



**ANNUAL STATEMENT**  
 FOR THE YEAR ENDED DECEMBER 31, 2012  
 OF THE CONDITION AND AFFAIRS OF THE  
**REAL ADVANTAGE TITLE INSURANCE COMPANY**

NAIC Group Code 0000, 0000 NAIC Company Code 50440 Employer's ID Number 31-1132482  
(Current Period) (Prior Period)

Organized under the Laws of OHIO, State of Domicile or Port of Entry Ohio

Country of Domicile US

Incorporated/Organized November 29, 1984 Commenced Business June 13, 1985

Statutory Home Office 41 SOUTH HIGH STREET, COLUMBUS, Ohio 43215  
(Street and Number, City or Town, State, Country and Zip Code)

Main Administrative Office 640 N. TUSTIN AVENUE, STE 106, SANTA ANA, California 92705 714-558-2836  
(Street and Number, City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 640 N. TUSTIN AVENUE, STE 106, SANTA ANA, California 92705  
(Street and Number or P.O. Box, City or Town, State, Country and Zip Code)

Primary Location of Books and Records 640 N. TUSTIN AVENUE, STE 106, SANTA ANA, California 92705  
(Street and Number, City or Town, State, Country and Zip Code)  
714-558-2836  
(Area Code) (Telephone Number)

Internet Website Address N/A

Statutory Statement Contact BILL BURDING 714-245-7771  
(Name) (Area Code) (Telephone Number) (Extension)  
billburding@octitle.com 714-541-3677  
(E-Mail Address) (Fax Number)

**OFFICERS**

Rich Macaluso (President, Director, CFO and Treasurer)  
 Mike Marconi (Director, EVP and Secretary)  
 Bill Burding (Director, EVP and General Counsel)  
 John Wiley (Director and EVP)

**OTHER OFFICERS**

Valsa Jacob (Vice President and Controller)  
 Teresa Harrah (Vice President)  
 Mike Kaluger (Vice President)

**DIRECTORS OR TRUSTEES**

Rich Macaluso  
 Mike Marconi  
 Bill Burding  
 John Wiley

State of California }  
 County of ORANGE } SS

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.

\_\_\_\_\_  
 Rich Macaluso  
 President, Director, CFO and Treasurer

Subscribed and sworn to before me this \_\_\_\_\_  
 day of \_\_\_\_\_ 2013

\_\_\_\_\_  
 Mike Marconi  
 Director, EVP and Secretary

\_\_\_\_\_  
 Bill Burding  
 Director, EVP and General Counsel

- 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**  
**DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2012**

Type of Business	1 Number of Policies Issued During the Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	11 Direct Known Claim Reserve
1. Experience for Policies Having Type of Rate Code:											
1.01 Residential Policies Issued Directly	3				XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.03 Subtotal Policies Issued Directly	3				XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.11 Subtotal for Type of Rate Code	3					XXX	XXX	XXX	XXX	XXX	XXX
2. Experience for Policies Having Type of Rate Code:											
2.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.03 Subtotal Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.11 Subtotal for Type of Rate Code						XXX	XXX	XXX	XXX	XXX	XXX
3. Experience for Policies Having Type of Rate Code:											
3.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.03 Subtotal Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.11 Subtotal for Type of Rate Code						XXX	XXX	XXX	XXX	XXX	XXX
4. Experience for All Types of Rate Codes Combined:											
4.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.03 Total Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.06 Total Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.09 Total Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.10 All Other						XXX	XXX	XXX	XXX	XXX	XXX
4.11 Total for All Types of Rate Codes Combined						XXX	XXX	XXX	XXX	XXX	XXX
5. Aggregate write-ins for Line 5											
6. Total											
<b>DETAILS OF WRITE-INS</b>											
0501. Personal Property											
0502.											
0503.											
0598. Summary of remaining write-ins for Line 05 from overflow page											
0599. Totals (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)											



**EXHIBIT OF PREMIUMS AND LOSSES**  
**DIRECT BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2012**

Type of Business	1 Number of Policies Issued During the Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	11 Direct Known Claim Reserve
1. Experience for Policies Having Type of Rate Code:											
1.01 Residential Policies Issued Directly	3				XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.03 Subtotal Policies Issued Directly	3				XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
1.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.11 Subtotal for Type of Rate Code	3					XXX	XXX	XXX	XXX	XXX	XXX
2. Experience for Policies Having Type of Rate Code:											
2.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.03 Subtotal Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
2.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
2.11 Subtotal for Type of Rate Code						XXX	XXX	XXX	XXX	XXX	XXX
3. Experience for Policies Having Type of Rate Code:											
3.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.03 Subtotal Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.06 Subtotal Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.09 Subtotal Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
3.10 All Other	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.11 Subtotal for Type of Rate Code						XXX	XXX	XXX	XXX	XXX	XXX
4. Experience for All Types of Rate Codes Combined:											
4.01 Residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.02 Non-residential Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.03 Total Policies Issued Directly					XXX	XXX	XXX	XXX	XXX	XXX	XXX
4.04 Residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.05 Non-residential Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.06 Total Policies Issued By Non-Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.07 Residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.08 Non-residential Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.09 Total Policies Issued By Affiliated Agents						XXX	XXX	XXX	XXX	XXX	XXX
4.10 All Other						XXX	XXX	XXX	XXX	XXX	XXX
4.11 Total for All Types of Rate Codes Combined						XXX	XXX	XXX	XXX	XXX	XXX
5. Aggregate write-ins for Line 5											
6. Total											
<b>DETAILS OF WRITE-INS</b>											
0501. Personal Property											
0502.											
0503.											
0598. Summary of remaining write-ins for Line 05 from overflow page											
0599. Totals (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)											

**SCHEDULE E - PART 1A - SEGREGATED FUNDS HELD FOR OTHERS AS NON-INTEREST EARNING CASH DEPOSITS**

Showing all Banks, Trust Companies, Savings and Loan and Building and Loan Associations in which non-interest earning deposits of segregated funds held for others were maintained by the Company at any time during the year and the balances, if any (according to reporting entity's records) on December 31, of the current year.

1		2	3
Depository		Rate of Interest	Balance
Name	Location and Supplemental Information		
Federally Insured Depositories - Open Depositories			
0199999 - TOTAL - Federally Insured Depositories - Open Depositories			

1.	Totals: Last day of January	
2.	February	
3.	March	
4.	April	
5.	May	
6.	June	
7.	July	
8.	August	
9.	September	
10.	October	
11.	November	
12.	December	

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Schedule E, Part 1B

**NONE**

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Schedule E, Part 1C

**NONE**

**SCHEDULE E - PART 1D - SUMMARY**

Segregated Funds Held for Others			
Type	1 Non-Interest Earning	2 Interest Earning	3 Total (Column 1 Plus Column 2)
1. Open depositories .....			
2. Suspended depositories .....			
3. Total segregated cash funds held for others (General Interrogatories-Part 2, Line 9.22) .....			
4. Other forms of security held for others (General Interrogatories-Part 2, Line 9.23) .....			
5. Total all segregated funds held for others (General Interrogatories-Part 2, Line 9.21) .....			
Company Funds on Hand and on Deposit			
<b>General Funds</b>			
6. Open depositories .....			
7. Suspended depositories .....			605,000
8. Total general funds .....			605,000
<b>Reinsurance Reserve Funds</b>			
9. Open depositories .....			
10. Suspended depositories .....			
11. Total reinsurance reserve funds .....			
<b>Total Company Funds</b>			
12. Open depositories .....			
13. Suspended depositories .....			605,000
14. Total company funds on deposit (Line 8 and Line 11) .....			605,000
15. Company funds on hand .....			
16. Total company funds on hand and on deposit .....			605,000

**SCHEDULE E - PART 1E - SUMMARY OF INTEREST EARNED**

Interest Earned On	1 Interest Earned By Company	2 Average Monthly Balance of Non-Earning Deposits	3 Average Monthly Balance of Earning Deposits
<b>Segregated Funds Held for Others</b>			
17. Open depositories .....			
18. Suspended depositories .....			
19. Total segregated funds held for others .....			
<b>Company Funds on Deposit</b>			
20. Open depositories .....			
21. Suspended depositories .....			
22. Total company funds on deposit .....			
<b>Total All Funds on Deposit</b>			
23. Open depositories .....			
24. Suspended depositories .....			
25. Total all funds on deposit .....			

**NONE**

**SCHEDULE E - PART 1F - FUNDS ON DEPOSIT - INTERROGATORIES**

- 
1. Does the reporting entity require, at least annually, letters of representation from its directors and officers concerning conflicts of interest in relation to :
- 1.1 The supply of goods or paid provision of personal services to a reporting entity depository listed in Schedule E - Part 1, or its parent, subsidiaries, or any of its affiliates? Yes ( ) No (X)
- 1.2 Real estate agreements, including, but not limited to lease, rental, mortgage, or purchase agreements with the reporting entity depository listed in Schedule E - Part 1, or its parent, subsidiaries, or any of its affiliates? Yes ( ) No (X)
- 2.1 Is the reporting entity aware of any real estate agreements, including, but not limited to lease, rental, mortgage, or purchase agreements, existing between the reporting entity, its parent, subsidiaries, or any of its affiliates, and any depository listed in Schedule E - Part 1, or its parent, subsidiaries or any of its affiliates? Yes ( ) No (X)
- 2.2 If yes, give details below.  
.....  
.....
3. Does the reporting entity maintain sufficient records of funds held as escrow or security deposits and reported in Exhibit Capital Gains(Losses) and Schedule E - Part 1A that will enable it to identify the funds on an individual basis? Yes ( ) No (X)

**Page 24**

Schedule F, Part 1

**NONE**

**Page 25**

Schedule F, Part 2

**NONE**

**Page 26**

Schedule F, Part 3

**NONE**

Schedule F, Part 3 Bank Footnote

**NONE**

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Sch. F, Pt. 4, Provision for Reinsurance Ceded

**NONE**

Schedule F, Part 4 Bank Footnote

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE REAL ADVANTAGE TITLE INSURANCE COMPANY

**SCHEDULE H - PART 1**

Showing All Title Plants Owned at December 31 of Current Year and Basis of Valuation

1 Permanent Identification Number	2 Form of Ownership	Title Plant Covering Period		5 Date Acquired	6 Actual Cost	7 Book Value	8 Book Value Valuation Basis (a)	9 Increase by Adjustment in Book Value	10 Decrease by Adjustment in Book Value
		3 From	4 To						

9999999 - TOTAL .....

(a) If the basis is other than cost, provide explanation to reason for deviating from the cost basis:

.....

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE REAL ADVANTAGE TITLE INSURANCE COMPANY

**SCHEDULE H - PART 2**

Showing All Title Plants Acquired During the Year

1 Permanent Identification Number	2 Form of Ownership	Title Plant Covering Period		5 Date Acquired	6 How Acquired	7 Name of Seller	8 Acquisition/ Construction Cost to Company During Year	9 Book Value at December 31 of Current Year	10 Percentage Ownership as of December 31	11 Title Plant not 100% Owned (Does Company Participate in Maintenance Cost? Yes or No)
		3 From	4 To							

9999999 - TOTAL ..... N/A .....

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE REAL ADVANTAGE TITLE INSURANCE COMPANY

**SCHEDULE H - PART 3**

Showing All Title Plants Sold or Otherwise Disposed of During the Year

1 Permanent Identification Number	2 Form of Ownership	Title Plant Covering Period		5 Date Sold	6 Name of Purchaser	7 Cost to Company	8 Prior Year Book Value	Change in Book Value		11 Book Value at Date of Sale (8+9-10)	12 Consideration	13 Profit and (Losses) on Sale
		3 From	4 To					9 Increase by Adjustment in Book Value During Year	10 Decrease by Adjustment in Book Value During Year			

9999999 - TOTAL

**SCHEDULE H - Verification Between Years**

1. Book value, December 31, prior year .....	<b>NONE</b>	.....
2. Increase by adjustment in book value:		.....
2.1 Totals, Part 1, Column 9 .....		.....
2.2 Totals, Part 3, Column 9 .....		.....
3. Cost of acquisition, Part 2, Column 8 .....	.....	.....
4. Totals .....	.....	8. Book value, December 31, current year .....

**Page 31**  
Schedule H, Part 4  
**NONE**

**SCHEDULE P - PART 1A - POLICIES WRITTEN DIRECTLY**

(\$000 Omitted)

Years in Which Policies Were Written	1 Amount of Insurance Written in Millions	Premiums Written and Other Income					Loss and Allocated Loss Adjustment Expenses Payments					
		2 Direct Premium	3 Assumed Premium	4 Other Income	5 Ceded Premium	6 Net Columns (2 + 3 + 4 - 5)	Loss Payments			Allocated LAE Payments		
							7 Direct	8 Assumed	9 Ceded	10 Direct	11 Assumed	12 Ceded
1. Prior	XXX											
2. 2003												
3. 2004												
4. 2005												
5. 2006												
6. 2007												
7. 2008												
8. 2009												
9. 2010												
10. 2011												
11. 2012												
12. Totals	XXX											

	13 Salvage and Subrogation Received	14 Unallocated Loss Expense Payments	15 Total Net Loss and Expense Paid (Columns 7 + 8 + 10 + 11 - 9 - 12 + 14)	16 Number of Claims Reported (Direct)	Loss and Allocated Loss Adjustment Expenses Unpaid						23 Unallocated Loss Expense Unpaid
					Known Claim Reserves			IBNR Reserves			
					17 Direct	18 Assumed	19 Ceded	20 Direct	21 Assumed	22 Ceded	
1. Prior											
2. 2003											
3. 2004											
4. 2005											
5. 2006											
6. 2007											
7. 2008											
8. 2009											
9. 2010											
10. 2011											
11. 2012											
12. Totals											

	24 Total Net Loss and LAE Unpaid (Columns 17 + 18 + 20 + 21 - 19 - 22 + 23)	25 Number of Claims Outstanding (Direct)	Losses and Allocated Loss Expenses Incurred				Loss and LAE Ratio		32 Net Loss and LAE Per \$1000 of Coverage ((Columns 29 + 14 + 23) / Column 1)	33 Discount For Time Value of Money	34 Net Reserves After Discount (Columns 24 - 33)
			26 Direct (Columns 7 + 10 + 17 + 20)	27 Assumed (Columns 8 + 11 + 18 + 21)	28 Ceded (Columns 9 + 12 + 19 + 22)	29 Net	30 Direct Basis ((Columns 14 + 23 + 26) / Column 2)	31 Net Basis ((Columns 14 + 23 + 29) / (Columns 6 - 4))			
1. Prior								XXX			
2. 2003											
3. 2004											
4. 2005		9									
5. 2006											
6. 2007											
7. 2008											
8. 2009											
9. 2010											
10. 2011											
11. 2012											
12. Totals		9					XXX	XXX	XXX		

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Schedule P, Part 1B  
**NONE**

**SCHEDULE P - PART 2 - POLICY YEAR INCURRED LOSS AND ALAE**

Years in Which Policies Were Written	Incurred Losses and Allocated Expenses at Year End (\$000 omitted) Including Known Claims and IBNR on Unreported Claims										11 One Year (Columns 10-9)	12 Two Year (Columns 10-8)
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012		
1. Prior												
2. 1993												
3. 1994												
4. 1995												
5. 1996												
6. 1997												
7. 1998												
8. 1999												
9. 2000												
10. 2001												
11. 2002												
12. 2003												
13. 2004	XXX											
14. 2005	XXX	XXX										
15. 2006	XXX	XXX	XXX									
16. 2007	XXX	XXX	XXX	XXX								
17. 2008	XXX	XXX	XXX	XXX	XXX							
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX						
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
22. Totals												

NONE

**SCHEDULE P - PART 2A - POLICY YEAR PAID LOSS AND ALAE**

Years in Which Policies Were Written	Cumulative Paid Losses and Allocated Expenses 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												
2. 1993												
3. 1994												
4. 1995												
5. 1996												
6. 1997												
7. 1998												
8. 1999												
9. 2000												
10. 2001												
11. 2002												
12. 2003												
13. 2004	XXX											
14. 2005	XXX	XXX										
15. 2006	XXX	XXX	XXX									
16. 2007	XXX	XXX	XXX	XXX								
17. 2008	XXX	XXX	XXX	XXX	XXX							
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX						
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

**SCHEDULE P - PART 2B - POLICY YEAR LOSS AND ALAE CASE BASIS RESERVES**

Years in Which Policies Were Written	Case Basis Losses and Allocated Expenses Reserves at Year End (\$000 omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002										
12. 2003										
13. 2004	XXX									
14. 2005	XXX	XXX								
15. 2006	XXX	XXX	XXX							
16. 2007	XXX	XXX	XXX	XXX						
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

**SCHEDULE P - PART 2C - POLICY YEAR BULK RESERVES ON KNOWN CLAIMS**

Years in Which Policies Were Written	Bulk Reserves on Known Claims at Year End (\$000 omitted) Loss and Allocated Loss Expense									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002										
12. 2003										
13. 2004	XXX									
14. 2005	XXX	XXX								
15. 2006	XXX	XXX	XXX							
16. 2007	XXX	XXX	XXX	XXX						
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

**SCHEDULE P - PART 2D - POLICY YEAR IBNR RESERVES**

Years in Which Policies Were Written	IBNR Reserves on Unreported Claims at Year End (\$000 omitted) Loss and Allocated Loss Expense									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002										
12. 2003										
13. 2004	XXX									
14. 2005	XXX	XXX								
15. 2006	XXX	XXX	XXX							
16. 2007	XXX	XXX	XXX	XXX						
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

**SCHEDULE P - PART 3 - INCURRED LOSS AND ALAE BY YEAR OF FIRST REPORT**

Years in Which Claims Were First Reported	Losses and Allocated Expenses at Year End (\$000 omitted)										Incurred Loss and ALAE on Known Claims and Bulk Reserves on Known Claims	
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	11 One Year (Columns 10-9)	12 Two Year (Columns 10-8)
1. Prior												
2. 2003												
3. 2004	XXX											
4. 2005	XXX	XXX										
5. 2006	XXX	XXX	XXX									
6. 2007	XXX	XXX	XXX									
7. 2008	XXX	XXX	XXX									
8. 2009	XXX	XXX	XXX									
9. 2010	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
12. Totals												

**NONE**

**SCHEDULE P - PART 3A - PAID LOSS AND ALAE BY YEAR OF FIRST REPORT**

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

**NONE**

**SCHEDULE P - PART 3B - LOSS AND ALAE CASE BASIS RESERVES BY YEAR OF FIRST REPORT**

Years in Which Claims Were First Reported	Case Basis Losses and Allocated Expenses Reserves at Year End (\$000 omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 2003										
3. 2004	XXX									
4. 2005	XXX	XXX								
5. 2006	XXX	XXX	X							
6. 2007	XXX	XXX	X							
7. 2008	XXX	XXX	X							
8. 2009	XXX	XXX	X							
9. 2010	XXX	XXX	X							
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P - PART 3C - BULK RESERVES ON KNOWN CLAIMS BY YEAR OF FIRST REPORT**

Years in Which Claims Were First Reported	Bulk Reserves on Known Claims at Year End (\$000 omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 2003										
3. 2004	XXX									
4. 2005	XXX	XXX								
5. 2006	XXX	XXX	X							
6. 2007	XXX	XXX	X							
7. 2008	XXX	XXX	X							
8. 2009	XXX	XXX	X							
9. 2010	XXX	XXX	X							
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P - PART 4A - POLICY YEAR REPORTED CLAIM COUNTS**

Years in Which Policies Were Written	Number of Claims Reported (Direct)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002									6	
12. 2003										
13. 2004	XXX									10
14. 2005	XXX	XXX								5
15. 2006	XXX	XXX	XXX							8
16. 2007	XXX	XXX	XXX	XXX						1
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4B - POLICY YEAR CLAIMS CLOSED WITH LOSS PAYMENT**

Years in Which Policies Were Written	Number of Claims Closed With Loss Payment									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002										
12. 2003										
13. 2004	XXX									
14. 2005	XXX	XXX								
15. 2006	XXX	XXX	X							
16. 2007	XXX	XXX	X							
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE P - PART 4C - POLICY YEAR CLAIMS CLOSED WITHOUT LOSS PAYMENT**

Years in Which Policies Were Written	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										
2. 1993										
3. 1994										
4. 1995										
5. 1996										
6. 1997										
7. 1998										
8. 1999										
9. 2000										
10. 2001										
11. 2002										
12. 2003										
13. 2004	XXX									
14. 2005	XXX	XXX								
15. 2006	XXX	XXX	X							
16. 2007	XXX	XXX	X							
17. 2008	XXX	XXX	XXX	XXX	XXX					
18. 2009	XXX	XXX	XXX	XXX	XXX	XXX				
19. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
20. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
21. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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Schedule P, Part 5A

**NONE**

Schedule P, Part 5B

**NONE**

Schedule P, Part 5C

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2012 OF THE REAL ADVANTAGE TITLE INSURANCE COMPANY  
SCHEDULE P INTERROGATORIES**

- 1.1 Title insurance losses should include all losses on any transaction for which a title insurance premium, rate or charge was made or contemplated. Escrow losses for which the company is contractually obligated should be included. Losses arising from defalcations for which the reporting entity is contractually obligated should be included. Are the title insurance losses reported in Schedule P defined in conformance with the above definition? Yes (X) No ( )
- 1.2 If not describe the types of losses reported.  
.....  
.....
- 1.3 If the types or basis of reporting has changed over time, please explain the nature of such changes.  
.....  
.....
- 2.1 Are paid loss and allocated loss adjustment expenses reduced on account of salvage or subrogation in accordance with the instructions? Yes (X) No ( )
- 2.2 If not, describe the basis of reporting.  
.....  
.....
- 2.3 If the basis of reporting has changed over time, please explain the nature of such changes.  
.....  
.....
- 3.1 Are sales of salvage at prices different from their book value recorded in accordance with the instructions? Yes (X) No ( )
- 3.2 If not, describe the basis of reporting.  
.....  
.....
- 3.3 If the basis of reporting has changed over time, please explain the nature of such changes.  
.....  
.....
- 4.1 Are the case basis reserves reported gross of anticipated salvage and subrogation in accordance with the instructions? Yes (X) No ( )
- 4.2 If not, please explain.  
.....  
.....
- 4.3 If the basis of reporting has changed over time, please explain the nature of such changes.  
.....  
.....
- 5.1 Do any of the reserves reported in Schedule P contain a provision for reserve discount, contingency margin, or any other element not providing for an estimation of ultimate liability? Yes (X) No ( )
- 5.2 If so, please explain.  
.....  
.....
- 6.1 Does the company IBNR reserves in Schedule P reconcile to the IBNR reserves prepared on a GAAP basis? Yes ( ) No (X)
- 6.2 If not, please explain.  
.....  
.....
- 7.1 Are allocated loss adjustment expenses recorded in accordance with the instructions? Yes (X) No ( )
- 7.2 If not, please explain which items are not in conformity.  
.....  
.....
- 7.3 If the basis of reporting has changed over time, please explain the nature of such changes.  
.....  
.....
- 8.1 The unallocated loss adjustment expenses paid during the most recent calendar year should be distributed to the various policy years in which the policy was issued as follows: (1) 10% to the most recent policy year, (2) 20% to the next most recent policy year, (3) 10% to the succeeding policy year, (4) 5% to each of the next two succeeding policy years, and (5) the balance to all policy years, including the most recent policy year, in proportion to the amount of loss payments paid for each policy year during the most recent calendar year. Are they so reported? Yes ( ) No (X)
- 8.2 If estimates were used prior to 1996, please explain the basis of such estimates.  
.....  
.....
9. Indicate the basis of determining claim counts:
- 9.1 Are policies having multiple claims shown in Schedule P as a single claim? Yes ( ) No (X)
- 9.2 Are claims closed without payment removed from the claim count? Yes ( ) No (X)
- 9.3 If the definition of claim count has changed over time, please explain the nature of such changes.  
.....  
.....
- 10.1 Have there been any portfolio reinsurance transfers or other accounting conventions that have caused a mismatch of premiums, other income, loss or ALAE? Yes ( ) No (X)
- 10.2 If so, please explain.  
.....  
.....
- 11.1 Have there been any excess of loss or stop loss reinsurance treaties or other accounting conventions that have caused a mismatch of premiums, other income, loss or ALAE? Yes ( ) No (X)
- 11.2 If so, please explain.  
.....  
.....
- 12.1 Have there been any major mergers or acquisitions, either with respect to an insurer or an agent, that had a material impact on operations or claims development? Yes ( ) No (X)
- 12.2 If so, please explain.  
.....  
.....
- 13.1 Were any estimates or allocations used to complete this data request? Yes (X) No ( )
- 13.2 If so, please explain the nature of the estimate or allocation, the assumptions made and the data used to support your assumptions.  
.....  
.....
14. Are there any especially significant events, coverage, retention or accounting changes which have occurred which must be considered when making an analysis of the information provided? Yes ( ) No (X)

**SCHEDULE Y**

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

Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity (ies) / Person (s)	*
.....	Olympic Holding Company	.....	.....	.....	.....	N/A	..... Orange Coast Title Company	..... CA	..... UDP	..... Orange Coast Title Company	..... Owner, Board, Mgmt	..... 100.000	..... Orange Coast Title Company	.....

Asterisk	Explanation
----------	-------------

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE REAL ADVANTAGE TITLE INSURANCE COMPANY

**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)

NA ..... 95-2871609 Orange Coast Title Company .....  
 9999999 - CONTROL TOTALS .....

If the nature of the transactions reported in Part 2 requires explanation, report such in the following explanatory note:

Contribution to subsidiary  
 .....  
 .....  
 .....

**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 filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	<u>Response</u>
<b>MARCH FILING</b>	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 460:	
2. Will an actuarial opinion be filed by March 1?	WAIVED
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 440:	5 0 4 4 0 2 0 1 2 4 4 0 0 0 0 0 0
<b>APRIL FILING</b>	
3. Will Management's Discussion and Analysis be filed by April 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 350:	
4. Will the Supplemental Schedule of Business Written by Agency be filed with the state of domicile by April 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 480:	
5. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 285:	
<b>JUNE FILING</b>	
6. Will an audited financial report be filed by June 1?	WAIVED
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 220:	5 0 4 4 0 2 0 1 2 2 2 0 0 0 0 0 0
7. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 221:	
<b>AUGUST FILING</b>	
8. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES
<b>Explanation:</b>	
<b>Barcode:</b> Document Identifier 222:	

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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 filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions

MARCH FILING	<u>Response</u>
<p>9. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?</p> <p><b>Explanation:</b></p> <p><b>Barcode:</b> Document Identifier 420:</p>	<p>YES</p>
<p>10. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?</p> <p><b>Explanation:</b></p> <p><b>Barcode:</b> Document Identifier 224:</p>	<p>SEE EXPLANATION</p>
<p>11. 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?</p> <p><b>Explanation:</b></p> <p><b>Barcode:</b> Document Identifier 225:</p>	<p>SEE EXPLANATION</p>
<p>12. 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?</p> <p><b>Explanation:</b></p> <p>"Orange Coast Title Company acquired Olympic Holding Company, LLC, the immediate corporate parent of Real Advantage Title Insurance Company ("Real Advantage"), in 2011. Real Advantage does not currently have an Audit Committee, since the company ha</p> <p><b>Barcode:</b> Document Identifier 226:</p>	<p>SEE EXPLANATION</p>
AUGUST FILING	
<p>13. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?</p> <p><b>Explanation:</b></p> <p><b>Barcode:</b> Document Identifier 223:</p>	<p>YES</p>

# Title

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