
AMENDED FILING EXPLANATION

Amended Interrogatory 34 on Page 99.



ANNUAL STATEMENT

For the Year Ended December 31, 2018
of the Condition and Affairs of the

VICTORIA FIRE & CASUALTY COMPANY

NAIC Group Code.....	0140, 0140 (Current Period) (Prior Period)	NAIC Company Code.....	42889	Employer's ID Number.....	34-1394913
Organized under the Laws of OH		State of Domicile or Port of Entry	OH	Country of Domicile	US
Incorporated/Organized.....	July 11, 1983	Commenced Business.....	August 9, 1983		
Statutory Home Office	ONE WEST NATIONWIDE BLVD. .. COLUMBUS .. OH .. US .. 43215-2220 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>				
Main Administrative Office	22901 MILLCREEK BLVD., SUITE 400 .. HIGHLAND HILLS .. OH .. US .. 44122-5724 216-896-7866 <i>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</i>				
Mail Address	ONE WEST NATIONWIDE BLVD., 1-04-701 .. COLUMBUS .. OH .. US .. 43215-2220 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>				
Primary Location of Books and Records	ONE WEST NATIONWIDE BLVD., 1-04-701 .. COLUMBUS .. OH .. US .. 43215-2220 614-249-1545 <i>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</i>				
Internet Web Site Address	WWW.NATIONWIDE.COM				
Statutory Statement Contact	CHERYL M. DENNIS 614-249-1545 <i>(Name) (Area Code) (Telephone Number)</i> FINRPT@NATIONWIDE.COM 866-315-1430 <i>(E-Mail Address) (Fax Number)</i>				

OFFICERS

Name	Title	Name	Title
1. MARK ALLEN BERVEN	PRESIDENT & COO	2. DENISE LYNN SKINGLE #	VP & SECRETARY
3. ROBERT ALLEN BUEHLER #	VP & TREASURER		

OTHER			
PAMELA ANN BIESECKER	SVP-HEAD OF TAXATION	GALE VERDELL KING	EXEC VP & CHIEF ADMIN OFFC

DIRECTORS OR TRUSTEES

CAROL JEAN ALVAREZ	MARK ALLEN BERVEN	MICHAEL PATRICK LEACH	MENDI HARRIS RIDDLE
ALAN CARROLL ZEIGLER			

State of..... OHIO
County of..... FRANKLIN

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

_____ (Signature) MARK ALLEN BERVEN _____ 1. (Printed Name) PRESIDENT & COO _____ (Title)	_____ (Signature) DENISE LYNN SKINGLE _____ 2. (Printed Name) VP & SECRETARY _____ (Title)	_____ (Signature) ROBERT ALLEN BUEHLER _____ 3. (Printed Name) VP & TREASURER _____ (Title)
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Subscribed and sworn to before me
This _____ day of _____ 2019

a. Is this an original filing? Yes [] No [X]
b. If no 1. State the amendment number 2
2. Date filed 4/17/2019
3. Number of pages attached 3