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## AMENDED FILING EXPLANATION

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Page 10, column 9 has been amended to reallocate the Unpaid Unallocated Loss Adjustment Expense component of Net Unpaid Loss Adjustment Expenses by Line of Business. The total unpaid is unchanged.



ANNUAL STATEMENT

For the Year Ended December 31, 2014  
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..... 01570-0758  
(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 ..... 01570-0758  
(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 ..... 01570-0758  
(Street and Number) (City or Town, State, Country and Zip Code)

508-943-9000  
(Area Code) (Telephone Number)

Internet Web Site Address

www.mapfreinsurance.com

Statutory Statement Contact

CHRISTINE A MULCAHY  
(Name)  
cmulcahy@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, & EVP
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
TIMOTHY JOHN MORGAN #	DANIEL PATRICK OLOHAN	MARK ALLEN SHAW	MARK HARRY SHAW
JAIME TAMAYO			

State of..... MASSACHUSETTS  
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)  
JAIME TAMAYO

1. (Printed Name)  
PRESIDENT & CEO

(Title)

(Signature)  
DANIEL PATRICK OLOHAN

2. (Printed Name)  
SECRETARY, GENERAL COUNSEL, & EVP

(Title)

(Signature)  
ROBERT EDWARD MCKENNA

3. (Printed Name)  
TREASURER, CAO, & SVP

(Title)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ 2015

a. Is this an original filing?

Yes [ ] No [ x ]

b. If no

1. State the amendment number  
2. Date filed  
3. Number of pages attached

1  
04/01/2015  
3

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....	339,640	282,312	339,640	282,312	142,829	14,371	142,829	296,683	83,166
2.	Allied lines.....	19,919	2,177	19,919	2,177				2,177	3,980
3.	Farmowners multiple peril.....				0				0	
4.	Homeowners multiple peril.....	17,305,253	4,753,714	17,305,253	4,753,714	6,896,385	(633,017)	6,896,385	4,120,697	1,752,027
5.	Commercial multiple peril.....		667,669		667,669		60,522		728,191	574,606
6.	Mortgage guaranty.....				0				0	
8.	Ocean marine.....		62,385		62,385		22,177		84,562	2,393
9.	Inland marine.....	182,128	29,894	182,128	29,894		38,651		68,545	2,686
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.....	6,370	77,548	6,370	77,548				(a) 77,548	
14.	Credit accident and health (group and individual).....				0				0	
15.	Other accident and health.....				0				(a) 0	
16.	Workers' compensation.....		3,049		3,049				3,049	
17.1	Other liability - occurrence.....	2,163,970	226,766	2,163,970	226,766		104,608		331,374	91,965
17.2	Other liability - claims-made.....				0				0	
17.3	Excess workers' compensation.....				0				0	
18.1	Products liability - occurrence.....		56,177		56,177				56,177	
18.2	Products liability - claims-made.....				0				0	
19.1, 19.2	Private passenger auto liability.....	96,893,235	52,732,991	96,893,235	52,732,991	2,560,643	(1,173,607)	2,560,643	51,559,384	9,135,217
19.3, 19.4	Commercial auto liability.....		4,106,454		4,106,454		1,997,117		6,103,571	1,156,690
21.	Auto physical damage.....	(7,067,545)	(4,304,134)	(7,067,545)	(4,304,134)	9,310,891	3,717,234	9,310,891	(586,900)	1,017,742
22.	Aircraft (all perils).....	5,251,270		5,251,270	0	724,160		724,160	0	
23.	Fidelity.....				0				0	
24.	Surety.....		271,614		271,614				271,614	
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	3,733		3,733	XXX			3,733	
32.	Reinsurance - nonproportional assumed liability.....	XXX			0	XXX			0	
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0	XXX			0	
34.	Aggregate write-ins for other lines of business.....	5,860	267	5,860	267	0	0	0	267	0
35.	TOTALS.....	115,100,100	58,972,616	115,100,100	58,972,616	19,634,908	4,148,056	19,634,908	63,120,672	13,820,472
DETAILS OF WRITE-INS										
3401.	TRAVEL INSURANCE.....	5,860	267	5,860	267				267	
3402.	.....		0		0				0	
3403.	.....				0				0	
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	5,860	267	5,860	267	0	0	0	267	0

(a) Including \$.....0 for present value of life indemnity claims.