



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2014

NAIC Company Code 10176

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private crop	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	3,694,937	3,844,923	0	1,306,114	1,781,569	2,026,248	6,449,560	109,761	90,259	462,380	323,212	90,219
17.1 Other Liability - occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	3,694,937	3,844,923	0	1,306,114	1,781,569	2,026,248	6,449,560	109,761	90,259	462,380	323,212	90,219
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 9,584

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



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0088	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2014							NAIC Company Code	10176	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire		12	982	0	0	0	(30,458)	6,313	0	(2,240)	391	2	0
2.1 Allied lines		20	564	0	0	0	(1,313)	382	0	(149)	35	3	0
2.2 Multiple peril crop		0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood		0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private crop		0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril		0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	10,987,669	11,704,587	0	5,648,790	6,675,495	6,188,356	2,523,384	106,098	112,375	349,350	1,659,956	222,264	
5.1 Commercial multiple peril (non-liability portion)	585,888	586,884	0	275,323	98,168	123,427	45,196	169	1,239	11,088	91,857	11,778	
5.2 Commercial multiple peril (liability portion)	350,701	354,446	0	164,369	11,441	255,040	623,031	80,949	83,322	134,917	54,997	6,973	
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	244,505	267,490	0	121,195	94,537	61,823	1,456	1,585	1,428	43	38,084	4,945	
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	50,183	53,913	0	25,536	0	0	0	0	0	0	0	7,753	1,017
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	201,167	247,614	0	88,313	0	9,210	190,732	.82	(8,100)	19,045	31,724	4,081	
17.2 Other Liability - claims made	32	.3	0	29	0	0	0	0	0	0	0	.5	.1
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	0	0	0	0	0	(227)	(186)	0	(25)	(25)	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	62,631	71,430	0	14,791	65,265	22,731	18,886	6,471	1,128	9,156	8,127	1,249	
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	56,439	52,579	0	17,565	(2,500)	(1,882)	14,506	0	(983)	4,115	8,829	1,144	
21.1 Private passenger auto physical damage	50,529	55,440	0	12,118	11,963	13,636	2,661	0	(143)	268	6,940	1,001	
21.2 Commercial auto physical damage	16,877	15,201	0	7,604	9,676	14,526	6,200	0	(24)	.62	2,636	342	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft .....	.4	271	0	0	0	0	0	0	0	0	0	.1	0
27. Boiler and machinery	0	.1	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	12,606,657	13,411,405	0	6,375,633	6,964,045	6,654,869	3,432,561	195,354	187,828	528,445	1,910,914	254,795	
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 61,594

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



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2014

NAIC Company Code 10176

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private crop	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2014

NAIC Company Code 10176

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	12	982	0	0	0	(30,458)	6,313	0	(2,240)	391	2	0
2.1 Allied lines	20	564	0	0	0	(1,313)	382	0	(149)	35	3	0
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private crop	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	10,987,669	11,704,587	0	5,648,790	6,675,495	6,188,356	2,523,384	106,098	112,375	349,350	1,659,956	222,264
5.1 Commercial multiple peril (non-liability portion)	585,888	586,884	0	275,323	98,168	123,427	45,196	169	1,239	.11,088	91,857	.11,778
5.2 Commercial multiple peril (liability portion)	350,701	354,446	0	164,369	11,441	255,040	623,031	80,949	83,322	134,917	.54,997	6,973
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	244,505	267,490	0	121,195	94,537	.61,823	1,456	1,585	1,428	.43	38,084	4,945
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake .....	.50,183	.53,913	0	25,536	0	0	0	0	0	0	7,753	1,017
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	3,694,937	3,844,923	0	1,306,114	1,781,569	2,026,248	6,449,560	109,761	.90,259	462,380	323,212	.90,219
17.1 Other Liability - occurrence	201,167	247,614	0	88,313	0	.9,210	.190,732	.82	(8,100)	.19,045	.31,724	.4,081
17.2 Other Liability - claims made .....	.32	.3	0	.29	0	0	0	0	0	0	.5	.1
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	0	0	0	0	0	(227)	(186)	0	(25)	(25)	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability .....	.62,631	.71,430	0	14,791	.65,265	22,731	.18,886	6,471	1,128	9,156	8,127	1,249
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability .....	.56,439	.52,579	0	17,565	(2,500)	(1,882)	.14,506	0	(.983)	4,115	8,829	1,144
21.1 Private passenger auto physical damage .....	.50,529	.55,440	0	12,118	11,963	13,636	2,661	0	(.143)	.268	6,940	1,001
21.2 Commercial auto physical damage	16,877	15,201	0	7,604	9,676	14,526	6,200	0	(24)	.62	2,636	.342
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft .....	.4	.271	0	0	0	0	0	0	0	0	.1	0
27. Boiler and machinery	0	.1	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	16,301,594	17,256,328	0	7,681,747	8,745,614	8,681,117	9,882,121	305,115	278,087	990,825	2,234,126	345,014
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 71,178

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

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
0499999. Total - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0
0799999. Total - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0
0899999. Total - Affiliates					0	0	0	0	0	0	0	0	0	0
0999998. Other U.S. Unaffiliated Insurers Reinsurance for which the total of Column 8 is less than \$100,000					0	0	0	0	0	0	0	0	0	0
0999999. Total Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0
AA-9992114 ..00000 ..MICHIGAN PLACEMENT FACILITY ..MI				265	0	379	379	0	0	75	0	0	0	0
1099998. Pools and Associations - Reinsurance for which the total of Column 8 is less than \$100,000 - Mandatory Pools					0	0	0	0	0	0	0	0	0	0
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools					265	0	379	379	0	0	75	0	0	0
1199998. Pools and Associations - Reinsurance for which the total of Column 8 is less than \$100,000 - Voluntary Pools					0	0	0	0	0	0	0	0	0	0
1199999. Total Pools, Associations or Other Similar Facilities - Voluntary Pools					0	0	0	0	0	0	0	0	0	0
1299999. Total - Pools and Associations					265	0	379	379	0	0	75	0	0	0
1399998. Other Non-U.S. Insurers - Reinsurance for which the total of Column 8 is less than \$100,000					0	0	0	0	0	0	0	0	0	0
1399999. Total Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0
9999999 Totals					265	0	379	379	0	0	75	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- ions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
38-0421730	31534	CITIZENS INS CO OF AMERICA	MI		16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
0999998. Total Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1299998. Total Authorized - Other Non-U.S. Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1299999. Total Authorized - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1399999. Total Authorized					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
1799999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299998. Total Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999. Total Unauthorized - Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2599998. Total Unauthorized - Other Non-U.S. Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2599999. Total Unauthorized - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2699999. Total Unauthorized					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3099999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3399999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599998. Total Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599999. Total Certified - Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3899998. Total Certified - Other Non-U.S. Insurers (Under \$100,000)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3899999. Total Certified - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3999999. Total Certified					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4099999. Total Authorized, Unauthorized and Certified					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	
4199999. Total Protected Cells					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9999999 Totals					16,566	0	0	6,026	0	4,796	1,316	7,756	0	19,894	0	0	19,894	0	

NOTE: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties.

The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.	0.000	0
2.	0.000	0
3.	0.000	0
4.	0.000	0
5.	0.000	0

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
1. CITIZENS INS CO OF AMERICA	19,894,000	16,566,000	Yes [X] No []
2.	0	0	Yes [] No []
3.	0	0	Yes [] No []
4.	0	0	Yes [] No []
5.	0	0	Yes [] No []

Schedule F - Part 4

N O N E

Schedule F - Part 5

N O N E

Schedule F - Part 5 - Bank Footnote

N O N E

Schedule F - Part 6 - Section 1 - Provision for Reinsurance Ceded to Certified Reinsurers

N O N E

Schedule F - Part 6 - Section 1 - Bank Footnote

N O N E

Schedule F - Part 6 - Section 2 - Provision for Overdue Reinsurance Ceded to Certified Reinsurers

N O N E

Schedule F - Part 7 - Provision for Overdue Authorized Reinsurance

N O N E

Schedule F - Part 8 - Provision for Overdue Reinsurance

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	14,921,549	0	14,921,549
2. Premiums and considerations (Line 15)	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	0	0	0
5. Other assets	157,613	0	157,613
6. Net amount recoverable from reinsurers	0	19,894,000	19,894,000
7. Protected cell assets (Line 27)	0	0	0
8. Totals (Line 28)	15,079,162	19,894,000	34,973,162
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0	12,138,000	12,138,000
10. Taxes, expenses, and other obligations (Lines 4 through 8)	16,092	0	16,092
11. Unearned premiums (Line 9)	0	7,756,000	7,756,000
12. Advance premiums (Line 10)	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	0	0	0
15. Funds held by company under reinsurance treaties (Line 13)	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14)	0	0	0
17. Provision for reinsurance (Line 16)	0	0	0
18. Other liabilities	2,127	0	2,127
19. Total liabilities excluding protected cell business (Line 26)	18,219	19,894,000	19,912,219
20. Protected cell liabilities (Line 27)	0	0	0
21. Surplus as regards policyholders (Line 37)	15,060,943	XXX	15,060,943
22. Totals (Line 38)	15,079,162	19,894,000	34,973,162

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No []

If yes, give full explanation: The Company ceded 100% of its insurance business to The Citizens Insurance Company of America, an affiliated insurer.

Schedule H - Part 1

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	(1)	(1)	0	0	0	0	0	0	XXX	
2. 2005	1,955	1,955	0	1,169	1,169	24	24	121	121	0	0	267	
3. 2006	1,659	1,659	0	839	839	10	10	147	147	0	0	293	
4. 2007	1,574	1,574	0	689	689	5	5	107	107	0	0	225	
5. 2008	2,103	2,103	0	2,599	2,599	21	21	332	332	0	0	766	
6. 2009	3,501	3,501	0	3,189	3,189	141	141	257	257	0	0	647	
7. 2010	6,724	6,724	0	6,405	6,405	114	114	582	582	0	0	1,198	
8. 2011	10,473	10,473	0	12,702	12,702	107	107	1,123	1,123	0	0	2,531	
9. 2012	13,749	13,749	0	13,917	13,917	124	124	1,234	1,234	0	0	2,911	
10. 2013	14,211	14,211	0	8,248	8,248	92	92	786	786	0	0	1,756	
11. 2014	11,705	11,705	0	4,978	4,978	31	31	771	771	0	0	1,197	
12. Totals	XXX	XXX	XXX	54,736	54,736	669	669	5,460	5,460	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.	38	38	0	0	0	0	8	8	2	2	0	0	1			
2. 2005	0	0	0	0	0	0	3	3	0	0	0	0	0			
3. 2006	0	0	0	0	0	0	3	3	0	0	0	0	0			
4. 2007	0	0	0	0	0	0	4	4	0	0	0	0	0			
5. 2008	0	0	0	0	0	0	6	6	0	0	0	0	0			
6. 2009	0	0	0	0	0	0	10	10	0	0	0	0	0			
7. 2010	0	0	27	27	0	0	18	18	0	0	0	0	0			
8. 2011	0	0	49	49	0	0	41	41	0	0	0	0	0			
9. 2012	0	0	(18)	(18)	0	0	63	63	2	2	0	0	1			
10. 2013	318	318	126	126	0	0	83	83	26	26	0	0	14			
11. 2014	770	770	1,214	1,214	0	0	111	111	79	79	0	0	43			
12. Totals	1,126	1,126	1,397	1,397	0	0	349	349	109	109	0	0	59			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	1,318	1,318	0	67.4	67.4	0.0	0	0	0.0	0	0
3. 2006	999	999	0	60.2	60.2	0.0	0	0	0.0	0	0
4. 2007	804	804	0	51.1	51.1	0.0	0	0	0.0	0	0
5. 2008	2,958	2,958	0	140.7	140.7	0.0	0	0	0.0	0	0
6. 2009	3,598	3,598	0	102.8	102.8	0.0	0	0	0.0	0	0
7. 2010	7,146	7,146	0	106.3	106.3	0.0	0	0	0.0	0	0
8. 2011	14,022	14,022	0	133.9	133.9	0.0	0	0	0.0	0	0
9. 2012	15,321	15,321	0	111.4	111.4	0.0	0	0	0.0	0	0
10. 2013	9,679	9,679	0	68.1	68.1	0.0	0	0	0.0	0	0
11. 2014	7,954	7,954	0	68.0	68.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2005	1,932	1,932	0	1,519	1,519	.49	.49	123	123	0	0	247	
3. 2006	1,555	1,555	0	1,218	1,218	.19	.19	125	125	0	0	218	
4. 2007	1,088	1,088	0	296	296	.31	.31	111	111	0	0	146	
5. 2008	750	750	0	138	138	0	0	.58	.58	0	0	71	
6. 2009	457	457	0	.177	.177	.7	.7	32	32	0	0	.51	
7. 2010	327	327	0	50	50	1	1	19	19	0	0	19	
8. 2011	217	217	0	.310	.310	0	0	18	18	0	0	25	
9. 2012	176	176	0	92	92	6	6	19	19	0	0	32	
10. 2013	130	130	0	10	10	0	0	8	8	0	0	8	
11. 2014	71	71	0	22	22	0	0	4	4	0	0	7	
12. Totals	XXX	XXX	XXX	3,832	3,832	113	113	518	518	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded						
1. Prior.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2010	0	0	0	0	0	0	1	1	0	0	0	0	0			
8. 2011	0	0	0	0	0	0	1	1	0	0	0	0	0			
9. 2012	6	6	1	1	0	0	2	2	1	1	0	0	1			
10. 2013	0	0	3	3	0	0	3	3	0	0	0	0	0			
11. 2014	2	2	8	8	0	0	2	2	1	1	0	0	1			
12. Totals	7	7	12	12	0	0	9	9	2	2	0	0	2			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	1,692	1,692	0	.87.6	87.6	.00	0	0	0.0	0	0
3. 2006	1,362	1,362	0	.87.6	87.6	.00	0	0	0.0	0	0
4. 2007	438	438	0	.40.2	40.2	.00	0	0	0.0	0	0
5. 2008	196	196	0	.26.2	26.2	.00	0	0	0.0	0	0
6. 2009	217	217	0	.47.6	47.6	.00	0	0	0.0	0	0
7. 2010	70	70	0	.21.5	21.5	.00	0	0	0.0	0	0
8. 2011	329	329	0	.151.8	151.8	.00	0	0	0.0	0	0
9. 2012	127	127	0	.72.3	72.3	.00	0	0	0.0	0	0
10. 2013	24	24	0	.18.7	18.7	.00	0	0	0.0	0	0
11. 2014	38	38	0	.53.1	53.1	.00	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2005	991	991	0	309	309	23	23	39	39	0	0	41	
3. 2006	620	620	0	49	49	13	13	42	42	0	0	34	
4. 2007	336	336	0	25	25	11	11	27	27	0	0	20	
5. 2008	235	235	0	4	4	2	2	4	4	0	0	4	
6. 2009	220	220	0	11	11	0	0	10	10	0	0	8	
7. 2010	135	135	0	7	7	0	0	9	9	0	0	4	
8. 2011	38	38	0	14	14	0	0	10	10	0	0	6	
9. 2012	67	67	0	11	11	0	0	4	4	0	0	3	
10. 2013	56	56	0	2	2	0	0	2	2	0	0	2	
11. 2014	53	53	0	0	0	0	0	3	3	0	0	2	
12. Totals	XXX	XXX	XXX	431	431	48	48	152	152	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded						
1. Prior.	0	0	1	1	0	0	0	0	0	0	0	0	0			
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	0			
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	0			
9. 2012	0	0	1	1	0	0	1	1	0	0	0	0	0			
10. 2013	0	0	3	3	0	0	1	1	0	0	0	0	0			
11. 2014	3	3	5	5	0	0	1	1	1	1	0	0	1			
12. Totals	3	3	12	12	0	0	4	4	1	1	0	0	1			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	371	371	0	37.5	37.5	0.0	0	0	0.0	0	0
3. 2006	104	104	0	16.8	16.8	0.0	0	0	0.0	0	0
4. 2007	63	63	0	18.7	18.7	0.0	0	0	0.0	0	0
5. 2008	11	11	0	4.8	4.8	0.0	0	0	0.0	0	0
6. 2009	21	21	0	9.8	9.8	0.0	0	0	0.0	0	0
7. 2010	16	16	0	11.8	11.8	0.0	0	0	0.0	0	0
8. 2011	25	25	0	65.9	65.9	0.0	0	0	0.0	0	0
9. 2012	17	17	0	25.8	25.8	0.0	0	0	0.0	0	0
10. 2013	8	8	0	14.5	14.5	0.0	0	0	0.0	0	0
11. 2014	13	13	0	24.3	24.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	.162	.162	10	10	(2)	(2)	0	0	XXX	
2. 2005	7,817	7,817	0	3,336	3,336	164	164	.654	.654	0	0	824	
3. 2006	7,050	7,050	0	3,055	3,055	103	103	.607	.607	0	0	682	
4. 2007	6,520	6,520	0	3,309	3,309	182	182	.780	.780	0	0	728	
5. 2008	6,247	6,247	0	2,908	2,908	139	139	.898	.898	0	0	671	
6. 2009	5,165	5,165	0	1,706	1,706	81	81	.588	.588	0	0	589	
7. 2010	4,533	4,533	0	2,404	2,404	124	124	.886	.886	0	0	589	
8. 2011	5,128	5,128	0	1,462	1,462	90	90	.933	.933	0	0	537	
9. 2012	5,042	5,042	0	1,818	1,818	87	87	.371	.371	0	0	471	
10. 2013	4,213	4,213	0	973	973	41	41	.310	.310	0	0	413	
11. 2014	4,126	4,126	0	474	474	23	23	.553	.553	0	0	423	
12. Totals	XXX	XXX	XXX	21,608	21,608	1,045	1,045	6,579	6,579	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	862	862	1,504	1,504	0	0	97	97	14	14	0	0	10			
2. 2005	37	37	126	126	0	0	15	15	0	0	0	0	0			
3. 2006	52	52	94	94	0	0	10	10	1	1	0	0	1			
4. 2007	20	20	82	82	0	0	10	10	0	0	0	0	0			
5. 2008	151	151	112	112	0	0	11	11	5	5	0	0	4			
6. 2009	17	17	113	113	0	0	8	8	0	0	0	0	0			
7. 2010	121	121	117	117	0	0	19	19	7	7	0	0	5			
8. 2011	169	169	137	137	0	0	23	23	8	8	0	0	6			
9. 2012	646	646	183	183	0	0	29	29	11	11	0	0	8			
10. 2013	1,216	1,216	259	259	0	0	64	64	29	29	0	0	21			
11. 2014	1,127	1,127	243	243	0	0	176	176	114	114	0	0	83			
12. Totals	4,420	4,420	2,969	2,969	0	0	462	462	189	189	0	0	138			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	4,333	4,333	0	55.4	55.4	0.0	0	0	0.0	0	0
3. 2006	3,922	3,922	0	55.6	55.6	0.0	0	0	0.0	0	0
4. 2007	4,383	4,383	0	67.2	67.2	0.0	0	0	0.0	0	0
5. 2008	4,225	4,225	0	67.6	67.6	0.0	0	0	0.0	0	0
6. 2009	2,513	2,513	0	48.7	48.7	0.0	0	0	0.0	0	0
7. 2010	3,678	3,678	0	81.1	81.1	0.0	0	0	0.0	0	0
8. 2011	2,823	2,823	0	55.1	55.1	0.0	0	0	0.0	0	0
9. 2012	3,145	3,145	0	62.4	62.4	0.0	0	0	0.0	0	0
10. 2013	2,893	2,893	0	68.7	68.7	0.0	0	0	0.0	0	0
11. 2014	2,710	2,710	0	65.7	65.7	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	2	2	1	1	0	0	XXX	
2. 2005	2,805	2,805	0	1,930	1,930	17	17	160	160	0	0	132	
3. 2006	2,217	2,217	0	891	891	167	167	258	258	0	0	219	
4. 2007	1,375	1,375	0	370	370	31	31	.77	.77	0	0	87	
5. 2008	755	755	0	641	641	16	16	62	62	0	0	59	
6. 2009	446	446	0	36	36	(5)	(5)	14	14	0	0	14	
7. 2010	543	543	0	59	59	22	22	22	22	0	0	23	
8. 2011	662	662	0	150	150	2	2	19	19	0	0	28	
9. 2012	818	818	0	200	200	101	101	38	38	0	0	42	
10. 2013	850	850	0	54	54	0	0	22	22	0	0	26	
11. 2014	941	941	0	108	108	0	0	28	28	0	0	29	
12. Totals	XXX	XXX	XXX	4,438	4,438	353	353	700	700	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.	33	33	25	25	0	0	22	22	7	7	0	0	5
2. 2005	0	0	2	2	0	0	5	5	0	0	0	0	0
3. 2006	0	0	3	3	0	0	.5	.5	0	0	0	0	0
4. 2007	0	0	3	3	0	0	6	6	0	0	0	0	0
5. 2008	0	0	4	4	0	0	8	8	0	0	0	0	0
6. 2009	0	0	5	5	0	0	9	9	0	0	0	0	0
7. 2010	0	0	9	9	0	0	10	10	0	0	0	0	0
8. 2011	0	0	9	9	0	0	15	15	0	0	0	0	0
9. 2012	410	410	23	23	0	0	17	17	5	5	0	0	4
10. 2013	0	0	36	36	0	0	22	22	0	0	0	0	0
11. 2014	19	19	88	88	0	0	28	28	9	9	0	0	7
12. Totals	461	461	207	207	0	0	146	146	22	22	0	0	16

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	2,113	2,113	0	75.3	75.3	.00	0	0	0.0	0	0
3. 2006	1,325	1,325	0	59.8	59.8	.00	0	0	0.0	0	0
4. 2007	486	486	0	35.4	35.4	.00	0	0	0.0	0	0
5. 2008	730	730	0	96.8	96.8	.00	0	0	0.0	0	0
6. 2009	58	.58	0	13.1	13.1	.00	0	0	0.0	0	0
7. 2010	122	122	0	22.4	22.4	.00	0	0	0.0	0	0
8. 2011	.194	194	0	29.3	29.3	.00	0	0	0.0	0	0
9. 2012	.794	794	0	97.1	97.1	.00	0	0	0.0	0	0
10. 2013	.134	134	0	15.7	15.7	.00	0	0	0.0	0	0
11. 2014	282	282	0	29.9	29.9	.00	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2005	34	34	0	0	0	0	0	0	0	0	0	0	
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2013	1	1	0	0	0	0	0	0	0	0	0	0	
11. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	0			
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	0			
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0			
10. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0			
11. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0			
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2006	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2007	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2008	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2009	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2010	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2011	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2005	894	894	0	38	38	0	0	30	30	0	0	6	
3. 2006	634	634	0	0	0	0	0	16	16	0	0	3	
4. 2007	371	371	0	3	3	0	0	26	26	0	0	2	
5. 2008	267	267	0	0	0	0	0	0	0	0	0	0	
6. 2009	245	245	0	0	0	0	0	0	0	0	0	0	
7. 2010	275	275	0	0	0	0	0	0	0	0	0	0	
8. 2011	444	444	0	425	425	3	3	16	16	0	0	5	
9. 2012	470	470	0	2	2	0	0	22	22	0	0	10	
10. 2013	349	349	0	0	0	0	0	0	0	0	0	0	
11. 2014	248	248	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	467	467	3	3	110	110	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.	0	0	4	4	0	0	3	3	0	0	0	0	0
2. 2005	0	0	2	2	0	0	0	0	0	0	0	0	0
3. 2006	0	0	2	2	0	0	1	1	0	0	0	0	0
4. 2007	0	0	3	3	0	0	1	1	0	0	0	0	0
5. 2008	0	0	2	2	0	0	0	0	0	0	0	0	0
6. 2009	0	0	1	1	0	0	1	1	0	0	0	0	0
7. 2010	0	0	17	17	0	0	1	1	0	0	0	0	0
8. 2011	0	0	7	7	0	0	1	1	0	0	0	0	0
9. 2012	0	0	40	40	0	0	3	3	0	0	0	0	0
10. 2013	0	0	52	52	0	0	4	4	0	0	0	0	0
11. 2014	0	0	62	62	0	0	5	5	0	0	0	0	0
12. Totals	0	0	191	191	0	0	19	19	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	70	70	0	7.8	7.8	0.0	0	0	0.0	0	0
3. 2006	19	19	0	3.0	3.0	0.0	0	0	0.0	0	0
4. 2007	32	32	0	8.7	8.7	0.0	0	0	0.0	0	0
5. 2008	2	2	0	0.9	0.9	0.0	0	0	0.0	0	0
6. 2009	2	2	0	0.7	0.7	0.0	0	0	0.0	0	0
7. 2010	18	18	0	6.4	6.4	0.0	0	0	0.0	0	0
8. 2011	452	452	0	102.0	102.0	0.0	0	0	0.0	0	0
9. 2012	66	66	0	14.1	14.1	0.0	0	0	0.0	0	0
10. 2013	55	55	0	15.8	15.8	0.0	0	0	0.0	0	0
11. 2014	66	66	0	26.8	26.8	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2013	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2014	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2006	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2007	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2008	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2009	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2010	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2011	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2014	0	0	0	10.3	10.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	(4)	(4)	0	0	0	0	0	0	XXX	
2. 2013	482	482	0	249	249	2	2	15	15	0	0	XXX	
3. 2014	323	323	0	49	49	0	0	11	11	0	0	XXX	
4. Totals	XXX	XXX	XXX	294	294	2	2	27	27	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	2	2	0	0	0	0	0	0	0	0	0			
2. 2013	0	0	1	1	0	0	0	0	0	0	0	0	0			
3. 2014	0	0	5	5	0	0	0	0	0	0	0	0	0			
4. Totals	0	0	8	8	0	0	0	0	0	0	0	0	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2013	267	267	0	55.4	55.4	0.0	0	0	0.0	0	0
3. 2014	66	66	0	20.3	20.3	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2013	110	110	0	27	27	0	0	13	13	0	0	35	
3. 2014	71	71	0	18	18	0	0	3	3	0	0	12	
4. Totals	XXX	XXX	XXX	45	45	0	0	16	16	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2014	8	8	1	1	0	0	0	0	2	2	0	0	2			
4. Totals	8	8	1	1	0	0	0	0	2	2	0	0	2			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2013	40	40	0	36.9	36.9	0.0	0	0	0.0	0	0
3. 2014	32	32	0	45.7	45.7	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1K - FIDELITY/SURETY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX	
3. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX	
4. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2007	2	2	0	0	0	0	0	0	0	0	0	0	
5. 2008	3	3	0	0	0	0	0	0	0	0	0	0	
6. 2009	2	2	0	0	0	0	0	0	0	0	0	0	
7. 2010	1	1	0	0	0	0	0	0	0	0	0	0	
8. 2011	(1)	(1)	0	0	0	0	0	0	0	0	0	0	
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2013	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2014	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2006	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2007	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2008	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2009	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2006	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2007	0	0	0	(0.1)	(0.1)	0.0	0	0	0.0	0	0
5. 2008	0	0	0	(0.1)	(0.1)	0.0	0	0	0.0	0	0
6. 2009	0	0	0	(0.3)	(0.3)	0.0	0	0	0.0	0	0
7. 2010	0	0	0	(1.0)	(1.0)	0.0	0	0	0.0	0	0
8. 2011	0	0	0	0.7	0.7	0.0	0	0	0.0	0	0
9. 2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 2A - Homeowners/Farmowners

N O N E

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 2E - Commercial Multiple Peril

N O N E

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 2H - Section 2- Other Liability - Claims-Made

N O N E

Schedule P - Part 2I - Special Property

N O N E

Schedule P - Part 2J - Auto Physical Damage

N O N E

Schedule P - Part 2K - Fidelity/Surety

N O N E

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 2M - International

N O N E

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014		
1. Prior	.000	0	0	.0	.0	0	0	0	0	0	.9	.0
2. 2005	0	0	0	.0	.0	0	0	0	0	0	209	.58
3. 2006	XXX	0	0	0	0	0	0	0	0	0	224	.69
4. 2007	XXX	XXX	0	0	0	0	0	0	0	0	185	.40
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0	621	.145
6. 2009	XXX	XXX	XXX	XXX	.0	0	0	0	0	0	494	.153
7. 2010	XXX	XXX	XXX	XXX	XXX	.0	0	0	0	0	928	.270
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	0	0	1,999	.532
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	0	2,257	.653
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	1,265	.477
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	814	.340

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	.000	0	0	.0	.0	0	0	0	0	0	45	.0
2. 2005	0	0	0	.0	.0	0	0	0	0	0	158	.89
3. 2006	XXX	0	0	.0	.0	0	0	0	0	0	148	.70
4. 2007	XXX	XXX	0	0	0	0	0	0	0	0	112	.34
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0	55	.16
6. 2009	XXX	XXX	XXX	XXX	.0	0	0	0	0	0	40	.11
7. 2010	XXX	XXX	XXX	XXX	XXX	.0	0	0	0	0	18	.1
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	0	0	22	.3
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	0	27	.4
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0	6	.2
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	5	1

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

1. Prior	.000	0	0	.0	.0	0	0	0	0	0	16	.0
2. 2005	0	0	0	.0	.0	0	0	0	0	0	23	.18
3. 2006	XXX	0	0	.0	.0	0	0	0	0	0	23	.11
4. 2007	XXX	XXX	0	.0	.0	0	0	0	0	0	10	.10
5. 2008	XXX	XXX	XXX	0	.0	0	0	0	0	0	2	.2
6. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	6	.2
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	4	.0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	.5	.1
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.3	.0
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	2	.0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1

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

1. Prior	.000	0	0	.0	.0	0	0	0	0	0	.183	.0
2. 2005	0	0	0	.0	.0	0	0	0	0	0	516	.308
3. 2006	XXX	0	0	.0	.0	0	0	0	0	0	447	.234
4. 2007	XXX	XXX	0	.0	.0	0	0	0	0	0	551	.177
5. 2008	XXX	XXX	XXX	0	.0	0	0	0	0	0	463	.204
6. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	335	.254
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	363	.221
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	307	.224
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	295	.168
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	209	.183
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	147	.193

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	.000	0	0	.0	.0	0	0	0	0	0	29	.0
2. 2005	0	0	0	.0	.0	0	0	0	0	0	75	.57
3. 2006	XXX	0	0	.0	.0	0	0	0	0	0	141	.78
4. 2007	XXX	XXX	0	.0	.0	0	0	0	0	0	48	.39
5. 2008	XXX	XXX	XXX	0	.0	0	0	0	0	0	39	.20
6. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	12	.2
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	14	.9
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	15	.13
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	21	.17
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	16	.10
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	16	.6

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SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014		
1. Prior	.000											
2. 2005												
3. 2006	XXX											
4. 2007	XXX	XXX										
5. 2008	XXX	XXX	XXX	XXX								
6. 2009	XXX	XXX	XXX	XXX	XXX							
7. 2010	XXX	XXX	XXX	XXX	XXX	XXX						
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	.000											
2. 2005												
3. 2006	XXX											
4. 2007	XXX	XXX										
5. 2008	XXX	XXX	XXX									
6. 2009	XXX	XXX	XXX	XXX								
7. 2010	XXX	XXX	XXX	XXX	XXX							
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	.000										XXX	XXX
2. 2005											XXX	XXX
3. 2006	XXX										XXX	XXX
4. 2007	XXX	XXX									XXX	XXX
5. 2008	XXX	XXX	XXX								XXX	XXX
6. 2009	XXX	XXX	XXX	XXX							XXX	XXX
7. 2010	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

1. Prior	.000	0	0	0	0	0	0	0	0	0	0	0
2. 2005	0	0	0	0	0	0	0	0	0	0	0	0
3. 2006	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2007	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	.000											
2. 2005												
3. 2006	XXX											
4. 2007	XXX	XXX										
5. 2008	XXX	XXX	XXX									
6. 2009	XXX	XXX	XXX	XXX								
7. 2010	XXX	XXX	XXX	XXX	XXX							
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	0	0	XXX	XXX
2. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
3. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	000	0	0	0	0						
2. 2013	XXX	0	0	32	3							
3. 2014	XXX	0	8	2								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	XXX	000		XXX	XXX						
2. 2013	XXX		XXX	XXX							
3. 2014	XXX		XXX	XXX							

NONE

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX	000		XXX	XXX						
2. 2013	XXX		XXX	XXX							
3. 2014	XXX		XXX	XXX							

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	000									XXX	XXX
2. 2005										XXX	XXX
3. 2006	XXX									XXX	XXX
4. 2007	XXX	XXX								XXX	XXX
5. 2008	XXX	XXX	XXX							XXX	XXX
6. 2009	XXX	XXX	XXX	XXX						XXX	XXX
7. 2010	XXX	XXX	XXX	XXX	XXX					XXX	XXX
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
9. 2012	XXX			XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
10. 2013	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 4G - Special Liability

N O N E

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 4I - Special Property

N O N E

Schedule P - Part 4J - Auto Physical Damage

N O N E

Schedule P - Part 4K - Fidelity/Surety

N O N E

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 4M - International

N O N E

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

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SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	69	8	1	0	0	0	0	0	0	0
2. 2005	175	205	208	209	209	209	209	209	209	209
3. 2006	XXX	186	224	224	224	224	224	224	224	224
4. 2007	XXX	XXX	138	185	185	185	185	185	185	185
5. 2008	XXX	XXX	XXX	540	616	617	620	620	621	621
6. 2009	XXX	XXX	XXX	XXX	409	487	491	491	493	494
7. 2010	XXX	XXX	XXX	XXX	XXX	797	916	924	927	928
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	1,753	1,990	1,996	1,999
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,991	2,243	2,257
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,135	1,265
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	814

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	19	8	6	3	2	2	1	1	1	1
2. 2005	21	2	1	0	0	0	0	0	0	0
3. 2006	XXX	33	0	0	0	0	0	0	0	0
4. 2007	XXX	XXX	27	0	0	0	0	0	0	0
5. 2008	XXX	XXX	XXX	30	1	0	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	52	4	4	3	1	0
7. 2010	XXX	XXX	XXX	XXX	XXX	80	8	5	3	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	72	4	4	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	101	5	1
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	68	14
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	50	2	2	0	0	0	0	0	0	0
2. 2005	241	264	266	267	267	267	267	267	267	267
3. 2006	XXX	272	293	293	293	293	293	293	293	293
4. 2007	XXX	XXX	195	224	225	225	225	225	225	225
5. 2008	XXX	XXX	XXX	693	759	760	765	765	766	766
6. 2009	XXX	XXX	XXX	XXX	562	641	646	646	647	647
7. 2010	XXX	XXX	XXX	XXX	XXX	1,103	1,187	1,196	1,197	1,198
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	2,264	2,522	2,530	2,531
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,667	2,896	2,911
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,625	1,756
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,197

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**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	125	32	10	0	0	3	0	0	0	0
2. 2005	118	151	154	157	157	158	158	158	158	158
3. 2006	XXX	113	138	148	148	148	148	148	148	148
4. 2007	XXX	XXX	81	102	111	112	112	112	112	112
5. 2008	XXX	XXX	XXX	43	53	54	55	55	55	55
6. 2009	XXX	XXX	XXX	XXX	23	34	40	40	40	40
7. 2010	XXX	XXX	XXX	XXX	XXX	16	17	17	17	18
8. 2011	XXX	XXX	XXX	XXX	XXX	16	20	22	22	22
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	26	.27
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	56	12	4	0	2	0	0	0	0	0
2. 2005	44	5	3	1	1	0	0	0	0	0
3. 2006	XXX	36	10	0	0	0	0	0	0	0
4. 2007	XXX	XXX	28	.9	2	1	1	.1	0	0
5. 2008	XXX	XXX	XXX	14	4	1	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	10	.5	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	1	1	.1	1	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	3	0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	1	.1
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	39	26	4	0	2	.1	0	0	0	0
2. 2005	227	245	246	247	247	247	247	247	247	247
3. 2006	XXX	201	217	218	218	218	218	218	218	218
4. 2007	XXX	XXX	128	141	144	146	146	.146	146	146
5. 2008	XXX	XXX	XXX	66	.71	.71	.71	.71	.71	.71
6. 2009	XXX	XXX	XXX	XXX	.41	.48	.51	.51	.51	.51
7. 2010	XXX	XXX	XXX	XXX	XXX	18	.19	.19	.19	.19
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	21	.23	.25	.25
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.27	.31	.32
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.8	.8
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

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**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	24	6	8	1	0	1	0	0	0	0
2. 2005	19	21	21	23	23	23	23	23	23	23
3. 2006	XXX	19	22	23	23	23	23	23	23	23
4. 2007	XXX	XXX	8	10	10	10	10	10	10	10
5. 2008	XXX	XXX	XXX	1	1	2	2	2	2	2
6. 2009	XXX	XXX	XXX	XXX	5	6	6	6	6	6
7. 2010	XXX	XXX	XXX	XXX	XXX	4	4	4	4	4
8. 2011	XXX	XXX	XXX	XXX	XXX	5	5	5	5	5
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	2	3	3	3
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	27	11	4	1	2	1	2	0	0	0
2. 2005	7	3	2	0	0	0	0	0	0	0
3. 2006	XXX	7	7	0	0	0	0	0	0	0
4. 2007	XXX	XXX	2	1	1	0	0	0	0	0
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	1	0	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	8	30	3	2	1	0	1	(2)	0	0
2. 2005	37	40	41	41	41	41	41	41	41	41
3. 2006	XXX	31	34	34	34	34	34	34	34	34
4. 2007	XXX	XXX	12	19	20	20	20	20	20	20
5. 2008	XXX	XXX	XXX	2	2	4	4	4	4	4
6. 2009	XXX	XXX	XXX	XXX	7	8	8	8	8	8
7. 2010	XXX	XXX	XXX	XXX	XXX	4	4	4	4	4
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	6	6	6	6
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

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SCHEDULE P - PART 5D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	184	69	46	28	19	10	1	4	5	1
2. 2005	321	455	496	502	511	515	516	516	516	516
3. 2006	XXX	254	404	426	438	442	444	444	446	447
4. 2007	XXX	XXX	355	491	527	532	544	549	551	551
5. 2008	XXX	XXX	XXX	331	431	443	457	460	463	463
6. 2009	XXX	XXX	XXX	XXX	228	316	331	332	335	335
7. 2010	XXX	XXX	XXX	XXX	XXX	229	327	348	357	363
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	204	296	300	307
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200	279	295
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	147	209
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	147

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	142	104	74	57	39	40	28	19	17	10
2. 2005	151	56	18	11	4	1	0	0	0	0
3. 2006	XXX	143	31	17	10	3	1	3	1	1
4. 2007	XXX	XXX	170	53	23	18	2	2	0	0
5. 2008	XXX	XXX	XXX	109	24	19	5	4	2	4
6. 2009	XXX	XXX	XXX	XXX	108	17	6	5	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	100	37	17	9	5
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	91	16	12	6
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	87	19	8
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67	21
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	83

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	94	69	26	18	7	13	(10)	(3)	3	(6)
2. 2005	676	803	813	817	822	824	824	824	824	824
3. 2006	XXX	580	653	672	679	679	679	681	681	682
4. 2007	XXX	XXX	636	706	720	721	721	726	728	728
5. 2008	XXX	XXX	XXX	596	653	662	664	667	669	671
6. 2009	XXX	XXX	XXX	XXX	542	580	585	589	589	589
7. 2010	XXX	XXX	XXX	XXX	XXX	503	579	584	587	589
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	476	534	535	537
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	407	466	471
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	358	413
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	423

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SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	34	.11	.6	.6	2	.4	0	.0	0	0
2. 2005	55	.70	.70	.70	.75	.75	.75	.75	.75	.75
3. 2006	XXX	123	139	139	139	140	141	141	141	141
4. 2007	XXX	XXX	35	46	.46	48	48	48	48	48
5. 2008	XXX	XXX	XXX	26	.37	39	39	39	39	39
6. 2009	XXX	XXX	XXX	XXX	11	12	12	12	12	12
7. 2010	XXX	XXX	XXX	XXX	XXX	10	13	13	14	14
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	13	15	15	15
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	21	.21
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	16
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	62	.58	14	12	.11	.2	3	.2	3	.5
2. 2005	23	6	5	.5	0	0	0	0	0	0
3. 2006	XXX	12	3	2	2	.3	1	0	0	0
4. 2007	XXX	XXX	12	0	5	0	0	0	0	0
5. 2008	XXX	XXX	XXX	7	2	0	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	2	0	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	4	1	.1	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	3	4
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	38	.41	.11	.8	5	.3	2	(1)	1	2
2. 2005	116	128	131	132	132	132	132	132	132	132
3. 2006	XXX	204	217	218	218	220	220	219	219	219
4. 2007	XXX	XXX	71	81	.86	.86	.86	.86	.87	.87
5. 2008	XXX	XXX	XXX	47	.59	.59	.59	.59	.59	.59
6. 2009	XXX	XXX	XXX	XXX	14	14	14	14	14	14
7. 2010	XXX	XXX	XXX	XXX	XXX	21	23	23	23	23
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	23	.28	.28	.28
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.32	.41	.42
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23	.26
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	.1	7	0	.0	0	.0	0	.0	0	0
2. 2005	.2	2	2	.2	2	.2	2	.2	2	2
3. 2006	XXX	0	0	.0	0	.0	0	.0	0	0
4. 2007	XXX	XXX	0	1	1	1	1	.1	1	1
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	1
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	.7	0	0	.0	0	.0	0	.0	0	0
2. 2005	.0	0	0	.0	0	.0	0	.0	0	0
3. 2006	XXX	0	0	.0	0	.0	0	.0	0	0
4. 2007	XXX	XXX	2	0	0	0	0	.0	0	0
5. 2008	XXX	XXX	XXX	0	0	0	0	.0	0	0
6. 2009	XXX	XXX	XXX	XXX	0	0	0	.0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	1	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	1	.0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	0	0
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior	.3	0	0	.0	0	.0	0	.0	0	0
2. 2005	.4	6	6	.6	6	.6	6	.6	6	6
3. 2006	XXX	3	3	.3	3	.3	3	.3	3	3
4. 2007	XXX	XXX	2	.2	2	.2	2	.2	2	2
5. 2008	XXX	XXX	XXX	.0	0	.0	0	.0	0	0
6. 2009	XXX	XXX	XXX	XXX	0	0	0	.0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	1	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	4	.4	5	5
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	10	10
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	991	991	991	991	991	991	991	991	991	991	0
3. 2006.....	XXX	620	620	620	620	620	620	620	620	620	0
4. 2007.....	XXX	XXX	336	336	336	336	336	336	336	336	0
5. 2008.....	XXX	XXX	XXX	235	235	235	235	235	235	235	0
6. 2009.....	XXX	XXX	XXX	XXX	220	220	220	220	220	220	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	135	135	135	135	135	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	38	38	38	38	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	67	67	67	67	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	56	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53	53
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53
13. Earned Premiums (Sch P-Pt. 1)	991	620	336	235	220	135	38	67	56	53	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	991	991	991	991	991	991	991	991	991	991	0
3. 2006.....	XXX	620	620	620	620	620	620	620	620	620	0
4. 2007.....	XXX	XXX	336	336	336	336	336	336	336	336	0
5. 2008.....	XXX	XXX	XXX	235	235	235	235	235	235	235	0
6. 2009.....	XXX	XXX	XXX	XXX	220	220	220	220	220	220	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	135	135	135	135	135	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	38	38	38	38	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	67	67	67	67	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	56	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53	53
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53
13. Earned Premiums (Sch P-Pt. 1)	991	620	336	235	220	135	38	67	56	53	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	120	(277)	(14)	0	0	0	0	0	0	0	0
2. 2005.....	7,696	7,889	7,888	7,888	7,888	7,888	7,888	7,888	7,888	7,888	0
3. 2006.....	XXX	7,134	7,247	7,253	7,253	7,253	7,253	7,253	7,253	7,253	0
4. 2007.....	XXX	XXX	6,422	6,653	6,654	6,646	6,646	6,646	6,646	6,646	0
5. 2008.....	XXX	XXX	XXX	6,010	6,012	5,996	5,996	5,996	5,996	5,996	0
6. 2009.....	XXX	XXX	XXX	XXX	5,163	5,079	5,076	5,076	5,076	5,076	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	4,640	4,647	4,648	4,648	4,648	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	5,124	5,210	5,214	5,214	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,955	5,031	5,025	(6)
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,132	4,153	21
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,111	4,111	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,126
13. Earned Premiums (Sch P-Pt. 1)	7,817	7,050	6,520	6,247	5,165	4,533	5,128	5,042	4,213	4,126	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	120	(277)	(14)	0	0	0	0	0	0	0	0
2. 2005.....	7,696	7,889	7,888	7,888	7,888	7,888	7,888	7,888	7,888	7,888	0
3. 2006.....	XXX	7,134	7,247	7,253	7,253	7,253	7,253	7,253	7,253	7,253	0
4. 2007.....	XXX	XXX	6,422	6,653	6,654	6,646	6,646	6,646	6,646	6,646	0
5. 2008.....	XXX	XXX	XXX	6,010	6,012	5,996	5,996	5,996	5,996	5,996	0
6. 2009.....	XXX	XXX	XXX	XXX	5,163	5,079	5,076	5,076	5,076	5,076	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	4,640	4,647	4,648	4,648	4,648	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	5,124	5,210	5,214	5,214	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,955	5,031	5,025	(6)
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,132	4,153	21
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,111	4,111	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,126
13. Earned Premiums (Sch P-Pt. 1)	7,817	7,050	6,520	6,247	5,165	4,533	5,128	5,042	4,213	4,126	XXX

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SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	9	3	0	0	0	0	0	0	0	0	0
2. 2005.....	2,795	2,861	2,842	2,842	2,842	2,842	2,842	2,842	2,842	2,842	0
3. 2006.....	XXX	2,147	2,180	2,164	2,164	2,164	2,164	2,164	2,164	2,164	0
4. 2007.....	XXX	XXX	1,361	1,340	1,339	1,339	1,339	1,339	1,339	1,339	0
5. 2008.....	XXX	XXX	XXX	792	791	791	791	791	791	791	0
6. 2009.....	XXX	XXX	XXX	XXX	448	449	448	448	448	448	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	543	541	541	541	541	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	664	665	665	665	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	817	821	821	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	846	846	(1)
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	942	942
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	941
13. Earned Premiums (Sch P-Pt. 1)	2,805	2,217	1,375	755	446	543	662	818	850	941	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	9	3	0	0	0	0	0	0	0	0	0
2. 2005.....	2,795	2,861	2,842	2,842	2,842	2,842	2,842	2,842	2,842	2,842	0
3. 2006.....	XXX	2,147	2,180	2,164	2,164	2,164	2,164	2,164	2,164	2,164	0
4. 2007.....	XXX	XXX	1,361	1,340	1,339	1,339	1,339	1,339	1,339	1,339	0
5. 2008.....	XXX	XXX	XXX	792	791	791	791	791	791	791	0
6. 2009.....	XXX	XXX	XXX	XXX	448	449	448	448	448	448	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	543	541	541	541	541	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	664	665	665	665	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	817	821	821	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	846	846	(1)
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	942	942
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	941
13. Earned Premiums (Sch P-Pt. 1)	2,805	2,217	1,375	755	446	543	662	818	850	941	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	(1)	0	0	0	0	0	0	0	0	0
2. 2005.....	893	898	898	898	898	898	898	898	898	898	0
3. 2006.....	XXX	630	620	620	620	620	620	620	620	620	0
4. 2007.....	XXX	XXX	381	379	379	379	379	379	379	379	0
5. 2008.....	XXX	XXX	XXX	268	268	268	268	268	268	268	0
6. 2009.....	XXX	XXX	XXX	XXX	245	245	245	245	245	245	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	275	275	275	275	275	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	444	444	444	444	444	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	470	470	470	470	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	349	350	1
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	246	246
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	248
13. Earned Premiums (Sch P-Pt. 1)	894	634	371	267	245	275	444	470	349	248	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	(1)	0	0	0	0	0	0	0	0	0
2. 2005.....	893	898	898	898	898	898	898	898	898	898	0
3. 2006.....	XXX	630	620	620	620	620	620	620	620	620	0
4. 2007.....	XXX	XXX	381	379	379	379	379	379	379	379	0
5. 2008.....	XXX	XXX	XXX	268	268	268	268	268	268	268	0
6. 2009.....	XXX	XXX	XXX	XXX	245	245	245	245	245	245	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	275	275	275	275	275	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	444	444	444	444	444	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	470	470	470	470	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	349	350	1
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	246	246
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	248
13. Earned Premiums (Sch P-Pt. 1)	894	634	371	267	245	275	444	470	349	248	XXX

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SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2007.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2008.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2007.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2008.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6M - INTERNATIONAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....											
2. 2005.....											
3. 2006.....	XXX										
4. 2007.....	XXX	XXX									
5. 2008.....	XXX	XXX	XXX								
6. 2009.....	XXX	XXX	XXX	XXX							
7. 2010.....	XXX	XXX	XXX	XXX	XXX						
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....											
2. 2005.....											
3. 2006.....	XXX										
4. 2007.....	XXX	XXX									
5. 2008.....	XXX	XXX	XXX								
6. 2009.....	XXX	XXX	XXX	XXX							
7. 2010.....	XXX	XXX	XXX	XXX	XXX						
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2007.....	XXX	XXX	2	1	1	1	1	1	1	1	0
5. 2008.....	XXX	XXX	XXX	4	4	4	4	4	4	4	0
6. 2009.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2)	(2)
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	2	3	2	1	(1)	0	0	0	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2007.....	XXX	XXX	2	1	1	1	1	1	1	1	0
5. 2008.....	XXX	XXX	XXX	4	4	4	4	4	4	4	0
6. 2009.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	2
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2)	(2)	(2)
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	2	3	2	1	(1)	0	0	0	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....											
2. 2005.....											
3. 2006.....	XXX										
4. 2007.....	XXX	XXX									
5. 2008.....	XXX	XXX	XXX								
6. 2009.....	XXX	XXX	XXX	XXX							
7. 2010.....	XXX	XXX	XXX	XXX	XXX						
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	
1. Prior.....											
2. 2005.....											
3. 2006.....	XXX										
4. 2007.....	XXX	XXX									
5. 2008.....	XXX	XXX	XXX								
6. 2009.....	XXX	XXX	XXX	XXX							
7. 2010.....	XXX	XXX	XXX	XXX	XXX						
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$ 0

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior	0	0
1.602 2005	0	0
1.603 2006	0	0
1.604 2007	0	0
1.605 2008	0	0
1.606 2009	0	0
1.607 2010	0	0
1.608 2011	0	0
1.609 2012	0	0
1.610 2013.....	0	0
1.611 2014.....	0	0
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:

(in thousands of dollars) 5.1 Fidelity 0
 5.2 Surety 0

6. Claim count information is reported per claim or per claimant (Indicate which). per claimant
 If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 (An extended statement may be attached.)

Starting in 2010, a portion of Adjusting and Other expense payments, representing costs not associated with the settlement of claim reserves, were allocated to the current accident year.

The remainder of Adjusting and Other expenses were allocated to the years in which the losses were incurred based on claim counts.

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	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)	*	
	The Hanover Insurance Group						Aberdeen Underwriting Advisers Limited	GBR	NIA	ALIT Insurance Holdings Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group		20-2875170				AIX Holdings, Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group		27-1304098				AIX Insurance Services of California, Inc.	CA	NIA	AIX, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
0088	The Hanover Insurance Group	12833	20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group		20-3051651				AIX, Inc.	DE	NIA	AIX, Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT Insurance Holdings Limited	GBR	NIA	Chaucer Holdings PLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT (No. 1) Limited	GBR	NIA	ALIT Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT (No. 2) Limited	GBR	NIA	ALIT Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT (No. 3) Limited	GBR	NIA	ALIT Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT (No. 4) Limited	GBR	NIA	ALIT Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT (No. 5) Limited	GBR	NIA	ALIT Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group						ALIT Underwriting Limited	GBR	NIA	ALIT Insurance Holdings Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
							AI America Financial Alliance Insurance Co.								
								NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
0088	The Hanover Insurance Group	10212	04-3272695					MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
0088	The Hanover Insurance Group	41840	23-2643430					MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group		04-3194493							AI America Securities Trust	Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Campagna Holding Company, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Campagna Insurance Agency, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Campagna Management Company, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
0088	The Hanover Insurance Group		54-1632456							Campmed Casualty & Indemnity Co. Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										CH 1997 Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Consortium Underwriting Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Corporate Capital Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Corporate Capital (No. 2) Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Corporate Capital (No. 3) Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Dedicated Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Freeholds Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer GmbH	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Holdings PLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Insurance Services Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
	The Hanover Insurance Group									Chaucer Syndicates Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										The Hanover Insurance International Holdings Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Holdings PLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Syndicates Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Latin America, S.A.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Oslo A.S.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Singapore PTE Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Syndicates Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Syndicate Services Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
										Chaucer Underwriting A/S	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.		
0088	The Hanover Insurance Group	31534	38-0421730								Ch 1997 Limited	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
0088	The Hanover Insurance Group	10714	36-4123481								Citizens Insurance Company of America	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
0088	The Hanover Insurance Group	10176	38-3167100								Citizens Insurance Company of Illinois	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
0088	The Hanover Insurance Group	10395	35-1958418								Citizens Insurance Company of Ohio	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											Citizens Insurance Company of the Midwest	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											CitySquare II Development Co., L.L.C	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											CitySquare II Investment Co., L.L.C	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											Educators Insurance Agency, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											Hanover Lloyd's Insurance Co.	Attorney-In-Fact	100.000	The Hanover Insurance Group, Inc.	
0088	The Hanover Insurance Group	41602	75-1827351								Hanover Specialty Insurance Brokers, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	
											Verlan Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	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)	*
	The Hanover Insurance Group ..		74-2556029 ..				Hanover Texas Insurance Management Company, Inc.	TX .. NIA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..						Hayward Brick Stuchbery Holdings Limited	GBR .. NIA ..		Chaucer Holdings PLC	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..						Insurance4Cargo Services Limited	GBR .. NIA ..		CH 1997 Limited	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	22306 ..	04-2217600 ..				Massachusetts Bay Insurance Company	NH .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		16-1066198 ..				NOVA American Group, Inc.	NY .. NIA ..		AIX, Holdings, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	42552 ..	16-1140177 ..				NOVA Casualty Company	NY .. IA ..		NOVA American Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		06-1276047 ..				NOVA Insurance Group, Inc.	DE .. NIA ..		NOVA American Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		27-3626424 ..				One Mercantile Place, L.L.C.	MA .. NIA ..		CitySquare II Investment Co. LLC	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		04-2854021 ..				Opus Investment Management, Inc.	MA .. UIP ..		The Hanover Insurance Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		22-3015617 ..				Professional Underwriters Agency, Inc.	FL .. NIA ..		Nova Insurance Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	25585 ..	38-2755799 ..				Professionals Direct Insurance Company	MI .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		38-3383822 ..				Professionals Direct Insurance Services, Inc.	MI .. NIA ..		Professionals Direct, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		38-3324634 ..				Professionals Direct, Inc.	MI .. NIA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	36064 ..	04-3063898 ..				The Hanover American Insurance Company	NH .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	22292 ..	13-5129825 ..				The Hanover Insurance Company	NH .. UDP ..		Opus Investment Management, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..		04-3263626 ..				The Hanover Insurance Group, Inc.	DE .. UIP ..				0.000 ..		
	The Hanover Insurance Group ..						The Hanover Insurance International Holdings Limited	GBR .. NIA ..		The Hanover Insurance Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	13147 ..	74-3242673 ..				The Hanover National Insurance Company	NH .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	11705 ..	86-1070355 ..				The Hanover New Jersey Insurance Company	NH .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		04-2448927 ..				VeraVest Investments, Inc.	MA .. NIA ..		The Hanover Insurance Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
..0088 ..	The Hanover Insurance Group ..	10815 ..	52-0903682 ..				Verian Fire Insurance Company	NH .. IA ..		The Hanover Insurance Company	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	
	The Hanover Insurance Group ..		52-2044133 ..				Verian Holdings, Inc.	MD .. NIA ..		The Hanover Insurance Group, Inc.	Ownership, Board,Management .....	.100.000 ..	The Hanover Insurance Group, Inc.	

NONE

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
12833	20-5233538	AIX Specialty Insurance Co.	(3,000,000)	0	0	0	0	0	*	0	(3,000,000)	112,439,907
10212	04-3272695	Allmerica Financial Alliance Ins Co.	0	0	0	0	0	0	*	0	0	126,634,279
41840	23-2643430	Allmerica Financial Benefit Ins Co.	0	1,500,000	0	0	0	(57,946,969)	*	0	(56,446,969)	378,019,337
12260	52-1827116	Campmed Casualty & Indemnity Company, Inc.	0	0	0	0	0	0	*	0	0	30,422,118
		Chaucer Holdings PLC	(106,251,696)	0	0	0	0	0	*	0	(106,251,696)	0
31534	38-0421730	Citizens Insurance Co. of America	(66,000,000)	0	0	0	127,240,206	(34,246,630)	*	0	26,993,576	(20,890,783)
10714	36-4123481	Citizens Insurance Co. of Illinois	0	0	0	0	0	0	*	0	0	39,339,790
10176	38-3167100	Citizens Insurance Co. of Ohio	0	0	0	0	0	0	*	0	0	19,893,462
10395	35-1958418	Citizens Insurance Co. of the Midwest	0	2,500,000	0	0	0	(85,709,648)	*	0	(83,209,648)	597,417,739
		CitySquare II Development Co., L.L.C.	0	1,300,000	0	0	0	0	*	0	1,300,000	0
		Educators Insurance Agency, Inc.	0	(2,400,000)	0	0	0	0	*	0	(2,400,000)	0
36064	04-3063898	Hanover American Insurance Co.	0	0	0	0	0	(53,377,971)	*	0	(53,377,971)	231,107,060
22292	13-5129825	Hanover Insurance Company	66,000,000	(4,000,000)	0	0	(127,240,206)	476,980,840	*	0	411,740,634	(2,746,689,851)
11705	86-1070355	Hanover New Jersey Insurance Company	0	0	0	0	0	0	*	0	0	1,176,797
		Hanover Texas Insurance Management Co.	0	0	0	0	0	0	*	0	0	38,112,461
22306	04-2217600	Massachusetts Bay Insurance Company	0	0	0	0	0	(170,952,724)	*	0	(170,952,724)	722,806,990
42552	16-1140177	NOVA Casualty Co.	3,000,000	0	0	0	0	(38,070,824)	*	0	(35,070,824)	409,278,136
		Opus Investment Management, Inc.	(1,000,000)	0	0	0	0	0	*	0	(1,000,000)	0
38-3324632		Professionals Direct Finance Inc.	0	(9,174)	0	0	0	0	*	0	(9,174)	0
25585	38-2755799	Professionals Direct Insurance Company	0	0	0	0	0	0	*	0	0	19,946,225
		Professionals Direct, Inc.	0	9,174	0	0	0	0	*	0	9,174	0
04-3263626		The Hanover Insurance Group, Inc.	106,751,696	(1,186,236)	0	0	0	0	*	0	105,565,460	0
		The Hanover Insurance International Holdings Limited	500,000	2,286,236	0	0	0	0	*	0	2,786,236	0
10815	52-0903682	Verlan Fire Insurance Co.	0	0	0	0	0	(36,676,074)	*	0	(36,676,074)	40,986,333
999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

Responses

MARCH FILING		Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES
The following supplemental reports are required to be filed as part of your annual 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 supplemental is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.		
MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
APRIL FILING		
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
33.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
Explanations:		
12.	Bar Codes:	
12.	SIS Stockholder Information Supplement [Document Identifier 420]	 1 0 1 7 6 2 0 1 4 4 2 0 0 0 0 0 0
13.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	 1 0 1 7 6 2 0 1 4 2 4 0 0 0 0 0 0
14.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	 1 0 1 7 6 2 0 1 4 3 6 0 0 0 0 0 0
15.	Supplement A to Schedule T [Document Identifier 455]	 1 0 1 7 6 2 0 1 4 4 5 5 0 0 0 0 0
16.	Trusted Surplus Statement [Document Identifier 490]	 1 0 1 7 6 2 0 1 4 4 9 0 0 0 0 0 0
17.	Premiums Attributed to Protected Cells [Document Identifier 385]	 1 0 1 7 6 2 0 1 4 3 8 5 0 0 0 0 0
18.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 0 1 7 6 2 0 1 4 4 0 1 0 0 0 0 0
19.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 0 1 7 6 2 0 1 4 3 6 5 0 0 0 0 0
21.	Reinsurance Attestation Supplement [Document Identifier 399]	 1 0 1 7 6 2 0 1 4 3 9 9 0 0 0 0 0
22.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 0 1 7 6 2 0 1 4 4 0 0 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

23. Bail Bond Supplement [Document Identifier 500]
24. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
27. Relief from the Requirements for Audit Committees [Document Identifier 226]
28. Credit Insurance Experience Exhibit [Document Identifier 230]
29. Long-Term Care Experience Reporting Forms [Document Identifier 306]
30. Accident and Health Policy Experience Exhibit [Document Identifier 210]
31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
32. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CITIZENS INSURANCE COMPANY OF OHIO
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NONE

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