
AMENDED FILING EXPLANATION

Filing revised Statement of Actuarial Opinion.



ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

MOTORISTS COMMERCIAL MUTUAL INSURANCE COMPANY

NAIC Group Code..... 291, 291
(Current Period) (Prior Period)

NAIC Company Code..... 13331

Employer's ID Number..... 41-0299900

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... May 25, 1899

Commenced Business..... January 4, 1900

Statutory Home Office

471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

614-225-8211

(Area Code) (Telephone Number)

Main Administrative Office

471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

614-225-8211

Mail Address

471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

614-225-8211

Primary Location of Books and Records

471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

614-225-8211

Internet Web Site Address

MOTORISTSINSURANCEGROUP.COM

614-225-8285

Statutory Statement Contact

AMY E KUHLMAN

614-225-8330

(Name)

ACCOUNTING@MOTORISTSGROUP.COM

(Fax Number)

(E-Mail Address)

OFFICERS

Name
1. DAVID LYNN KAUFMAN
3. JAMES CHRISTOPHER HOWAT

Title
CHIEF EXECUTIVE OFFICER
TREASURER

Name
2. MARCHELLE ELAINE MOORE
4. THOMAS JOSEPH OBROKTA JR.

Title
SECRETARY
PRESIDENT

GREGORY ARTHUR BURTON

EXECUTIVE CHAIR

OTHER

GREGORY ARTHUR BURTON
MICHAEL LEE WISEMAN
CHARLES DONOVAN STAPLETON

SANDRA WERTH HARBRECHT
THOMAS CHARLES OGG

DAVID LYNN KAUFMAN
ROBERT LYNN WESTERN

ROBERT LEE MCCRAKEN
THOMAS JOSEPH OBROKTA JR

DIRECTORS OR TRUSTEES

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)
DAVID LYNN KAUFMAN
1. (Printed Name)
CHIEF EXECUTIVE OFFICER
(Title)

(Signature)
MARCHELLE ELAINE MOORE
2. (Printed Name)
SECRETARY
(Title)

(Signature)
JAMES CHRISTOPHER HOWAT
3. (Printed Name)
TREASURER
(Title)

Subscribed and sworn to before me

This 8TH day of FEBRUARY 2019

a. Is this an original filing?

Yes [] No [X]

b. If no 1. State the amendment number

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2. Date filed

7/29/2019

3. Number of pages attached

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