



QUARTERLY STATEMENT

As of September 30, 2013
of the Condition and Affairs of the

American Commerce Insurance Company

NAIC Group Code.....0411, 0411 (Current Period) (Prior Period)	NAIC Company Code..... 19941	Employer's ID Number..... 31-4361173
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... September 18, 1946	Commenced Business..... March 19, 1947	
Statutory Home Office	3590 TWIN CREEKS DRIVE..... COLUMBUS OH US 43218-2579 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	211 MAIN STREET..... WEBSTER MA US (Street and Number) (City or Town, State, Country and Zip Code)	508-943-9000 (Area Code) (Telephone Number)
Mail Address	211 MAIN STREET..... WEBSTER MA US (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	211 MAIN STREET..... WEBSTER MA US (Street and Number) (City or Town, State, Country and Zip Code)	508-943-9000 (Area Code) (Telephone Number)
Internet Web Site Address		
Statutory Statement Contact	CHRISTINE A MULCAHY (Name) cmulcah@mapfreusa.com (E-Mail Address)	508-943-9000-14376 (Area Code) (Telephone Number) (Extension) 508-949-4246 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. JAIME TAMAYO	PRESIDENT & CEO	2. DANIEL PATRICK OLOHAN	SECRETARY, GENERAL COUNSEL, & SVP
3. ROBERT EDWARD MCKENNA	TREASURER, CAO, & SVP	4. RANDALL VAUGHN BECKER	EXECUTIVE VICE PRESIDENT & CFO

DIRECTORS OR TRUSTEES

RANDALL VAUGHN BECKER	DAVID HILL COCHRANE	DENNIS JOHN CROSSLEY	FREDERICK LAWRENCE GRUEL
DANIEL PATRICK OLOHAN #	JOHN DAVID PORTER	MARK ALLEN SHAW	MARK HARRY SHAW
JAIME TAMAYO			

State of..... MASSACHUETTS
County of..... WORCESTER

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)	(Signature)	(Signature)
JAIME TAMAYO	DANIEL PATRICK OLOHAN	ROBERT EDWARD MCKENNA
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT & CEO	SECRETARY, GENERAL COUNSEL, & SVP	TREASURER, CAO, & SVP
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of _____

a. Is this an original filing?
b. If no:
1. State the amendment number
2. Date filed
3. Number of pages attached

Yes [X] No []

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds.....	171,669,121		171,669,121	166,711,272
2. Stocks:				
2.1 Preferred stocks.....	2,198,740		2,198,740	2,398,755
2.2 Common stocks.....			0	
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	1,628,790		1,628,790	1,724,127
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....2,895,775), cash equivalents (\$.....0) and short-term investments (\$.....0).....	2,895,775		2,895,775	6,515,990
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	178,392,426	0	178,392,426	177,350,144
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	1,737,074		1,737,074	1,711,942
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	58,777,786		58,777,786	45,263,362
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums.....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	15,434,868		15,434,868	27,302,650
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....	6,362,285	735,371	5,626,914	6,533,694
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	632,113		632,113	1,199,252
21. Furniture and equipment, including health care delivery assets (\$.....0).....	1,187,530	1,187,530	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	61,511,931	1,927,394	59,584,537	53,417,625
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	324,036,013	3,850,295	320,185,718	312,778,669
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	324,036,013	3,850,295	320,185,718	312,778,669

DETAILS OF WRITE-INS

1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. PRE PAID EXPENSES.....	681,941	681,941	0	
2502. EQUITY IN POOLS AND ASSOCIATIONS.....	59,562,569		59,562,569	52,441,297
2503. ARIZONA RENEWAL BUSINESS.....	1,245,453	1,245,453	0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	21,968	0	21,968	976,328
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	61,511,931	1,927,394	59,584,537	53,417,625

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$....27,006,000).....	54,344,491	53,198,460
2. Reinsurance payable on paid losses and loss adjustment expenses.....	9,130,456	10,073,697
3. Loss adjustment expenses.....	14,120,947	14,400,154
4. Commissions payable, contingent commissions and other similar charges.....	3,940,112	4,188,789
5. Other expenses (excluding taxes, licenses and fees).....	2,136,927	4,025,932
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	683,188	995,563
7.1 Current federal and foreign income taxes (including \$.455,391 on realized capital gains (losses)).....	658,692	183,378
7.2 Net deferred tax liability.....		
8. Borrowed money \$.0 and interest thereon \$.0.....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.170,426,852 and including warranty reserves of \$.0 and accrued accident and health experience rating refunds including \$.0 for medical loss ratio rebate per the Public Health Service Act.....	87,231,122	79,298,057
10. Advance premium.....	6,123,695	3,469,011
11. Dividends declared and unpaid:		
11.1 Stockholders.....		12,876,826
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	16,949,350	10,178,990
13. Funds held by company under reinsurance treaties.....		
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.0 certified).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....	4,286,085	935,508
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.0 and interest thereon \$.0.....		
25. Aggregate write-ins for liabilities.....	566,022	803,143
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	200,171,087	194,627,508
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	200,171,087	194,627,508
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	3,226,140	3,226,140
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	26,188,147	26,188,147
35. Unassigned funds (surplus).....	90,600,344	88,736,873
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	120,014,631	118,151,160
38. Totals (Page 2, Line 28, Col. 3).....	320,185,718	312,778,669

DETAILS OF WRITE-INS

2501. UNCLAIMED PROPERTY.....	566,022	803,143
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	566,022	803,143
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

American Commerce Insurance Company
STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....210,298,528).....	190,714,545	194,932,672	255,298,574
1.2 Assumed..... (written \$.....130,453,509).....	122,520,444	123,566,302	163,445,326
1.3 Ceded..... (written \$.....210,298,528).....	190,714,545	194,932,672	255,298,574
1.4 Net..... (written \$.....130,453,509).....	122,520,444	123,566,302	163,445,326
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....72,043,000):			
2.1 Direct.....	124,708,959	118,219,377	185,770,718
2.2 Assumed.....	76,746,597	74,390,853	102,779,656
2.3 Ceded.....	124,708,959	118,219,377	185,770,718
2.4 Net.....	76,746,597	74,390,853	102,779,656
3. Loss adjustment expenses incurred.....	14,083,379	14,373,847	19,828,366
4. Other underwriting expenses incurred.....	35,872,020	33,552,615	44,662,386
5. Aggregate write-ins for underwriting deductions.....	0	(4,550)	(109,655)
6. Total underwriting deductions (Lines 2 through 5).....	126,701,996	122,312,765	167,160,753
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(4,181,552)	1,253,537	(3,715,427)
INVESTMENT INCOME			
9. Net investment income earned.....	4,958,799	5,909,704	8,523,484
10. Net realized capital gains (losses) less capital gains tax of \$.....(104,756).....	957,581	495,234	2,259,989
11. Net investment gain (loss) (Lines 9 + 10).....	5,916,380	6,404,938	10,783,473
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0		
13. Finance and service charges not included in premiums.....	1,566,512	1,173,622	1,645,013
14. Aggregate write-ins for miscellaneous income.....	52,455	47,923	57,650
15. Total other income (Lines 12 through 14).....	1,618,967	1,221,545	1,702,663
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	3,353,795	8,880,020	8,770,709
17. Dividends to policyholders.....			
18. Net income after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	3,353,795	8,880,020	8,770,709
19. Federal and foreign income taxes incurred.....	768,789	2,118,957	2,028,729
20. Net income (Line 18 minus Line 19) (to Line 22).....	2,585,006	6,761,063	6,741,980
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	118,151,154	128,768,257	128,768,257
22. Net income (from Line 20).....	2,585,006	6,761,063	6,741,980
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....103,216.....	(191,688)	313,255	330,723
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(274,625)	(239,639)	(920,986)
27. Change in nonadmitted assets.....	(618,822)	665,074	1,870,061
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			(12,876,826)
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	363,606	(6,661,517)	(5,762,055)
38. Change in surplus as regards policyholders (Lines 22 through 37).....	1,863,477	838,236	(10,617,103)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	120,014,631	129,606,493	118,151,154
DETAILS OF WRITE-INS			
0501. LAD PROGRAM INCOME.....		(4,550)	(109,655)
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	(4,550)	(109,655)
1401. MISCELLANEOUS INCOME.....	40,581	46,059	19,396
1402. GAIN ON SALE OF FIXED ASSETS.....	11,874	1,864	5,834
1403. OTHER TECHNICAL INCOME (OTHER REINSURER).....			32,420
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	52,455	47,923	57,650
3701. STATUTORY ADJUSTMENT INTERCO EXPENSE POOLING.....	363,606	(1,546,517)	(647,055)
3702. CHANGE IN POOLING - CASH SETTLEMENT.....		(5,115,000)	(5,115,000)
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	363,606	(6,661,517)	(5,762,055)

American Commerce Insurance Company
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	126,364,129	117,920,809	126,112,962
2. Net investment income.....	5,225,988	6,024,518	8,892,062
3. Miscellaneous income.....	1,618,967	1,221,545	1,702,664
4. Total (Lines 1 through 3).....	133,209,084	125,166,872	136,707,688
5. Benefit and loss related payments.....	64,676,025	51,347,808	65,981,162
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	52,684,663	46,158,648	61,027,577
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....(911,074) tax on capital gains (losses).....	188,719	(56,879)	(56,877)
10. Total (Lines 5 through 9).....	117,549,407	97,449,577	126,951,862
11. Net cash from operations (Line 4 minus Line 10).....	15,659,677	27,717,295	9,755,827
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	35,621,027	24,843,698	51,934,183
12.2 Stocks.....		4,000,000	4,000,000
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	35,621,027	28,843,698	55,934,183
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	39,861,849	39,847,844	43,480,281
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....	6,066	8,726	8,725
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	39,867,915	39,856,570	43,489,006
14. Net increase (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(4,246,888)	(11,012,872)	12,445,177
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....	12,876,826	13,616,103	13,616,103
16.6 Other cash provided (applied).....	(2,156,179)	(17,373,683)	(13,926,175)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(15,033,005)	(30,989,786)	(27,542,278)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(3,620,216)	(14,285,363)	(5,341,275)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	6,515,991	11,857,266	11,857,266
19.2 End of period (Line 18 plus Line 19.1).....	2,895,775	(2,428,097)	6,515,991

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			
---------	--	--	--

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices, Impact of NAIC/State Differences

The accompanying financial statements of The American Commerce Insurance Company (the Company) have been prepared in conformity with the accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Ohio. The NAIC Accounting Practices and Procedures manual, version effective January 1, 2001, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio.

Note 2 - Accounting Changes and Corrections of Errors

No significant change.

Note 3 - Business Combinations and Goodwill

No significant change.

Note 4 - Discontinued Operations

No significant change.

Note 5 – Investments

D. Loan-backed Securities

1 Prepayment assumptions are obtained from broker-dealer surveys, internal estimates or Bloomberg

	Amortized Cost Before OTTI		OTTI Recognized in Loss		Fair Value
2 OTTI Recognized 1st Qtr					
a. Intent to Sell:	\$	-	\$	-	\$ -
b. Intent to hold:		-		-	-
c. Total OTTI 1st Qtr	\$	-	\$	-	\$ -
OTTI Recognized 2nd Qtr					
d. Intent to Sell:	\$	-	\$	-	\$ -
e. Intent to hold:		-		-	-
f. Total OTTI 2nd Qtr	\$	-	\$	-	\$ -
OTTI Recognized 3rd Qtr					
g. Intent to Sell:	\$	-	\$	-	\$ -
h. Intent to hold:		-		-	-
i. Total OTTI 3rd Qtr	\$	-	\$	-	\$ -
OTTI Recognized 4th Qtr					
j. Intent to Sell:	\$	-	\$	-	\$ -
k. Intent to hold:		-		-	-
l. Total OTTI 4th Qtr	\$	-	\$	-	\$ -
m. Totals for 2013			\$	-	-

3 Currently held structured securities with recognized OTTI

CUSIP	Book/Adj Carrying Amortized Cost Before Current Period OTTI	Present Value of Projected Cashflows	OTTI Recognized	Amortized Cost After OTTI	Fair Value at time of OTTI	Date of Financial Stmnt Where Reported
	\$	-	\$	-	\$	-
TOTALS			\$	-		

4 Impaired securities for which an OTTI has not been recognized

A1. The aggregate amount of unrealized losses - Less than 12 months:	\$	1,461,819
A2. The aggregate amount of unrealized losses - 12 months or longer:	\$	497,396
B1. The aggregate related fair value of securities with unrealized losses - Less than 12 months:	\$	31,666,564
B2. The aggregate related fair value of securities with unrealized losses - 12 months or longer:	\$	645,457

5 The general categories of information considered in reaching the conclusion that the impairments are not other-than temporary include:

- Probability of collecting all amounts due according to the contractual terms in effect at the time of acquisition.
- Intent to sell: Is there intent to sell the security before recovery.
- The length of time and the extent to which fair value has been less than amortized cost.
- The financial conditions and short term prospects of the issuer.
- Intent and Ability to hold: Is there a lack of ability to hold, where cash and working capital requirements and contractual or regulatory obligations indicate that the investment may need to be sold before the forecasted recovery occurs.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

NOTES TO FINANCIAL STATEMENTS

Note 7 - Investment Income

No significant change.

Note 8 - Derivative Instruments

No significant change.

Note 9 - Income Taxes

No significant change.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant change.

Note 11 - Debt

No significant change.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

No significant change.

Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

No significant change.

Note 14 - Contingencies

No significant change.

Note 15 - Leases

No significant change.

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant change.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

C. No wash sales to report this quarter.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No significant change.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No significant change.

Note 20 - Fair Value Measurements

A1. Summary of Financial Assets Measured and Reported at Fair Value at 09/30/13

Description	Level 1		Level 2		Level 3		TOTAL
Preferred Stock	\$	-	\$	2,198,740	\$	-	\$ 2,198,740
Bonds		-		200,529		-	200,529
Common Stock		-		-		-	-
TOTALS	\$	-	\$	2,399,269	\$	-	\$ 2,399,269

A2 Fair Value Measurement in Level 3 of the Fair Value Hierarchy.

Description	Beginning Balance at 7/1/2013	Transfers into Level 3	Transfers out of Level 3	Total gains & (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 9/30/2013
Preferred Stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
Bonds	-	-	-	-	-	-	-	-	-	-
Common Stock	-	-	-	-	-	-	-	-	-	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-

A3 The company's policy is to recognize "transfers into" and "transfers out of " the Fair Value Hierarchy Levels on the actual date of the event or change in circumstances that caused the transfer.

A4 Financial Assets included in Level 1 of the Fair Value Hierarchy include US Treasury securities and exchange traded common stock where prices are obtained directly from active markets.
Financial Assets included in Level 2 of the Fair Value Hierarchy are securities priced by the company's custodial bank and based on observable market data.
Financial Assets included in Level 3 of the Fair Value Hierarchy are securities priced utilizing broker quotes.

A5 The company does not hold derivative assets or liabilities.

NOTES TO FINANCIAL STATEMENTS

20C Aggregate Fair Value of all Financial Instruments by Hierarchical Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Asset	Level 1	Level 2	Level 3	Not Practicable
Bonds	\$ 173,424,247	\$ 171,669,121	\$ 6,281,948	\$ 167,142,299	\$ -	\$ -
Preferred Stock	2,198,740	2,198,740	-	2,198,740	-	-
Common Stock	-	-	-	-	-	-
	\$ 175,622,987	\$ 173,867,861	\$ 6,281,948	\$ 169,341,039	\$ -	\$ -

20D Not Practicable to Estimate Fair Value

NONE

Note 21 - Other Items

On October 23, 2013, the Ohio Department of Insurance granted the Company approval to pay an extra ordinary dividend in the amount of \$11,815,116 on or after December 2, 2013. This dividend would have been considered an ordinary dividend for 2013 if the payment date would have been after January 7, 2014 therefore but for the fact that the payment will be made one month earlier, this dividend is considered an extra ordinary dividend.

Note 22 - Events Subsequent

No significant change.

Note 23 – Reinsurance

No significant change.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

No significant change.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

The estimated cost of loss and loss adjustment expenses attributable to insured events of prior years' increased by \$4,123,000 during the current year. The deficiency of \$4,123,000 is approximately 6.1% of the unpaid losses and LAE of \$67,599,000 as of the prior year-end. This is the result of the pooled results and not the Company on a stand-alone basis.

Note 26 - Intercompany Pooling Arrangements

No significant change.

Note 27 - Structured Settlements

No significant change.

Note 28 - Health Care Receivables

No significant change.

Note 29 - Participating Policies

No significant change.

Note 30 - Premium Deficiency Reserves

No significant change.

Note 31 - High Deductibles

No significant change.

Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

No significant change.

Note 33 - Asbestos/Environmental Reserves

No significant change.

Note 34 - Subscriber Savings Accounts

No significant change.

Note 35 - Multiple Peril Crop Insurance

No significant change.

Note 36 - Financial Guaranty Insurance

B. No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [☐] No [☒]
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes [☐] No [☐]
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [☐] No [☒]
- 2.2

If yes, date of change:

.....
- 3.1

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [☐] No [☒]
- 3.2

If the response to 3.1 is yes, provide a brief description of those changes.

- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [☐] No [☒]
- 4.2

If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [☐] No [☒] N/A [☐]
-

- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2008.....
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2008.....
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

3/17/2010.....
- 6.4

By what department or departments?
State of Ohio Department of Insurance

- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [☐] No [☐] N/A [☒]
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [☐] No [☐] N/A [☒]
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [☐] No [☒]
- 7.2

If yes, give full information:

- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [☐] No [☒]
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [☐] No [☒]
- 8.4

If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [☒] No [☐]
- 9.11

If the response to 9.1 is No, please explain:

- 9.2

Has the code of ethics for senior managers been amended?

Yes [☐] No [☒]
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [☐] No [☒]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

PART 1 - FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [☐] No [☒]
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

.....

American Commerce Insurance Company

PART 1 - INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes []No [X]

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$.....0

13. Amount of real estate and mortgages held in short-term investments:

\$.....0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes []No [X]

14.2 If yes, please complete the following:

	1	2
	Prior Year-End	Current Quarter
	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
14.21 Bonds.....	\$0	\$0
14.22 Preferred Stock.....	\$0	\$0
14.23 Common Stock.....	\$0	\$0
14.24 Short-Term Investments.....	\$0	\$0
14.25 Mortgage Loans on Real Estate.....	\$0	\$0
14.26 All Other.....	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above.....	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes []No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes []No []

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$.....0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$.....0

16.3 Total payable for securities lending reporting on the liability page:

\$.....0

17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X]No []

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1	2
Name of Custodian(s)	Custodian Address
Bank of New York Mellon	One Wall Street, New York, NY

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation.

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes []No [X]

17.4 If yes, give full and complete information relating thereto:

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration Depository	Name(s)	Address

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [X]No []

18.2 If no, list exceptions:

American Commerce Insurance Company
GENERAL INTERROGATORIES (continued)

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.

Yes [] No [X] N/A []

2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?
If yes, attach an explanation.

Yes [] No [X]

3.1

Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]

3.2

If yes, give full and complete information thereto:

4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2

If yes, complete the following schedule:

1	2	3	Total Discount				Discount Taken During Period			
	Maximum Interest	Disc. Rate	4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
Line of Business						0				0
Total.....	XXX...	XXX.....	0	0	0	0	0	0	0	0

5.

Operating Percentages:

5.1

A&H loss percent

0.0 %

5.2

A&H cost containment percent

0.0 %

5.3

A&H expense percent excluding cost containment expenses

0.0 %

6.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]

6.2

If yes, please provide the amount of custodial funds held as of the reporting date.

0

6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]

6.4

If yes, please provide the amount of funds administered as of the reporting date.

0

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Is Insurer Authorized? (YES or NO)
------------------------------	------------------------------	----------------------------	--------------------------------------	---

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2	3	4	5	6	7
States, Etc.		Active Status	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date
1.	Alabama.....	AL.....L.....	202,796	387,323	9,769	15,403	61,317	31,349
2.	Alaska.....	AK.....L.....	20,930	88,428	177,766	3,910	13,271	37,456
3.	Arizona.....	AZ.....L.....	5,010,016	5,849,676	3,536,969	3,443,806	2,446,079	2,650,139
4.	Arkansas.....	AR.....L.....	43,399	292,325	32,362	154,036	45,136	56,647
5.	California.....	CA.....L.....	338,924	463,919	.....	.....	.....21,902	.....
6.	Colorado.....	CO.....L.....	(18,745)	106,614	51,001	29,745	80,828	385,384
7.	Connecticut.....	CT.....L.....	25,079,173	13,689,804	8,459,920	3,792,282	9,585,959	3,383,135
8.	Delaware.....	DE.....L.....	1,709	206,885	59,114	61,387	1,196,903	1,273,924
9.	District of Columbia.....	DC.....L.....	6,384	21,567	114	.....	.....31,769	8,788
10.	Florida.....	FL.....L.....	474,311	609,166	25,897	(61)	151,419	75,715
11.	Georgia.....	GA.....L.....	267,654	630,324	42,828	38,786	140,422	195,234
12.	Hawaii.....	HI.....L.....	11,336	51,061	2,182	.....	.....3,953	3,297
13.	Idaho.....	ID.....L.....	2,408,313	2,271,246	1,095,331	1,420,400	946,167	651,821
14.	Illinois.....	IL.....L.....	1,119,812	1,699,184	646,021	332,825	547,598	758,578
15.	Indiana.....	IN.....L.....	5,869,867	5,844,311	4,963,359	5,590,177	2,700,287	2,516,457
16.	Iowa.....	IA.....L.....	61,592	103,858	3,948	12,806	12,693	16,315
17.	Kansas.....	KS.....L.....	85,279	260,955	24,049	34,847	31,875	70,716
18.	Kentucky.....	KY.....L.....	4,140,927	2,732,468	2,554,071	2,407,256	1,390,799	2,005,210
19.	Louisiana.....	LA.....L.....	157,644	1,134,062	185,419	167,590	396,510	453,249
20.	Maine.....	ME.....L.....	41,458	56,621	46,066	5,877	37,784	164,099
21.	Maryland.....	MD.....L.....	114,632	145,373	2,295	7,924	33,946	39,643
22.	Massachusetts.....	MA.....L.....	98,033	142,488	2,941	710	36,328	49,474
23.	Michigan.....	MI.....L.....	345,246	653,539	36,250	10,130	111,593	206,664
24.	Minnesota.....	MN.....L.....	192,421	486,581	24,921	36,249	47,265	96,367
25.	Mississippi.....	MS.....L.....	46,561	155,325	56,635	(7,202)	19,925	72,864
26.	Missouri.....	MO.....L.....	136,387	283,182	5,616	25,520	85,656	111,215
27.	Montana.....	MT.....L.....	(6,547)	50,256	2,967	4,889	12,372	16,758
28.	Nebraska.....	NE.....L.....	82,021	243,327	37,687	14,376	52,571	46,548
29.	Nevada.....	NV.....L.....	(7,518)	183,285	4,777	30,794	446,624	456,603
30.	New Hampshire.....	NH.....L.....	113,409	209,234	12,594	16,411	33,367	61,203
31.	New Jersey.....	NJ.....L.....	60,922,382	48,260,819	35,853,927	24,351,727	26,327,314	16,769,078
32.	New Mexico.....	NM.....L.....	31,640	46,386	5,348	(404,805)	10,280	9,127
33.	New York.....	NY.....L.....	228,212	9,759,257	10,119,727	20,445,347	13,406,095	19,179,803
34.	North Carolina.....	NC.....L.....	463,190	792,499	276,277	233,934	181,193	92,987
35.	North Dakota.....	ND.....L.....	6,929	37,449	.....	.....	.....7,804	9,662
36.	Ohio.....	OH.....L.....	13,439,315	13,153,512	7,851,943	11,141,710	6,241,717	6,468,545
37.	Oklahoma.....	OK.....L.....	32,562	188,456	603,111	433,836	144,489	1,108,117
38.	Oregon.....	OR.....L.....	20,018,459	17,624,116	12,510,805	10,504,272	8,486,072	8,563,630
39.	Pennsylvania.....	PA.....L.....	565,214	1,204,459	314,864	24,895	2,213,540	2,111,901
40.	Rhode Island.....	RI.....L.....	27,856,827	27,002,645	16,106,635	15,514,776	19,532,152	17,132,362
41.	South Carolina.....	SC.....L.....	453,612	683,716	4,123	42,005	29,561	34,279
42.	South Dakota.....	SD.....L.....	(430)	8,584	140,712	4,094	27,408	172,563
43.	Tennessee.....	TN.....L.....	10,674,736	5,901,575	4,681,948	3,655,281	2,690,773	1,283,679
44.	Texas.....	TX.....L.....	567,630	2,365,546	273,651	528,275	493,048	644,766
45.	Utah.....	UT.....L.....	24,700	213,504	13,882	(1,657)	44,011	70,185
46.	Vermont.....	VT.....L.....	63,873	89,746	.....	.....	.....3,311	2,842
47.	Virginia.....	VA.....L.....	280,479	499,645	132,700	31,312	74,493	63,465
48.	Washington.....	WA.....L.....	28,039,235	32,038,258	18,725,594	18,894,846	17,908,436	19,891,011
49.	West Virginia.....	WV.....L.....	883	(5,013)	(80)	72	27,066	27,104
50.	Wisconsin.....	WI.....L.....	192,601	492,192	29,662	41,006	107,243	60,489
51.	Wyoming.....	WY.....L.....	(945)	5,717	.....	.....8,252	20,226	12,997
52.	American Samoa.....	AS.....N.....	.....	.....	.....	.....	.....	.....
53.	Guam.....	GU.....N.....	.....	.....	.....	.....	.....	.....
54.	Puerto Rico.....	PR.....N.....	.....	.....	.....	.....	.....	.....
55.	US Virgin Islands.....	VI.....N.....	.....	.....	.....	.....	.....	.....
56.	Northern Mariana Islands.....	MP.....N.....	.....	.....	.....	.....	.....	.....
57.	Canada.....	CAN.....N.....	.....	.....	.....	.....	.....	.....
58.	Aggregate Other Alien.....	OT.....XXX.....	0	0	0	0	0	0
59.	Totals.....	(a).....51	210,298,528	199,415,454	129,747,702	123,100,052	118,698,551	109,603,446

DETAILS OF WRITE-INS

58001.	XXX.....	.....	.....	.....	.....	.....	.....
58002.	XXX.....	.....	.....	.....	.....	.....	.....
58003.	XXX.....	.....	.....	.....	.....	.....	.....
58998. Summary of remaining write-ins for Line 58 from overflow page....	XXX.....	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX.....	0	0	0	0	0	0

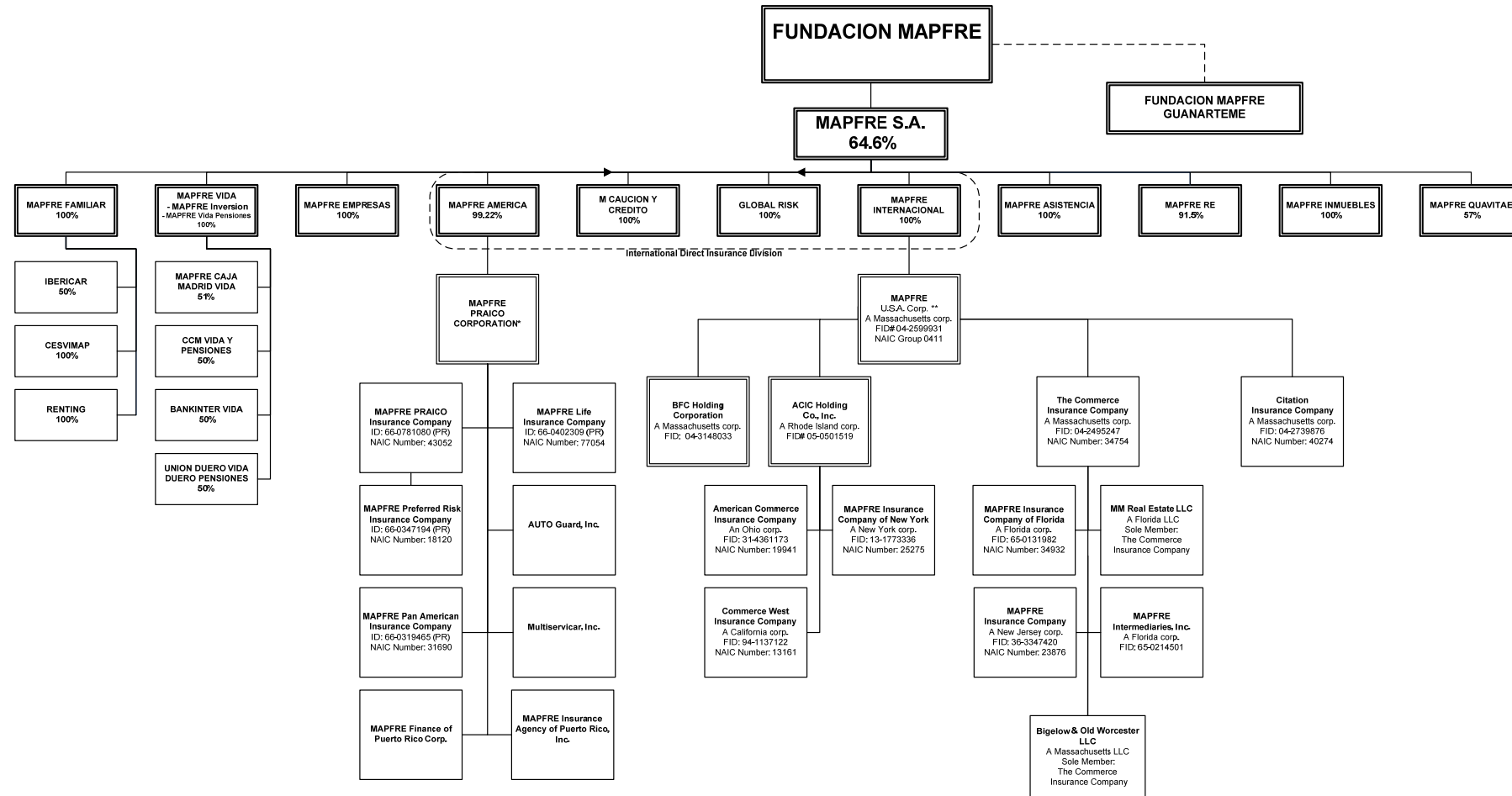
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

American Commerce Insurance Company

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



* All subsidiaries of MAPFRE PRAICO Corporation are 100% owned by their parent companies, except MAPFRE Preferred Risk Insurance Company which is 100% owned by MAPFRE PRAICO Insurance Company.

** All subsidiaries of MAPFRE U.S.A. Corp. are 100% owned by their parent companies, except ACIC Holding Co., Inc., which is 5% owned by AAA Southern New England and 0.06% owned by AAA Ohio Auto Club and AAA Oregon/Idaho each.

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Q12	Members													
		00000.....					FUNDACION MAPFRE.....	ESP.....	UIP.....					
		00000.....					FUNDACION MAPFRE GUANARTEME.....	ESP.....	NIA.....	FUNDACION MAPFRE.....	OWNERSHIP.....		FUNDACION MAPFRE.....	
		00000.....					MAPFRE S.A.....	ESP.....	UIP.....	FUNDACION MAPFRE.....	OWNERSHIP.....	...64.600	FUNDACION MAPFRE.....	
		00000.....					MAPFRE FAMILIAR.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					IBERICAR.....	ESP.....	NIA.....	MAPFRE FAMILIAR.....	OWNERSHIP.....	...50.000	FUNDACION MAPFRE.....	
		00000.....					CESVIMAP.....	ESP.....	NIA.....	MAPFRE FAMILIAR.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					RENTING.....	ESP.....	NIA.....	MAPFRE FAMILIAR.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					MAPFRE VIDA-MAPFRE INVERSION-MAPFRE VIDA PENSIONES	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					MAPFRE CAJA MADRID VIDA.....	ESP.....	NIA.....	MAPFRE VIDA-MAPFRE INVERSION-MAPFRE VIDA PENSIONES	OWNERSHIP.....	...51.000	FUNDACION MAPFRE.....	
		00000.....					CCM VIDA Y PESIONES.....	ESP.....	NIA.....	MAPFRE VIDA-MAPFRE INVERSION-MAPFRE VIDA PENSIONES	OWNERSHIP.....	...50.000	FUNDACION MAPFRE.....	
		00000.....					BANKINTER VIDA.....	ESP.....	NIA.....	MAPFRE VIDA-MAPFRE INVERSION-MAPFRE VIDA PENSIONES	OWNERSHIP.....	...50.000	FUNDACION MAPFRE.....	
		00000.....					UNION DUERO VIDA DUERO PENSIONES.....	ESP.....	NIA.....	MAPFRE VIDA-MAPFRE INVERSION-MAPFRE VIDA PENSIONES	OWNERSHIP.....	...50.000	FUNDACION MAPFRE.....	
		00000.....					MAPFRE EMPRESAS.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					MAPFRE AMERICA.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...99.220	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	00000.....	66-0781080			MAPFRE PRAICO CORPORATION.....	PRI.....	IA.....	MAPFRE AMERICA.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	43052.....	66-0470284			MAPFRE PRAICO INSURANCE COMPANY.....	PRI.....	IA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	18120.....	66-0347194			MAPFRE PREFERRED RISK INSURANCE COMPANY	PRI.....	IA.....	MAPFRE PRAICO INSURANCE COMPANY....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	31690.....	66-0319465			MAPFRE PAN AMERICAN INSURANCE COMPANY	PRI.....	IA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	00000.....	66-0391019			MAPFRE FINANCE OF PUERTO RICO CORP....	PRI.....	NIA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE INSURANCE GROUP.....	77054.....	66-0402309			MAPFRE LIFE INSURANCE COMPANY.....	PRI.....	IA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		MAPFRE INSURANCE GROUP.....	00000.....	66-0595402			AUTO GUARD, INC.....	PRI.....	NIA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		MAPFRE INSURANCE GROUP.....	00000.....	66-0638119			MULTISERVICAR, INC.....	PRI.....	NIA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		MAPFRE INSURANCE GROUP.....	00000.....	66-0621733			MAPFRE INSURANCE AGENCY OF PUERTO RICO, INC.	PRI.....	NIA.....	MAPFRE PRAICO CORPORATION.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					M CAUCION Y CREDITO.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					GLOBAL RISK.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		00000.....					MAPFRE INTERNACIONAL.....	ESP.....	UIP.....	MAPFRE S.A.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
	0411.....	MAPFRE U.S.A. CORP.....	00000.....	04-2599931			MAPFRE U.S.A. CORP.....	MA.....	UDP.....	MAPFRE INTERNACIONAL.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		MAPFRE U.S.A. CORP.....	00000.....	04-3148033			BFC HOLDING CORPORATION.....	MA.....	NIA.....	MAPFRE U.S.A. CORP.....	OWNERSHIP.....	...100.000	FUNDACION MAPFRE.....	
		MAPFRE U.S.A. CORP.....	00000.....	05-0501519			ACIC HOLDING CO., INC.....	RI.....	UDP.....	MAPFRE U.S.A. CORP.....	OWNERSHIP.....	...94.880	FUNDACION MAPFRE.....	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0411.....	MAPFRE U.S.A. CORP.....	19941.....	31-4361173	.....	.....	.....	AMERICAN COMMERCE INSURANCE COMPANY	OH.....	.....	ACIC HOLDING CO., INC.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	13161.....	94-1137122	.....	.....	.....	COMMERCE WEST INSURANCE COMPANY.....	CA.....	IA.....	ACIC HOLDING CO., INC.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	25275.....	13-1773336	.....	.....	.....	MAPFRE INSURANCE COMPANY OF NEW YORK	NY.....	IA.....	ACIC HOLDING CO., INC.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	34754.....	04-2495247	.....	.....	.....	THE COMMERCE INSURANCE COMPANY.....	MA.....	IA.....	MAPFRE U.S.A. CORP.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	34932.....	65-0131982	.....	.....	.....	MAPFRE INSURANCE COMPANY OF FLORIDA..	FL.....	IA.....	THE COMMERCE INSURANCE COMPANY.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	23876.....	36-3347420	.....	.....	.....	MAPFRE INSURANCE COMPANY.....	NJ.....	IA.....	THE COMMERCE INSURANCE COMPANY.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	MAPFRE U.S.A. CORP.....	00000.....	.....	.....	.....	.....	MM REAL ESTATE LLC.....	FL.....	NIA.....	THE COMMERCE INSURANCE COMPANY.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	MAPFRE U.S.A. CORP.....	00000.....	65-0214501	.....	.....	.....	MAPFRE INTERMEDIARIES, INC.....	FL.....	NIA.....	THE COMMERCE INSURANCE COMPANY.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	MAPFRE U.S.A. CORP.....	00000.....	04-2495247	.....	.....	.....	BIGELOW & OLD WORCESTER LLC.....	MA.....	NIA.....	THE COMMERCE INSURANCE COMPANY.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
0411.....	MAPFRE U.S.A. CORP.....	40274.....	04-2739876	.....	.....	.....	CITATION INSURANCE COMPANY.....	MA.....	IA.....	MAPFRE U.S.A. CORP.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	.....	00000.....	.....	.....	.....	.....	MAPFRE ASISTENCIA.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	.....	00000.....	.....	.....	.....	.....	MAPFRE RE.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP....	...91.500	FUNDACION MAPFRE.....	.....
.....	.....	00000.....	.....	.....	.....	.....	MAPFRE INMUEBLES.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP....	...100.000	FUNDACION MAPFRE.....	.....
.....	.....	00000.....	.....	.....	.....	.....	MAPFRE QUAVITAE.....	ESP.....	NIA.....	MAPFRE S.A.....	OWNERSHIP....	57.000	FUNDACION MAPFRE.....	.....

Asterisk	Explanation
*	MAPFRE PREFERRED RISK INSURANCE COMPANY IS 100% OWNED BY MAPFRE PRAICO INSURANCE COMPANY
**	ACIC HOLDING CO. INC. IS 5% OWNED BY AAA SOUTHERN NEW ENGLAND AND 0.06% OWNED BY AAA OHIO AUTO CLUB AND AAA OREGON / IDAHO EACH.

Q12.1

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	1,999,292	237,776	11.9	43.3
2. Allied lines.....	53,899	36,604	67.9	34.7
3. Farmowners multiple peril.....			0.0	
4. Homeowners multiple peril.....	58,486,830	32,383,711	55.4	53.3
5. Commercial multiple peril.....			0.0	
6. Mortgage guaranty.....			0.0	
8. Ocean marine.....			0.0	
9. Inland marine.....	142,733	46,448	32.5	43.5
10. Financial guaranty.....			0.0	
11.1. Medical professional liability - occurrence.....			0.0	
11.2. Medical professional liability - claims-made.....			0.0	
12. Earthquake.....			0.0	
13. Group accident and health.....	12,151	375	3.1	
14. Credit accident and health.....			0.0	
15. Other accident and health.....			0.0	
16. Workers' compensation.....			0.0	
17.1 Other liability-occurrence.....	2,723,420	13,754	0.5	0.9
17.2 Other liability-claims made.....			0.0	
17.3 Excess workers' compensation.....			0.0	
18.1 Products liability-occurrence.....			0.0	
18.2 Products liability-claims made.....			0.0	
19.1, 19.2 Private passenger auto liability.....	79,997,951	63,293,826	79.1	71.2
19.3, 19.4 Commercial auto liability.....			0.0	
21. Auto physical damage.....	41,419,740	23,958,147	57.8	58.6
22. Aircraft (all perils).....	5,878,529	4,738,318	80.6	39.8
23. Fidelity.....			0.0	
24. Surety.....			0.0	
26. Burglary and theft.....			0.0	
27. Boiler and machinery.....			0.0	
28. Credit.....			0.0	
29. International.....			0.0	
30. Warranty.....			0.0	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.0	
35. Totals.....	190,714,545	124,708,959	65.4	60.6
DETAILS OF WRITE-INS				
3401.			0.0	
3402.			0.0	
3403.			0.0	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.0	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	706,023	2,014,990	1,989,926
2. Allied lines.....	17,018	52,406	48,377
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....	23,398,175	65,573,374	56,185,140
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....	129,118	218,924	62,119
10. Financial guaranty.....			
11.1 Medical professional liability - occurrence.....			
11.2 Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....	14,001	19,414	
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1 Other liability-occurrence.....	2,370,252	7,120,651	10,273,791
17.2 Other liability-claims made.....			
17.3 Excess workers' compensation.....			
18.1 Products liability-occurrence.....			
18.2 Products liability-claims made.....			
19.1 19.2 Private passenger auto liability.....	30,296,603	87,658,112	80,567,869
19.3 19.4 Commercial auto liability.....			
21. Auto physical damage.....	16,459,869	46,674,005	40,250,280
22. Aircraft (all perils).....	(35,475)	966,652	10,037,952
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	73,355,584	210,298,528	199,415,454
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

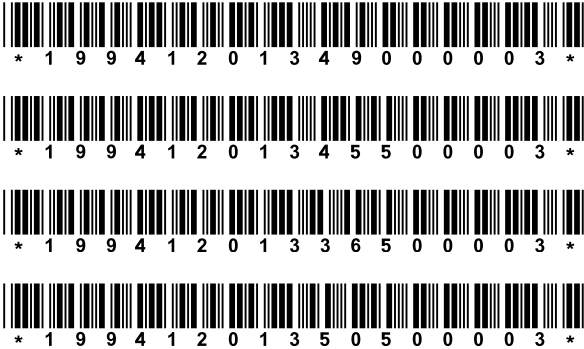
The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing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

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1.
2.
3.
4.

Bar Code:



American Commerce Insurance Company

Overflow Page for Write-Ins

Additional Write-ins for Assets:

	Current Statement Date			4 December 31, Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
2504. MISC ASSETS.....	2,804	.....	.....2,804	5,431
2505. SALE OF NY CREDITS.....	.....	.....	.....0	958,821
2506. PREMIUM TAX RECEIVABLE - GLOBAL.....	19,164	.....	.....19,164	12,076
2597. Summary of remaining write-ins for Line 25.....	21,968	0	21,968	976,328

American Commerce Insurance Company
SCHEDULE A - VERIFICATION
Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	1,724,127	1,850,907
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....	6,066	8,725
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other than temporary impairment recognized.....		
8. Deduct current year's depreciation.....	101,403	135,505
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	1,628,790	1,724,127
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	1,628,790	1,724,127

SCHEDULE B - VERIFICATION
Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other than temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

SCHEDULE BA - VERIFICATION
Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other than temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION
Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	169,110,027	180,082,866
2. Cost of bonds and stocks acquired.....	39,861,849	43,480,281
3. Accrual of discount.....	531,053	745,153
4. Unrealized valuation increase (decrease).....	(294,903)	508,807
5. Total gain (loss) on disposals.....	852,825	1,499,454
6. Deduct consideration for bonds and stocks disposed of.....	35,621,027	55,934,183
7. Deduct amortization of premium.....	571,963	784,576
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		487,775
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	173,867,861	169,110,027
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	173,867,861	169,110,027

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

Q3102

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	141,713,214	913,104	4,497,590	(1,015,040)	129,924,362	141,713,214	137,113,688	132,001,912
2. Class 2 (a).....	33,467,523		2,094,900	959,361	31,344,900	33,467,523	32,331,984	32,349,422
3. Class 3 (a).....	2,024,753			(1,833)	2,966,160	2,024,753	2,022,920	2,028,320
4. Class 4 (a).....			7,520	99,278			91,758	112,210
5. Class 5 (a).....	100,881			(100,881)	111,823	100,881		
6. Class 6 (a).....	130,526			(21,755)	210,350	130,526	108,771	219,408
7. Total Bonds.....	177,436,897	913,104	6,600,010	(80,870)	164,557,595	177,436,897	171,669,121	166,711,272
PREFERRED STOCK								
8. Class 1.....								
9. Class 2.....	1,612,815			(144,075)	1,673,400	1,612,815	1,468,740	1,617,800
10. Class 3.....	781,912			(51,912)	781,430	781,912	730,000	780,955
11. Class 4.....								
12. Class 5.....								
13. Class 6.....								
14. Total Preferred Stock.....	2,394,727	0	0	(195,987)	2,454,830	2,394,727	2,198,740	2,398,755
15. Total Bonds and Preferred Stock.....	179,831,624	913,104	6,600,010	(276,857)	167,012,425	179,831,624	173,867,861	169,110,027

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

Sch. DA-Pt 1
NONE

Sch. DA-Verification
NONE

Sch. DB-Pt A-Verification
NONE

Sch. DB-Pt B-Verification
NONE

Sch. DB-Pt C-Sn 1
NONE

Sch. DB-Pt C-Sn 2
NONE

Sch. DB-Verification
NONE

Sch. E-Verification
NONE

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Description of Property	City	State	Date Acquired	Name of Vendor	Actual Cost at Time of Acquisition	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Additional Investment Made After Acquisition
Acquired by Purchase								
THREE STORY BUILDING, 37,077 SQUARE FEET, LOCATED ON 6.002 ACRES OF LAND ON FOUR SEPERATE PARCELS	COLUMBUS.....	OH.....	09/05/2013	THE DOOR COMPANY.....	.....	.....	.....1,628,790	6,066
0199999. Totals.....					0	0	1,628,790	6,066
0399999. Totals.....					0	0	1,628,790	6,066

QE01

SCHEDULE A - PART 3

Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract "

1	Location		4	5	6	7	8	Change in Book/Adjusted Carrying Value Less Encumbrances					14	15	16	17	18	19	20
	2	3						9	10	11	12	13							
Description of Property	City	State	Disposal Date	Name of Purchaser	Actual Cost	Expended for Additions, Permanent Improvements and Changes in Encumbrances	Book/Adjusted Carrying Value Less Encumbrances Prior Year	Current Year's Depreciation	Other Than Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in B./A.C.V. (11 - 9 - 10)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Amounts Received During Year	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs, and Expenses Incurred

NONE

Sch. B-Pt 2
NONE

Sch. B-Pt 3
NONE

Sch. BA-Pt 2
NONE

Sch. BA-Pt 3
NONE

SCHEDULE D - PART 3

Show all Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Government									
912828 QY 9	U.S. TREASURY NOTE.....	.....	....07/29/2013	RW PRESSPRICH & CO.....	.....	.....417,094	400,000	4,475	1.....
05999999.	Total - Bonds - U.S. Government.....					417,094	400,000	4,475	XXX.....
Bonds - Industrial and Miscellaneous									
268648 AQ 5	EMC CORP.....	.....	...08/05/2013	RAYMOND JAMES.....	.....	.....496,010	500,000	2,282	1FE.....
38999999.	Total - Bonds - Industrial & Miscellaneous.....					496,010	500,000	2,282	XXX.....
83999997.	Total - Bonds - Part 3.....					913,104	900,000	6,757	XXX.....
83999999.	Total - Bonds.....					913,104	900,000	6,757	XXX.....
99999999.	Total - Bonds, Preferred and Common Stocks.....					913,104	XXX.....	6,757	XXX.....

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:.....0.

Sch. DB-Pt A-Sn 1
NONE

Sch. DB-Pt B-Sn 1
NONE

Sch. DB-Pt B-Sn 1B-Broker List
NONE

Sch. DB-Pt D-Sn 1
NONE

Sch. DB-Pt D-Sn 2
NONE

Sch. DL-Pt. 1
NONE

Sch. DL-Pt. 2
NONE

American Commerce Insurance Company
SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
MM: Fed Govn't.....	5800 Corporate Drive, Pittsburgh, PA 15237-7000.....		0.010		5,561	5,561	5,561	XXX..
MM: Fidelity Govt.....	500 Salem Street, Smithfield, RI 02917.....		0.010	91	1,170,218	2,145,166	4,591,320	XXX..
MM: Black Rock.....	One Financial Center, Boston, MA 02111.....		0.010		6,322	6,322	6,322	XXX..
Bank of New York.....	One Wall Street, NY, New York 10286.....		0.010	8	102,302	856,406	777,338	XXX..
Deutsche Bank.....	60 Wall Street, New York, NY 10005.....				2,292,291	1,851,800	1,194,699	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				2,618,241	1,506,881	2,030,819	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(148,352)	(146,076)	(140,637)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(839,589)	(872,674)	(929,038)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(1,043,992)	(966,358)	(910,333)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(40,923)	(45,922)	(37,987)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(7,674,737)	(7,982,157)	(7,604,282)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(450,265)	(515,330)	(491,635)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(400,142)	(203,695)	(28,371)	XXX..
JPMorgan Chase.....	100 E.Broad St, Columbus, OH 43215.....				(100,529)	(147,974)	(209,935)	XXX..
Bank of America.....	100 Federal Street, Boston, MA 02110.....				2,039,884	2,694,250	4,495,547	XXX..
Bank of America.....	100 Federal Street, Boston, MA 02110.....				46,296	85,959	146,502	XXX..
Bank of America.....	100 Federal Street, Boston, MA 02110.....				(490)	(115)	(115)	XXX..
0199999. Total Open Depositories.....	...XXX.....	...XXX.....	99	0	(2,417,904)	(1,727,956)	2,895,775	XXX..
0399999. Total Cash on Deposit.....	...XXX.....	...XXX.....	99	0	(2,417,904)	(1,727,956)	2,895,775	XXX..
0599999. Total Cash.....	...XXX.....	...XXX.....	99	0	(2,417,904)	(1,727,956)	2,895,775	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year

NONE