	(742)	(201)	(173)	(163)	(159)	(157)	(157)	(156)	(156)	155	.71
3. 2004.....	XXX	627	1,762	1,804	1,823	1,829	1,830	1,832	1,832	1,832	293	355
4. 2005.....	XXX	XXX	137	255	295	308	313	314	315	315	80	.70
5. 2006.....	XXX	XXX	XXX	146	261	300	311	315	320	320	81	.69
6. 2007.....	XXX	XXX	XXX	XXX	178	326	362	375	388	388	96	.82
7. 2008.....	XXX	XXX	XXX	XXX	XXX	165	285	319	346	346	82	.71
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	154	271	336	336	83	.64
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182	402	402	88	.77
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	427	427	70	.78
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior.....	.000		(4)			.10	.10	.10	.10	.10		
2. 2003.....			(5)	(2)	(1)	(1)	(1)	(1)	(1)	(1)		
3. 2004.....	XXX		(6)	(3)		.1	.1	.1	.2	.2	.1	
4. 2005.....	XXX	XXX	.5	.11	.13	.14	.15	.15	.15	.15	.3	.1
5. 2006.....	XXX	XXX	XXX	.7	.13	.16	.17	.18	.18	.18	.3	.1
6. 2007.....	XXX	XXX	XXX	XXX	.6	.11	.13	.15	.17	.17	.3	.1
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.6	.11	.13	.15	.15	.3	.1
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.9	.17	.26	.26	.3	.2
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.10	.33	.33	.4	.2
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.33	.33	.4	.3
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior.....	.000										.0	.0
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			

**NONE**

**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				

**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				

**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

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

1. Prior.....	.000		(1)				(0)	0	0	0		
2. 2003.....			(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)		
3. 2004.....	XXX								0	0		
4. 2005.....	XXX	XXX			1	1	1	1	1	1		
5. 2006.....	XXX	XXX	XXX				0	0	0	0		
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		

**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		

**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	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	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	12	12	68	43
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197	197	80	50
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**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

**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

**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

**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.....							0			
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX	3	1			0			
5. 2006.....	XXX	XXX	XXX				0			
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

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

1. Prior.....	15	137	27	10	4	4	1	1		
2. 2003.....	11	224	20	9	7	3	1	1		
3. 2004.....	XXX	377	39	14	14	8	3	1		
4. 2005.....	XXX	XXX	90	36	23	14	6	2		
5. 2006.....	XXX	XXX	XXX	89	42	20	9	4		
6. 2007.....	XXX	XXX	XXX	XXX	101	45	23	9		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	94	44	14		
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	98	27		
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85		
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 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior.....			2				0	0		
2. 2003.....			2	3	1		0	0		
3. 2004.....	XXX		3	1	1	1	0	0		
4. 2005.....	XXX	XXX	9	6	3	1	0	0		
5. 2006.....	XXX	XXX	XXX	12	6	4	2	0		
6. 2007.....	XXX	XXX	XXX	XXX	11	4	2	1		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	9	4	1		
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	13	4		
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15		
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 4D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX	<b>NONE</b>						
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

**SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX	<b>NONE</b>						
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

**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	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	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	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	XXX

**NONE**

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

1. Prior.....							0	0		
2. 2003.....							0	0		
3. 2004.....	XXX		1	1	1		0	0		
4. 2005.....	XXX	XXX					0			
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

**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	XXX

**NONE**

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

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 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		
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.23		
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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**

**SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....							0	0		
2. 2003.....							0	0	0	0
3. 2004.....	XXX							0	0	0
4. 2005.....	XXX	XXX						0	0	0
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 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.....							0	0		
2. 2003.....							0	0		
3. 2004.....	XXX						0	0		
4. 2005.....	XXX	XXX					0	0		
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 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.....							0		(0)	
2. 2003.....							0	0	0	0
3. 2004.....	XXX						0	0	0	0
4. 2005.....	XXX	XXX					0	0	0	0
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 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.....	10	75	6	2			0	0		1
2. 2003.....	10	146	152	154	154	154	154	154	154	155
3. 2004.....	XXX	263	286	291	293	293	293	293	293	293
4. 2005.....	XXX	XXX	50	74	79	80	80	80	80	80
5. 2006.....	XXX	XXX	XXX	50	74	78	79	79	79	81
6. 2007.....	XXX	XXX	XXX	XXX	61	89	93	94	95	96
7. 2008.....	XXX	XXX	XXX	XXX	XXX	55	78	81	82	82
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	54	76	81	83
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	88	88
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	70
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	5	49	3				0	0		3
2. 2003.....	5	47	2	1			0	0		
3. 2004.....	XXX	166	5	2	1		0	0		
4. 2005.....	XXX	XXX	17	5	2		0	0		
5. 2006.....	XXX	XXX	XXX	27	5	1	0	0		
6. 2007.....	XXX	XXX	XXX	XXX	28	5	2	1		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	24	4	1		1
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	22	4		
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26		1
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	3	131	(40)	(1)			0	0	(0)	
2. 2003.....	22	263	225	226	225	225	225	225	225	226
3. 2004.....	XXX	773	646	648	649	648	648	648	648	648
4. 2005.....	XXX	XXX	127	149	151	150	151	151	151	151
5. 2006.....	XXX	XXX	XXX	136	148	148	149	149	149	151
6. 2007.....	XXX	XXX	XXX	XXX	160	173	174	174	175	179
7. 2008.....	XXX	XXX	XXX	XXX	XXX	140	150	151	151	154
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	135	145	145	147
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	156	164	166
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	148	148
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

### SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....							0	(0)	0	
2. 2003.....							0	(0)		
3. 2004.....	XXX		.1	.1	.1	.1	.1	.1	.1	.1
4. 2005.....	XXX	XXX	.2	.3	.3	.3	.3	.3	.3	.3
5. 2006.....	XXX	XXX	XXX	.2	.3	.3	.3	.3	.3	.3
6. 2007.....	XXX	XXX	XXX	XXX	.2	.3	.3	.3	.3	.3
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.2	.3	.3	.3	.3
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.2	.3	.3	.3
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.3	.4	.4
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	.4
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

### SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 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	.1				0			
5. 2006.....	XXX	XXX	XXX	.1			0			
6. 2007.....	XXX	XXX	XXX	XXX	.1		0			
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.1	0			
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.1			
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1		
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

### SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....							0	(0)	0	
2. 2003.....							0	(0)		
3. 2004.....	XXX		.1	.1	.1	.1	.1	.1	.1	.1
4. 2005.....	XXX	XXX	.4	.4	.4	.4	.4	.4	.4	.4
5. 2006.....	XXX	XXX	XXX	.4	.4	.4	.4	.4	.4	.4
6. 2007.....	XXX	XXX	XXX	XXX	.4	.4	.4	.4	.4	.4
7. 2008.....	XXX	XXX	XXX	XXX	XXX	.4	.4	.4	.4	.4
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	.5	.6	.6	.6
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.6	.6	.6
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.7	.7
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 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	35	35	35	35	35	35	35	35	35
5. 2006.....	.XXX	.XXX	.XXX	34	34	34	34	34	34	34	34
6. 2007.....	.XXX	.XXX	.XXX	.XXX	31	31	31	31	31	31	31
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX	31	31	31	31	31	31
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	38	38	38	38	38
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	45	45	45	45
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	50	50	50
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0	0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....			35	34	31	31	38	45	50		.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	3	3	3	3	3	3	3	3	3
5. 2006.....	.XXX	.XXX	.XXX	3	3	3	3	3	3	3	3
6. 2007.....	.XXX	.XXX	.XXX	.XXX	2	2	2	2	2	2	2
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX	2	2	2	2	2	2
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	3	3	3	3	3
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	0	0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....			3	3	2	2	3	3	4		.XXX

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

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Sch. P-Pt. 7A-Sn. 1  
NONE**

**Sch. P-Pt. 7A-Sn. 2  
NONE**

**Sch. P-Pt. 7A-Sn. 3  
NONE**

**Sch. P-Pt. 7A-Sn. 4**  
**NONE**

**Sch. P-Pt. 7A-Sn. 5**  
**NONE**

**Sch. P-Pt. 7B-Sn. 1**  
**NONE**

**Sch. P-Pt. 7B-Sn. 2**  
**NONE**

**Sch. P-Pt. 7B-Sn. 3**  
**NONE**

**Sch. P-Pt. 7B-Sn. 4**  
**NONE**

**Sch. P-Pt. 7B-Sn. 5**  
**NONE**

**Sch. P-Pt. 7B-Sn. 6**  
**NONE**

**Sch. P-Pt. 7B-Sn. 7**  
**NONE**

**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 [ ]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [ ] No [ ]
- 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 [ ]
- 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 [X] No [ ]
- 7.2 An extended statement may be attached.

Effective, December 31, 2011, the Company is a party to a reinsurance agreement with Infinity Insurance Company (NAIC #22268) whereby the Company cedes 100% of its liability with respect to all insurance business written or assumed by the Company through December 31, 2011.

**SCHEDULE T - PART 2**

**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					6 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 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
<b>Members</b>														
		00000.....					Franklin Holdings, Ltd.....	BMU.....	UIP.....					
		00000.....					Franklin Holdings II, Ltd.....	BMU.....	UIP.....	Franklin Holdings, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	05-0539572				James River Group, Inc.....	DE.....	UDP.....	Franklin Holdings II, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	AA-3190958				JRG Reinsurance Company, Ltd.....	BMU.....	IA.....	Franklin Holdings II, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	35-2242298				Potomac Risk Services, Inc.....	VA.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	12203.....	22-2824607				James River Insurance Company.....	OH.....	IA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	03-0490731				James River Management Company.....	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	13685.....	20-8946040				James River Casualty Company.....	VA.....	IA.....	James River Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	31925.....	42-1019055				Stonewood National Insurance Company.....	OH.....		James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	20-0067235				Stonewood Insurance Management Co.....	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	11828.....	20-0328998				Stonewood Insurance Company.....	NC.....	DS.....	Stonewood National Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	35211.....	31-1277903				Stonewood General Insurance Company.....	OH.....	DS.....	Stonewood National Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	

## 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)
<b>Affiliated Transactions</b>												
00000.....	05-0539572.....	James River Group, Inc.....	29,000,000	(36,355,542)			7,917,701			12,503,819	13,065,978	
12203.....	22-2824607.....	James River Insurance Company.....	(29,000,000)			(31,052,875)	(7,826,608)			(12,503,819)	(80,383,302)	226,353,918
00000.....	03-0490731.....	James River Management Company, Inc.....				23,273,227					23,273,227	
13685.....	20-8946040.....	James River Casualty Company.....				(405,134)	479,779				74,645	2,027,761
11828.....	20-0328998.....	Stonewood Insurance Company.....				(6,730,929)	9,025,380				2,294,451	47,131,900
00000.....	20-0067235.....	Stonewood Insurance Management Company, Inc.....				6,730,929					6,730,929	
31925.....	42-1019055.....	Stonewood National Insurance Company.....		36,355,542		250,117					36,605,659	
35211.....	31-1277903.....	Stonewood General Insurance Company.....				16,964					16,964	
00000.....	AA-3190958.....	JRG Reinsurance Company, Ltd.....					(1,678,551)				(1,678,551)	(275,513,579)
9999999.....	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

# Stonewood National 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

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

### Responses

WAIVED

YES

YES

YES

### APRIL FILING

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

YES

YES

YES

### MAY FILING

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

YES

### JUNE FILING

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

SEE EXPLANATION

SEE EXPLANATION

### AUGUST FILING

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

SEE EXPLANATION

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

### MARCH FILING

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

SEE EXPLANATION

NO

NO

NO

NO

NO

SEE EXPLANATION

NO

WAIVED

YES

NO

NO

NO

SEE EXPLANATION

SEE EXPLANATION

SEE EXPLANATION

SEE EXPLANATION

### APRIL FILING

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

NO

NO

NO

NO

NO

### AUGUST FILING

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

SEE EXPLANATION

# 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:**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
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- 18.
- 19.
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- 21.
- 22.
- 23.
- 24.
- 25.
- 26.
- 27.

**BAR CODE:**



# 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. Company does not meet the minimum premium requirements for filing.



**Overflow Page  
NONE**

**Overflow Page  
NONE**

## 2012 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	59
Cash Flow	5	Schedule P-Part 2H-Section 1-Other Liability-Occurrence	59
Exhibit of Capital Gains (Losses)	12	Schedule P-Part 2H-Section 2-Other Liability-Claims-Made	59
Exhibit of Net Investment Income	12	Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	60
Exhibit of Nonadmitted Assets	13	Schedule P-Part 2J-Auto Physical Damage	60
Exhibit of Premiums and Losses (State Page)	19	Schedule P-Part 2K-Fidelity, Surety	60
Five-Year Historical Data	17	Schedule P-Part 2L-Other (Including Credit, Accident and Health)	60
General Interrogatories	15	Schedule P-Part 2M-International	60
Jurat Page	1	Schedule P-Part 2N-Reinsurance - Nonproportional Assumed Property	61
Liabilities, Surplus and Other Funds	3	Schedule P-Part 2O-Reinsurance - Nonproportional Assumed Liability	61
Notes To Financial Statements	14	Schedule P-Part 2P-Reinsurance - Nonproportional Assumed Financial Lines	61
Overflow Page For Write-ins	101	Schedule P-Part 2R-Section 1-Products Liability-Occurrence	62
Schedule A-Part 1	E01	Schedule P-Part 2R-Section 2-Products Liability-Claims-Made	62
Schedule A-Part 2	E02	Schedule P-Part 2S-Financial Guaranty/Mortgage Guaranty	62
Schedule A-Part 3	E03	Schedule P-Part 2T-Warranty	62
Schedule A-Verification Between Years	SI02	Schedule P-Part 3A-Homeowners/Farmowners	63
Schedule B-Part 1	E04	Schedule P-Part 3B-Private Passenger Auto Liability/Medical	63
Schedule B-Part 2	E05	Schedule P-Part 3C-Commercial Auto/Truck Liability/Medical	63
Schedule B-Part 3	E06	Schedule P-Part 3D-Workers' Compensation (Excluding Excess Workers Compensation)	63
Schedule B-Verification Between Years	SI02	Schedule P-Part 3E-Commercial Multiple Peril	63
Schedule BA-Part 1	E07	Schedule P-Part 3F-Section 1-Medical Professional Liability-Occurrence	64
Schedule BA-Part 2	E08	Schedule P-Part 3F-Section 2-Medical Professional Liability-Claims-Made	64
Schedule BA-Part 3	E09	Schedule P-Part 3G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	64
Schedule BA-Verification Between Years	SI03	Schedule P-Part 3H-Section 1-Other Liability-Occurrence	64
Schedule D-Part 1	E10	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	64
Schedule D-Part 1A-Section 1	SI05	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	65
Schedule D-Part 1A-Section 2	SI08	Schedule P-Part 3J-Auto Physical Damage	65
Schedule D-Part 2-Section 1	E11	Schedule P-Part 3K-Fidelity/Surety	65
Schedule D-Part 2-Section 2	E12	Schedule P-Part 3L-Other (Including Credit, Accident and Health)	65
Schedule D-Part 3	E13	Schedule P-Part 3M-International	65
Schedule D-Part 4	E14	Schedule P-Part 3N-Reinsurance - Nonproportional Assumed Property	66
Schedule D-Part 5	E15	Schedule P-Part 3O-Reinsurance - Nonproportional Assumed Liability	66
Schedule D-Part 6-Section 1	E16	Schedule P-Part 3P-Reinsurance - Nonproportional Assumed Financial Lines	66
Schedule D-Part 6-Section 2	E16	Schedule P-Part 3R-Section 1-Products Liability-Occurrence	67
Schedule D-Summary By Country	SI04	Schedule P-Part 3R-Section 2-Products Liability-Claims-Made	67
Schedule D-Verification Between Years	SI03	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	67
Schedule DA-Part 1	E17	Schedule P-Part 3T-Warranty	67
Schedule DA-Verification Between Years	SI10	Schedule P-Part 4A-Homeowners/Farmowners	68
Schedule DB-Part A-Section 1	E18	Schedule P-Part 4B-Private Passenger Auto Liability/Medical	68
Schedule DB-Part A-Section 2	E19	Schedule P-Part 4C-Commercial Auto/Truck Liability/Medical	68
Schedule DB-Part A-Verification Between Years	SI11	Schedule P-Part 4D-Workers' Compensation (Excluding Excess Workers Compensation)	68
Schedule DB-Part B-Section 1	E20	Schedule P-Part 4E-Commercial Multiple Peril	68
Schedule DB-Part B-Section 2	E21	Schedule P-Part 4F-Section 1-Medical Professional Liability-Occurrence	69
Schedule DB-Part B-Verification Between Years	SI11	Schedule P-Part 4F-Section 2-Medical Professional Liability-Claims-Made	69
Schedule DB-Part C-Section 1	SI12	Schedule P-Part 4G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	69
Schedule DB-Part C-Section 2	SI13	Schedule P-Part 4H-Section 1-Other Liability-Occurrence	69
Schedule DB-Part D	E22	Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	69
Schedule DB-Verification	SI14	Schedule P-Part 4I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	70
Schedule DL-Part 1	E23	Schedule P-Part 4J-Auto Physical Damage	70
Schedule DL-Part 2	E24	Schedule P-Part 4K-Fidelity/Surety	70
Schedule E-Part 1-Cash	E25	Schedule P-Part 4L-Other (Including Credit, Accident and Health)	70
Schedule E-Part 2-Cash Equivalents	E26	Schedule P-Part 4M-International	70
Schedule E-Part 3-Special Deposits	E27	Schedule P-Part 4N-Reinsurance - Nonproportional Assumed Property	71
Schedule E-Verification Between Years	SI15	Schedule P-Part 4O-Reinsurance - Nonproportional Assumed Liability	71
Schedule F-Part 1	20	Schedule P-Part 4P-Reinsurance - Nonproportional Assumed Financial Lines	71
Schedule F-Part 2	21	Schedule P-Part 4R-Section 1-Products Liability-Occurrence	72
Schedule F-Part 3	22	Schedule P-Part 4R-Section 2-Products Liability-Claims-Made	72
Schedule F-Part 4	23	Schedule P-Part 4S-Financial Guaranty/Mortgage Guaranty	72
Schedule F-Part 5	24	Schedule P-Part 4T-Warranty	72
Schedule F-Part 6-Section 1	25	Schedule P-Part 5A-Homeowners/Farmowners	73
Schedule F-Part 6-Section 2	27	Schedule P-Part 5B-Private Passenger Auto Liability/Medical	74
Schedule F-Part 7	28	Schedule P-Part 5C-Commercial Auto/Truck Liability/Medical	75
Schedule F-Part 8	29	Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers Compensation)	76
Schedule F-Part 9	30	Schedule P-Part 5E-Commercial Multiple Peril	77
Schedule H-Accident and Health Exhibit-Part 1	31	Schedule P-Part 5F-Medical Professional Liability-Claims-Made	79
Schedule H-Part 2, Part 3 and Part 4	32	Schedule P-Part 5F-Medical Professional Liability-Occurrence	78
Schedule H-Part 5-Health Claims	33	Schedule P-Part 5H-Other Liability-Claims-Made	81
Schedule P-Part 1-Summary	34	Schedule P-Part 5H-Other Liability-Occurrence	80
Schedule P-Part 1A-Homeowners/Farmowners	36	Schedule P-Part 5R-Products Liability-Claims-Made	83
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	37	Schedule P-Part 5R-Products Liability-Occurrence	82
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical	38	Schedule P-Part 5T-Warranty	84
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation)	39	Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical	85
Schedule P-Part 1E-Commercial Multiple Peril	40	Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation)	85
Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	41	Schedule P-Part 6E-Commercial Multiple Peril	86
Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	42	Schedule P-Part 6H-Other Liability-Claims-Made	87
Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)	43	Schedule P-Part 6H-Other Liability-Occurrence	86
Schedule P-Part 1H-Section 1-Other Liability-Occurrence	44	Schedule P-Part 6M-International	87
Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	45	Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property	88
Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	46	Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability	88
Schedule P-Part 1J-Auto Physical Damage	47	Schedule P-Part 6R-Products Liability-Claims-Made	89
Schedule P-Part 1K-Fidelity/Surety	48	Schedule P-Part 6R-Products Liability-Occurrence	89
Schedule P-Part 1L-Other (Including Credit, Accident and Health)	49	Schedule P-Part 7A-Primary Loss Sensitive Contracts	90
Schedule P-Part 1M-International	50	Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	92
Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property	51	Schedule P Interrogatories	94
Schedule P-Part 1O-Reinsurance - Nonproportional Assumed Liability	52	Schedule T-Exhibit of Premiums Written	95
Schedule P-Part 1P-Reinsurance - Nonproportional Assumed Financial Lines	53	Schedule T-Part 2-Interstate Compact	96
Schedule P-Part 1R-Section 1-Products Liability-Occurrence	54	Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	97
Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	55	Schedule Y-Detail of Insurance Holding Company System	98
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	56	Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	99
Schedule P-Part 1T-Warranty	57	Statement of Income	4
Schedule P-Part 2, Part 3 and Part 4 - Summary	35	Summary Investment Schedule	SI01
Schedule P-Part 2A-Homeowners/Farmowners	58	Supplemental Exhibits and Schedules Interrogatories	100
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	58	Underwriting and Investment Exhibit Part 1	6
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	58	Underwriting and Investment Exhibit Part 1A	7
Schedule P-Part 2D-Workers' Compensation (Excluding Excess Workers Compensation)	58	Underwriting and Investment Exhibit Part 1B	8
Schedule P-Part 2E-Commercial Multiple Peril	58	Underwriting and Investment Exhibit Part 2	9
Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	59	Underwriting and Investment Exhibit Part 2A	10
Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	59	Underwriting and Investment Exhibit Part 3	11