



QUARTERLY STATEMENT

As of June 30, 2014

of the Condition and Affairs of the

Club Insurance Company

NAIC Group Code.....	NAIC Company Code..... 10974	Employer's ID Number..... 31-1631404
(Current Period) (Prior Period)		
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... December 11, 1998	Commenced Business..... April 29, 1999	
Statutory Home Office	90 East Wilson Bridge Rd..... Worthington OH US 43085	
	(Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	90 East Wilson Bridge Rd..... Worthington OH US 43085	614-431-7889
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Mail Address	90 East Wilson Bridge Rd..... Worthington OH US 43085	
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	90 East Wilson Bridge Rd..... Worthington OH US 43085	614-431-7889
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address		
Statutory Statement Contact	Ronald Jay Carr	614-431-7805
	(Name)	(Area Code) (Telephone Number) (Extension)
	rcarr@aaaohio.com	614-431-7852
	(E-Mail Address)	(Fax Number)

OFFICERS

Name	Title	Name	Title
1. David Matthew McMullen	President	2. Thomas Wesley Keyes	Treasurer
3. Thomas Wesley Keyes	Secretary	4.	N/A

OTHER

DIRECTORS OR TRUSTEES

John Jeffery Bognaird	Charles Henderson Hire	John Edward McClain Jr	Thomas Joseph Eberly
Thomas Alan Dunlap	Sue Ann Fouche	Brian W Thomas	William Joseph Hafer
Mark Harry Shaw			

State of..... Ohio
County of..... Franklin

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)
David Matthew McMullen	Thomas Wesley Keyes	Thomas Wesley Keyes
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Treasurer	Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of _____	b. If no:	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

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.....	9,837,539		9,837,539	9,680,453
2. Stocks:				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....	3,166,382		3,166,382	3,038,103
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).....			.0	
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 (\$.....105,637), cash equivalents (\$.....0) and short-term investments (\$.....586,941).....	692,578		692,578	619,796
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).....	13,696,499	.0	13,696,499	13,338,352
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....	94,134		94,134	83,551
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	93,061		93,061	151,823
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.....			.0	
16.2 Funds held by or deposited with reinsured companies.....			.0	
16.3 Other amounts receivable under reinsurance contracts.....			.0	285
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.....			.0	
19. Guaranty funds receivable or on deposit.....			.0	
20. Electronic data processing equipment and software.....			.0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			.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.....	.0	.0	.0	.0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	13,883,694	.0	13,883,694	13,574,011
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. Total (Lines 26 and 27).....	13,883,694	.0	13,883,694	13,574,011

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.			.0	
2502.			.0	
2503.			.0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	.0	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.0	.0	.0	.0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$....36,940).....	64,690	86,847
2. Reinsurance payable on paid losses and loss adjustment expenses.....		
3. Loss adjustment expenses.....		
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	12,202	27,557
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$......0 on realized capital gains (losses)).....		
7.2 Net deferred tax liability.....	211,117	209,088
8. Borrowed money \$......0 and interest thereon \$......0.....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$......0 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.....	647,334	664,622
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....		
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.....	74,550	107,140
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.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	1,009,893	1,095,254
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	1,009,893	1,095,254
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	1,000,000	1,000,000
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.....	2,039,943	2,039,943
35. Unassigned funds (surplus).....	9,833,858	9,438,814
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).....	12,873,801	12,478,757
38. Totals (Page 2, Line 28, Col. 3).....	13,883,694	13,574,011

DETAILS OF WRITE-INS

2501.		
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).....	0	0
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

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$620,502).....	637,828	670,344	1,320,791
1.2 Assumed..... (written \$0).....			
1.3 Ceded..... (written \$0).....			
1.4 Net..... (written \$620,502).....	637,828	670,344	1,320,791
DEDUCTIONS:			
2. Losses incurred (current accident year \$36,553):			
2.1 Direct.....	28,879	97,825	156,514
2.2 Assumed.....		(2,165)	(10,714)
2.3 Ceded.....			
2.4 Net.....	28,879	95,660	145,800
3. Loss adjustment expenses incurred.....		460	116,345
4. Other underwriting expenses incurred.....	393,077	378,165	626,103
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	421,956	474,285	888,248
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	215,872	196,059	432,543
INVESTMENT INCOME			
9. Net investment income earned.....	115,865	111,137	269,247
10. Net realized capital gains (losses) less capital gains tax of \$0.....	264,251	207,282	228,756
11. Net investment gain (loss) (Lines 9 + 10).....	380,116	318,419	498,003
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.....			
14. Aggregate write-ins for miscellaneous income.....	0	0	0
15. Total other income (Lines 12 through 14).....	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	595,988	514,478	930,546
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).....	595,988	514,478	930,546
19. Federal and foreign income taxes incurred.....	199,000	172,000	313,000
20. Net income (Line 18 minus Line 19) (to Line 22).....	396,988	342,478	617,546
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	12,478,757	12,595,511	12,595,511
22. Net income (from Line 20).....	396,988	342,478	617,546
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$0.....	85	79,283	335,571
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(2,029)	(29,956)	(118,094)
27. Change in nonadmitted assets.....			
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.....			(1)
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			981
35. Dividends to stockholders.....			(952,757)
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	395,044	391,805	(116,754)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	12,873,801	12,987,316	12,478,757
DETAILS OF WRITE-INS			
0501.			
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	0	0
1401. Miscellaneous Non Operating Income.....			
1402.			
1403.			
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).....	0	0	0
3701. Lines 23 and 29 from 2000 Annual Statement.....			
3702.			
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).....	0	0	0

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.....	679,302	692,389	1,279,249
2. Net investment income.....	157,055	138,475	331,617
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	836,357	830,864	1,610,866
5. Benefit and loss related payments.....	50,751	77,910	192,799
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	408,432	389,490	740,840
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses).....	199,000	172,000	313,000
10. Total (Lines 5 through 9).....	658,183	639,400	1,246,639
11. Net cash from operations (Line 4 minus Line 10).....	178,174	191,464	364,227
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	4,386,938	6,836,114	10,508,081
12.2 Stocks.....	863,920	645,720	866,890
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).....	5,250,858	7,481,834	11,374,971
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	4,568,749	6,845,513	10,272,092
13.2 Stocks.....	754,912	219,394	655,144
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	5,323,661	7,064,907	10,927,236
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(72,803)	416,927	447,735
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.....			(1)
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			952,757
16.6 Other cash provided (applied).....	(32,589)	(46,092)	(5,874)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(32,589)	(46,092)	(958,632)
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).....	72,782	562,299	(146,670)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	619,796	766,466	766,466
19.2 End of period (Line 18 plus Line 19.1).....	692,578	1,328,765	619,796

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

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices

	State of Domicile	2014	2013
NET INCOME			
(1) Club Insurance Company state basis (Page 4, Line 20, Columns 1 & 3)	OH	396,988	617,546
(2) State Prescribed Practices that increase/decrease NAIC SAP			
(3) State Permitted Practices that increase/decrease NAIC SAP			
(4) NAIC SAP (1 – 2 – 3 = 4)	OH	396,988	617,546
SURPLUS			
(5) Club Insurance Company state basis (Page 3, line 37, Columns 1 & 2)	OH	12,873,801	12,478,757
(6) State Prescribed Practices that increase/decrease NAIC SAP			
(7) State Permitted Practices that increase/decrease NAIC SAP			
(8) NAIC SAP (5 – 6 – 7 = 8)	OH	12,873,801	12,478,757

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) Not Applicable

		1	2	3
(2)		Amortized Cost Basis Before Other-than-Temporary Impairment	Other-than-Temporary Impairment Recognized in Loss	Fair Value 1 – 2
OTTI recognized 1 st Quarter				
a.	Intent to sell			
b.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
c.	Total 1 st Quarter			
OTTI recognized 2 nd Quarter				
d.	Intent to sell			
e.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
f.	Total 2 nd Quarter			
OTTI recognized 3 rd Quarter				
g.	Intent to sell			
h.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
i.	Total 4 th Quarter			
OTTI recognized 4 th Quarter				
j.	Intent to sell			
k.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
l.	Total 4 th Quarter			
m.	Annual aggregate total	XXX		XXX

(3) Recognized OTTI securities

CUSIP	Book/Adjusted Carrying Value Amortized Cost	Present Value of Projected Cash Flows	Recognized Other-Than-Temporary	Amortized Cost After Other-Than-Te	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
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NOTES TO FINANCIAL STATEMENTS

	Before Current Period OTTI		Impairment	mporary Impairment		
Total						

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.	The aggregate amount of unrealized losses:	1.	Less than 12 Months	
		2.	12 Months or Longer	
b.	The aggregate related fair value of securities with unrealized losses:	1.	Less than12 Months	
		2.	12 Months or Longer	

E. Repurchase Agreements and/or Securities Lending Transactions

(3) Collateral Received

b. The fair value of that collateral and of the portion of that collateral that it has sold or replledged

I. Working Capital Finance Investments

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

		Book/Adjusted Carrying Value
(a)	Up to 180 Days	
(b)	181 to 365 Days	
(c)	Total	

(3) Not Applicable

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

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

B. FHLB (Federal Home Loan Bank) Agreements

(1) Not Applicable

(2) a. FHLB Capital Stock – Aggregate Totals

1. Current Year

		1 Total 2 + 3	2 General Account	3 Protected Cell Accounts
(a)	Membership Stock – Class A			
(b)	Membership Stock – Class B			
(c)	Activity Stock			
(d)	Excess Stock			
(e)	Aggregate Total			
(f)	Actual or estimated borrowing capacity as determined by the insurer		XXX	XXX

2. Prior Year

		1 Total 2 + 3	2 General Account	3 Protected Cell Accounts
(a)	Membership Stock – Class A			
(b)	Membership Stock – Class B			

NOTES TO FINANCIAL STATEMENTS

		1 Total 2 + 3	2 General Account	3 Protected Cell Accounts
(c)	Activity Stock			
(d)	Excess Stock			
(e)	Aggregate Total			
(f)	Actual or estimated borrowing capacity as determined by the insurer		XXX	XXX

b. Membership Stock (Class A and B) Eligible for Redemption

		Current Period Total	Not Eligible for Redemption	Less Than 6 Months	6 Months to Less than 1 Year	1 to Less than 3 Years	3 to 5 Years
1.	Class A						
2.	Class B						

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

1. Current Period Total General and Protected Cell Accounts

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged			

2. Current Period General Account

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged			

3. Current Period Protected Cell Accounts

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged			

4. Prior Year Total General and Protected Cell Accounts

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged			

b. Maximum Amount Pledged During Reporting Period

1. Current Period Total General and Protected Cell Accounts

	Fair Value	Carrying Value	Amount of Borrowed at Time of Maximum Collateral
Total Collateral Pledged			

2. Current Period General Account

	Fair Value	Carrying Value	Amount of Borrowed at Time of Maximum Collateral
Total Collateral Pledged			

3. Current Period Protected Cell Accounts

	Fair Value	Carrying Value	Amount of Borrowed at Time of Maximum Collateral
Total Collateral Pledged			

4. Prior Year Total General and Protected Cell Accounts

	Fair Value	Carrying Value	Amount of Borrowed at Time of Maximum Collateral
Total Collateral Pledged			

(4) Borrowing from FHLB

a. Amount as of the Reporting Date

1. Current Year

		1 Total 2 + 3	2 General Account	3 Protected Cell Account	4 Funding Agreements Established
(a)	Debt				
(b)	Funding Agreements				
(c)	Other				
(d)	Aggregate Total				

2. Prior Year-end

		1 Total 2 + 3	2 General Account	3 Protected Cell Account	4 Funding Agreements Established
(a)	Debt				
(b)	Funding Agreements				
(c)	Other				
(d)	Aggregate Total				

b. Maximum Amount During Reporting Period (Current Year)

		1 Total 2 + 3	2 General Account	3 Protected Cell Account
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NOTES TO FINANCIAL STATEMENTS

1.	Debt			
2.	Funding Agreements			
3.	Other			
4.	Aggregate Total			

c.	FHLB Prepayment Obligations	
		Does the company have prepayment obligations under the following arrangements?
1.	Debt	
2.	Funding Agreements	
3.	Other	

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

A. Defined Benefit Plan

- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable

(4)	Components of net periodic benefit cost		Pension Benefits		Postretirement Benefits		Postemployment	
			2014	2013	2014	2013	2014	2013
	a.	Service cost						
	b.	Interest cost						
	c.	Expected return on plan assets						
	d.	Transition asset or obligation						
	e.	Gains and losses						
	f.	Prior service cost or credit						
	g.	Gain or loss recognized due to a settlements curtailment						
	h.	Total net periodic benefit cost						

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

B. Transfer and Servicing of Financial Assets

- (2) Not Applicable
- b. Not Applicable
- (4) Not Applicable
- a. Not Applicable
- b. Not Applicable

C. Wash Sales

- (1) Not Applicable
- (2) The details by NAIC designation 3 or below, or unrated of securities sold during the current period, 2014 and reacquired within 30 days of the sale date are:

NOTES TO FINANCIAL STATEMENTS

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)

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

A.

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
Bonds US Government	2,490,889			2,490,889
Bonds US Government Agencies	2,530,686			2,530,686
Bonds Industrial & Misc	3,228,879	1,723,566		4,952,445
Stocks (Publicly Traded)	1,988,548			1,988,548
Stocks (Privately Held)	269,472			269,472
Mutual Funds	908,362			908,362
Total	11,416,836	1,723,566		13,140,402

Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
Total				

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

	Beginning Balance at Period	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at Period
a. Assets										
Total										

	Beginning Balance at Period	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at Period
b. Liabilities										
Total										

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

B. Not Applicable

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Total						

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
		0.000		
Total				

Note 21 - Other Items

G. Offsetting and Netting of Assets and Liabilities

I. Risk Sharing Provisions of the Affordable Care Act

(1) Permanent Risk Adjustment Program

Assets	Amount
a. Premium adjustments receivable	\$
Liabilities	
b. Risk adjustment user fees payable	\$

NOTES TO FINANCIAL STATEMENTS

c.	Premium adjustments payable	\$
Operations (Revenue & Expense)		
d.	Premium for accident and health contracts (written/collected)	\$
(2)	Transitional Reinsurance Program	
Assets		
a.	Amounts recoverable for claims paid	\$
b.	Amounts recoverable for claims unpaid	\$
c.	Amounts receivable relating to uninsured plans	\$
Liabilities		
d.	Claims unpaid-ceded	\$
e.	Contributions payable-not reported as ceded premium	\$
f.	Ceded reinsurance premiums payable	\$
g.	Liability for amounts held under uninsured plans	\$
Operations (Revenue & Expense)		
h.	Ceded reinsurance premiums	\$
i.	Reinsurance recoveries	\$
j.	Contributions-not reported as ceded premium	\$
(3)	Temporary Risk Corridors Program	
Assets		
a.	Accrued retrospective premium	\$
Liabilities		
b.	Reserve for rate credits or policy experience rating refunds	\$
Operations (Revenue & Expense)		
c.	Net premium income (paid/received)	\$
d.	Change in reserves for rate credits	\$
(4)	Have there been any material re-estimations and/or impairments for the reporting period	No

We plan to stop writing policies as of 10/1/14. All policies writen before that date will remain in effect through their normal effective term. Most policies will be transfered to other insurance companies so that policyholders will not have a gap in coverage. We expect the complete wind down to take at least two years to complete. We plan to pay a \$9.5 million special dividend to the parent with the remainder of funds to remain in CIC until final claims are paid. We meet with the Ohio Department of Insurance about this plan on March 26, 2014.

Note 22 - Events Subsequent

No significant change.

Note 23 - Reinsurance

No significant change.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

F.	Risk Sharing Provisions of the Affordable Care Act	
(1)	Permanent Risk Adjustment Program	
Assets		Amount
a.	Premium adjustments receivable	\$
Liabilities		
b.	Risk adjustment user fees payable	\$
c.	Premium adjustments payable	\$
Operations (Revenue & Expense)		
d.	Premium for accident and health contracts (written/collected)	\$
(2)	Transitional Reinsurance Program	
Assets		
a.	Amounts recoverable for claims paid	\$
b.	Amounts recoverable for claims unpaid	\$
c.	Amounts receivable relating to uninsured plans	\$
Liabilities		
d.	Claims unpaid-ceded	\$
e.	Contributions payable-not reported as ceded premium	\$
f.	Ceded reinsurance premiums payable	\$
g.	Liability for amounts held under uninsured plans	\$
Operations (Revenue & Expense)		
h.	Ceded reinsurance premiums	\$
i.	Reinsurance recoveries	\$
j.	Contributions-not reported as ceded premium	\$
(3)	Temporary Risk Corridors Program	

NOTES TO FINANCIAL STATEMENTS

Assets	
a. Accrued retrospective premium	\$
Liabilities	
b. Reserve for rate credits or policy experience rating refunds	\$
Operations (Revenue & Expense)	
c. Net premium income (paid/received)	\$
d. Change in reserves for rate credits	\$

(4) Have there been any material re-estimations and/or impairments for the reporting period **No**

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

No significant change.

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. Schedule of Insured Financial Obligations at the End of the Period:

		Surveillance Categories				
		A	B	C	D	Total
1.	Number of policies					
2.	Remaining weighted average contract period (in years)					
3.	Insured contractual payments outstanding:					
	a. Principal					
	b. Interest					
	c. Total					
4.	Gross claim liability					
Less						
5.	a. Gross potential recoveries					
	b. Discount, net					
6.	Net claim liability					
7.	Unearned premium revenue					
8.	Reinsurance recoverables					

NOTES TO FINANCIAL STATEMENTS

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 [☒ X]

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 [☒ X]

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.

Yes [☒ X]

No [☐]

3.2

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

Yes [☐]

No [☒ X]

3.3

If the response to 3.2 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 [☒ X]

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 [☒ X]

N/A [☐]

6.1

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

.....12/31/2009.....

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.

.....12/31/2009.....

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).

.....7/13/2010.....

6.4

By what department or departments?

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 [☒ X]

6.6

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

Yes [☒ X]

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 [☒ X]

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 [☒ X]

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 [☒ X]

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 [☒ X]

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 [☒ X]

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 [☒ X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

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 [X] No []

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

\$.....93,061

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 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter 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?

Yes [] No []

If no, attach a description with this statement.

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 reported 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 Name of Custodian(s)	2 Custodian Address
Fidelity Investments	PO Box 77001, Cincinnati, OH 45277

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 Name(s)	2 Location(s)	3 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 Old Custodian	2 New Custodian	3 Date of Change	4 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 Central Registration Depository	2 Name(s)	3 Address
Manning & Napier Advisors Inc	Kevin Kale	6099 Riverside Dr, Ste 207, Columbus, OH 43017

PART 1 - INVESTMENT

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:

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 [] N/A [X]

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

5.

Operating Percentages:

5.1 A&H loss percent

4.5 %

5.2 A&H cost containment percent

0.0 %

5.3 A&H expense percent excluding cost containment expenses

62.6 %

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 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
------------------------------	-----------------------	--------------------------------	--------------------------------------	-------------------------------	---	---

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

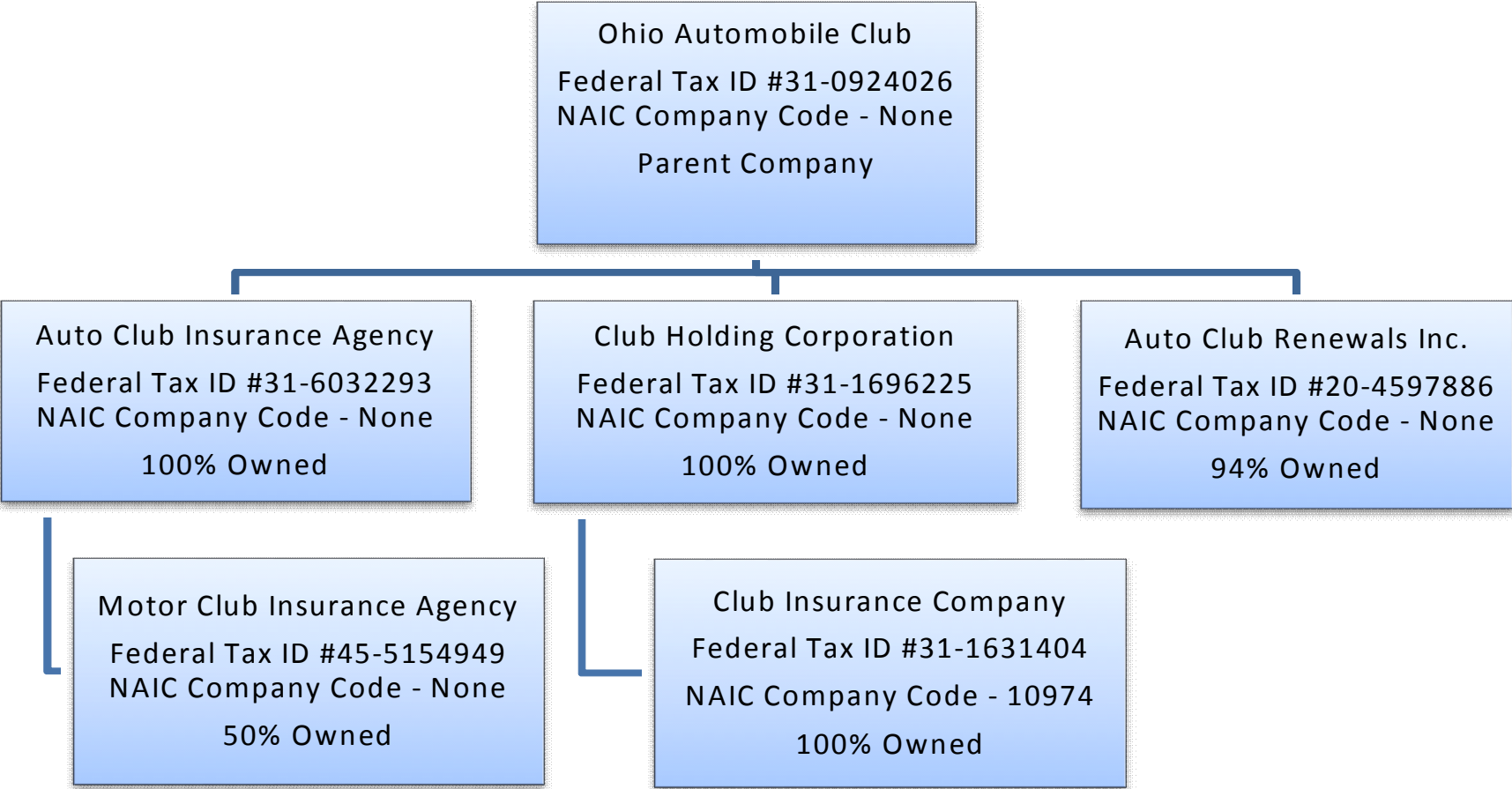
States, Etc.		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		Active Status	2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1.	Alabama.....AL	.N.						
2.	Alaska.....AK	.N.						
3.	Arizona.....AZ	.N.						
4.	Arkansas.....AR	.N.						
5.	California.....CA	.N.						
6.	Colorado.....CO	.N.						
7.	Connecticut.....CT	.N.						
8.	Delaware.....DE	.N.						
9.	District of Columbia.....DC	.N.						
10.	Florida.....FL	.N.						
11.	Georgia.....GA	.N.						
12.	Hawaii.....HI	.N.						
13.	Idaho.....ID	.N.						
14.	Illinois.....IL	.N.						
15.	Indiana.....IN	.N.						
16.	Iowa.....IA	.N.						
17.	Kansas.....KS	.N.						
18.	Kentucky.....KY	.N.						
19.	Louisiana.....LA	.N.						
20.	Maine.....ME	.N.						
21.	Maryland.....MD	.N.						
22.	Massachusetts.....MA	.N.						
23.	Michigan.....MI	.N.						
24.	Minnesota.....MN	.N.						
25.	Mississippi.....MS	.N.						
26.	Missouri.....MO	.N.						
27.	Montana.....MT	.N.						
28.	Nebraska.....NE	.N.						
29.	Nevada.....NV	.N.						
30.	New Hampshire.....NH	.N.						
31.	New Jersey.....NJ	.N.						
32.	New Mexico.....NM	.N.						
33.	New York.....NY	.N.						
34.	North Carolina.....NC	.N.						
35.	North Dakota.....ND	.N.						
36.	Ohio.....OH	.L.	620,502	635,530	51,036	77,140	(22,157)	20,685
37.	Oklahoma.....OK	.N.						
38.	Oregon.....OR	.N.						
39.	Pennsylvania.....PA	.N.						
40.	Rhode Island.....RI	.N.						
41.	South Carolina.....SC	.N.						
42.	South Dakota.....SD	.N.						
43.	Tennessee.....TN	.N.						
44.	Texas.....TX	.N.						
45.	Utah.....UT	.N.						
46.	Vermont.....VT	.N.						
47.	Virginia.....VA	.N.						
48.	Washington.....WA	.N.						
49.	West Virginia.....WV	.N.						
50.	Wisconsin.....WI	.N.						
51.	Wyoming.....WY	.N.						
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).....1		620,502	635,530	51,036	77,140	(22,157)	20,685

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.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
			31-0924026				The Ohio Automobile Club.....	OH.....	UIP.....	Ohio Automobile Club Directors.....	Board of Directors		Ohio Automobile Club Directors.....	
			31-6032293				Automobile Club Insurance Agency.....	OH.....	NIA.....	The Ohio Automobile Club.....	Ownership.....	...100.000	Ohio Automobile Club Directors.....	
			20-4597886				Auto Club Renewals.....	OH.....	NIA.....	The Ohio Automobile Club.....	Ownership.....	...96.000	Ohio Automobile Club Directors.....	
			45-5154949				Motor Club Insurance Agency.....	OH.....	NIA.....	Automobile Club Insurance Agency.....	Ownership.....	...50.000	Ohio Automobile Club Directors/John Smith.....	
			31-1696225				Club Holding Corporation.....	OH.....	UDP.....	The Ohio Automobile Club.....	Ownership.....	...100.000	Ohio Automobile Club Directors.....	
		10974.....	31-1631404				Club Insurance Company.....	OH.....	IA.....	Club Holding Corporation.....	Ownership.....	...100.000	Ohio Automobile Club Directors.....	

Q12

Asterisk	Explanation

NONE

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.0	
2. Allied lines.....			0.0	
3. Farmowners multiple peril.....			0.0	
4. Homeowners multiple peril.....			0.0	
5. Commercial multiple peril.....			0.0	
6. Mortgage guaranty.....			0.0	
8. Ocean marine.....			0.0	
9. Inland marine.....			0.0	
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.....	637,828	28,879	4.5	14.6
14. Credit accident and health.....			0.0	
15. Other accident and health.....			0.0	
16. Workers' compensation.....			0.0	
17.1 Other liability-occurrence.....			0.0	
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.....			0.0	
19.3, 19.4 Commercial auto liability.....			0.0	
21. Auto physical damage.....			0.0	
22. Aircraft (all perils).....			0.0	
23. Fidelity.....			0.0	
24. Surety.....			0.0	
26. Burglary and theft.....			0.0	
27. Boiler and machinery.....			0.0	
28. Credit.....			0.0	
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.....	637,828	28,879	4.5	14.6
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.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1 Medical professional liability - occurrence.....			
11.2 Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....	323,282	620,502	635,530
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1 Other liability-occurrence.....			
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.....			
19.3 19.4 Commercial auto liability.....			
21. Auto physical damage.....			
22. Aircraft (all perils).....			
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.....	323,282	620,502	635,530
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?	YES

Explanation:

1.
2.
3.
4.

Bar Code:



Club Insurance Company
Overflow Page for Write-Ins

NONE

Club 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.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
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.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

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.....	12,718,555	12,672,782
2. Cost of bonds and stocks acquired.....	5,323,661	10,927,236
3. Accrual of discount.....	4,983	10,748
4. Unrealized valuation increase (decrease).....	85	335,569
5. Total gain (loss) on disposals.....	249,600	228,755
6. Deduct consideration for bonds and stocks disposed of.....	5,250,858	11,374,971
7. Deduct amortization of premium.....	42,105	81,564
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	13,003,921	12,718,555
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	13,003,921	12,718,555

SCHEDULE D - PART 1B

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

	1	2	3	4	5	6	7	8
NAIC Designation	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. NAIC 1 (a).....	7,985,318	2,100,800	1,926,572	(6,849)	7,985,318	8,152,696		8,292,314
2. NAIC 2 (a).....	1,864,405	164,306	333,679	(10,189)	1,864,405	1,684,843		1,388,139
3. NAIC 3 (a).....								
4. NAIC 4 (a).....								
5. NAIC 5 (a).....								
6. NAIC 6 (a).....								
7. Total Bonds.....	9,849,723	2,265,106	2,260,251	(17,038)	9,849,723	9,837,539	0	9,680,453
PREFERRED STOCK								
8. NAIC 1.....								
9. NAIC 2.....								
10. NAIC 3.....								
11. NAIC 4.....								
12. NAIC 5.....								
13. NAIC 6.....								
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	9,849,723	2,265,106	2,260,251	(17,038)	9,849,723	9,837,539	0	9,680,453

(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.

QSI02

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	586,941	XXX.....	586,941	26	.....

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	548,509	681,271
2. Cost of short-term investments acquired.....	5,428,545	12,550,977
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	5,390,113	12,683,739
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	586,941	548,509
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	586,941	548,509

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

Sch. A-Pt 2
NONE

Sch. A-Pt 3
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	WH	9	US Treasury Note.....		...05/15/2014	FBCO.....				137,112	137,000		1.....
912828	WH	9	US Treasury Note.....		...06/03/2014	GSCO.....				186,755	186,000		1.....
912828	WH	9	US Treasury Note.....		...06/20/2014	BOFA.....				344,779	345,000		1.....
912828	C6	5	US Treasury Note.....		...06/26/2014	2467.....				97,077	97,000		1.....
0599999. Total Bonds - U.S Government.....										765,723	765,000	0	XXX.....
Bonds - U.S. Special Revenue and Special Assessment													
3138XQ	DQ	1	FNMA.....		...05/12/2014	CHSI.....				243,250	230,345	282	1.....
3138XQ	DQ	1	FNMA.....		...05/12/2014	CHSI.....				655	655		1.....
3138XR	YE	3	FNMA.....		...06/30/2014	NMRA.....				253,323	246,000	694	1.....
3199999. Total Bonds - U.S. Special Revenue and Special Assessment.....										497,228	477,000	976	XXX.....
Bonds - Industrial and Miscellaneous													
035242	AE	6	Anheuser Busch Inbve.....	F.....	...04/16/2014	CHSI.....				163,797	162,000	764	1.....
35671D	AZ	8	Freport-McMoran Copper.....		...04/28/2014	CHSI.....				164,306	168,000	778	2.....
46625H	JH	4	JP Morgan Chase.....		...04/15/2014	CHSI.....				162,710	166,000	1,180	1.....
693476	BH	5	PNC Funding Corp.....		...05/05/2014	MLCO.....				20,514	20,000	175	1.....
693476	BH	5	PNC Funding Corp.....		...05/05/2014	BKCM.....				87,120	85,000	745	1.....
693476	BH	5	PNC Funding Corp.....		...06/03/2014	FBCO.....				21,493	21,000	243	1.....
693476	BH	5	PNC Funding Corp.....		...06/04/2014	PERT.....				33,761	33,000	385	1.....
74432Q	BM	6	Prudential Finl.....		...04/16/2014	WCHV.....				185,318	161,000	2,764	1.....
94974B	FG	0	Wells Fargo.....		...04/28/2014	CHSI.....				163,136	164,000	697	1.....
3899999. Total Bonds - Industrial and Miscellaneous.....										1,002,155	980,000	7,731	XXX.....
8399997. Total Bonds - Part 3.....										2,265,106	2,222,000	8,707	XXX.....
8399999. Total Bonds.....										2,265,106	2,222,000	8,707	XXX.....
Common Stocks - Industrial and Miscellaneous													
00164V	10	3	AMC Networks Inc.....		...06/06/2014	Fidelity.....			470.000	28,586	XXX.....		L.....
023135	10	6	Amazon.com Inc.....		...04/09/2014	Fidelity.....			90.000	28,847	XXX.....		L.....
037604	10	5	Apollo Education Group.....		...04/02/2014	Fidelity.....			700.000	23,239	XXX.....		L.....
156782	10	4	Cerner Corp.....		...06/18/2014	Fidelity.....			490.000	25,928	XXX.....		L.....
30219G	10	8	Express Scripts.....		...04/22/2014	Fidelity.....			330.000	24,153	XXX.....		L.....
526057	10	4	Lennar Corp.....		...04/23/2014	Fidelity.....			310.000	11,862	XXX.....		L.....
57636Q	10	4	Mastercard Inc.....		...05/05/2014	Fidelity.....			240.000	17,480	XXX.....		L.....
61945C	10	3	Mosaic Co.....		...04/07/2014	Fidelity.....			760.000	37,592	XXX.....		L.....
741503	40	3	Peabody Energy Corp.....		...05/13/2014	Fidelity.....			340.000	6,258	XXX.....		L.....
N72482	10	7	Priceline Group Inc.....		...06/13/2014	Fidelity.....			30.000	36,714	XXX.....		L.....
92826C	83	9	VISA Inc.....		...05/05/2014	Fidelity.....			90.000	18,244	XXX.....		L.....
962166	10	4	Weyerhaeuser Co.....		...04/03/2014	Fidelity.....			810.000	23,604	XXX.....		L.....
9099999. Total Common Stocks - Industrial and Miscellaneous.....										282,507	XXX.....	0	XXX.....
Common Stocks - Mutual Funds													
56382R	30	6	M & N Dynamic.....		...05/23/2014	Fidelity.....			2,716.348	25,941	XXX.....		L.....

QE04

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)
301722 44 3	M & N Ohio Tax Exempt.....		...06/16/2014	Fidelity.....	19.686	209	XXX.....		L.....
92999999.	Total Common Stocks - Mutual Funds.....					26,150	XXX.....	0	XXX.....
97999997.	Total Common Stocks - Part 3.....					308,657	XXX.....	0	XXX.....
97999999.	Total Common Stocks.....					308,657	XXX.....	0	XXX.....
98999999.	Total Preferred and Common Stocks.....					308,657	XXX.....	0	XXX.....
99999999.	Total Bonds, Preferred and Common Stocks.....					2,573,763	XXX.....	8,707	XXX.....

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

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value At Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Desig- nation or Market Indicator (a)
563821 79 2	M & N Life Sciences.....		05/23/2014	Fidelity.....	328,580	4,068	XXX.....	4,065	.....	.....	.....	.....	.....0	.....	.....4,065	.....	.....4	4	.....	.....XXX...	L.....
9299999.	Total Common Stocks - Mutual Funds.....					18,083	XXX.....	18,260	14,580	(385)	0	0	(385)	0	18,260	0	(176)	(176)	0	XXX...	..XXX...
9799997	Total Common Stocks - Part 4.....					364,670	XXX.....	248,790	286,608	(69,088)	0	0	(69,088)	0	248,790	0	115,883	115,883	894	XXX...	..XXX...
9799999.	Total Common Stocks.....					364,670	XXX.....	248,790	286,608	(69,088)	0	0	(69,088)	0	248,790	0	115,883	115,883	894	XXX...	..XXX...
9899999.	Total Preferred and Common Stocks.....					364,670	XXX.....	248,790	286,608	(69,088)	0	0	(69,088)	0	248,790	0	115,883	115,883	894	XXX...	..XXX...
9999999.	Total Bonds, Preferred and Common Stocks.....					2,624,921	XXX.....	1,359,449	1,610,549	(69,088)	(4,908)	0	(73,996)	0	2,508,622	0	116,268	116,268	30,592	XXX...	..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 A-Sn 1-Footer A
NONE

Sch. DB-Pt A-Sn 1-Footer B
NONE

Sch. DB-Pt B-Sn 1
NONE

Sch. DB-Pt B-Sn 1-Footer A
NONE

Sch. DB-Pt B-Sn 1-Footer B
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

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
Huntington National Bank..... Columbus, OH.....					73,464	74,370	105,637	XXX..
0199999. Total Open Depositories.....	XXX	XXX	0	0	73,464	74,370	105,637	XXX..
0399999. Total Cash on Deposit.....	XXX	XXX	0	0	73,464	74,370	105,637	XXX..
0599999. Total Cash.....	XXX	XXX	0	0	73,464	74,370	105,637	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



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For the Period Ended June 30, 2014

NAIC Group Code.....0

Company Name: Club Insurance Company

NAIC Company Code.....10974

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

1 Direct Written Premiums	2 Direct Earned Premiums	3 Direct Losses Incurred
NO.....		

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [] No [X]
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy
be quantified or estimated? Yes [] No [X]
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount
for D&O liability coverage in CMP packaged policies:
2.31 Amount quantified:
2.32 Amount estimated using reasonable assumptions:
- 2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case
reserves) for the D&O liability coverages provided in CMP packaged policies: