



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2020
OF THE CONDITION AND AFFAIRS OF THE

Citizens Insurance Company of Ohio

NAIC Group Code 0088 (Current) 0088 (Prior) NAIC Company Code 10176 Employer's ID Number 38-3167100

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH
Country of Domicile United States of America

Incorporated/Organized 11/17/1994 Commenced Business 02/13/1995

Statutory Home Office 4400 Easton Commons Way, Suite 125 (Street and Number) Columbus, OH, US 43219 (City or Town, State, Country and Zip Code)

Main Administrative Office 440 Lincoln Street (Street and Number) Worcester, MA, US 01653-0002 (City or Town, State, Country and Zip Code) 508-853-7200 (Area Code) (Telephone Number)

Mail Address 440 Lincoln Street (Street and Number or P.O. Box) Worcester, MA, US 01653-0002 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 440 Lincoln Street (Street and Number) Worcester, MA, US 01653-0002 (City or Town, State, Country and Zip Code) 508-853-7200-8557928 (Area Code) (Telephone Number)

Internet Website Address WWW.HANOVER.COM

Statutory Statement Contact Dennis M. Hazelwood (Name) 508-853-7200-8557928 (Area Code) (Telephone Number) DHAZELWOOD@HANOVER.COM (E-mail Address) 508-853-6332 (FAX Number)

OFFICERS

President John Conner Roche Executive Vice President & Treasurer Ann Kirkpatrick Tripp
Secretary Charles Frederick Cronin

OTHER

Mark Leo Berthiaume, Executive Vice President Jeffrey Mark Farber, Executive Vice President & CFO Dennis Francis Kerrigan Jr. #, Executive Vice President & GC
Richard William Lavey, Executive Vice President Denise Maureen Lowsley, Executive Vice President Bryan James Salvatore, Executive Vice President
Mark Joseph Welzenbach, Executive Vice President

DIRECTORS OR TRUSTEES

Warren Ellison Barnes Mark Leo Berthiaume Jeffrey Mark Farber
Dennis Francis Kerrigan Jr. # Denise Maureen Lowsley John Conner Roche
Bryan James Salvatore Ann Kirkpatrick Tripp Mark Joseph Welzenbach

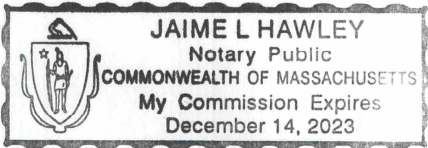
State of Massachusetts SS:
County of Worcester

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

John Conner Roche Charles Frederick Cronin Ann K. Tripp
President Secretary Executive Vice President & Treasurer

Subscribed and sworn to before me this 2nd day of February, 2021
Jaime L. Hawley
Notary
December 14, 2023

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





ANNUAL STATEMENT FOR THE YEAR 2020 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 2020

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	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.1 Allied lines	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.2 Multiple peril crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.3 Federal flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.4 Private crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.5 Private flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. Farmowners multiple peril	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Homeowners multiple peril	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,961.00	0.00
5.1 Commercial multiple peril (non-liability portion)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5.2 Commercial multiple peril (liability portion)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6. Mortgage guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8. Ocean marine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9. Inland marine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10. Financial guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. Medical professional liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12. Earthquake	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
13. Group accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
14. Credit accident and health (group and individual)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.1 Collectively renewable accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.2 Non-cancelable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.3 Guaranteed renewable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.4 Non-renewable for stated reasons only (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.5 Other accident only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.6 Medicare Title XVIII exempt from state taxes or fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.7 All other accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.8 Federal employees health benefits plan premium (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
16. Workers' compensation	1,178,928.00	1,249,709.00	0.00	365,418.00	237,434.00	519,797.00	5,129,494.00	37,914.00	45,674.00	212,005.00	105,226.00	(12,138.00)
17.1 Other Liability - occurrence	886.00	777.00	0.00	109.00	0.00	(443.00)	(443.00)	0.00	(29.00)	(29.00)	143.00	(30.00)
17.2 Other Liability - claims made	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
17.3 Excess workers' compensation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
18. Products liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.1 Private passenger auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.2 Other private passenger auto liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.3 Commercial auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.4 Other commercial auto liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
21.1 Private passenger auto physical damage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
21.2 Commercial auto physical damage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
22. Aircraft (all perils)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23. Fidelity	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
24. Surety	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
26. Burglary and theft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
27. Boiler and machinery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
28. Credit	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
29. International	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
30. Warranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34. Aggregate write-ins for other lines of business	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
35. TOTALS (a)	1,179,814.00	1,250,486.00	0.00	365,527.00	237,434.00	519,354.00	5,129,051.00	37,914.00	45,645.00	211,976.00	109,330.00	(12,168.00)
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

(a) Finance and service charges not included in Lines 1 to 35 \$ 3,430.00

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0.00 and number of persons insured under indemnity only products 0.00



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BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2020

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	0.00	0.00	0.00	0.00	0.00	(3.00)	2.00	0.00	(2.00)	0.00	0.00	0.00
2.1 Allied lines	0.00	0.00	0.00	0.00	0.00	(53.00)	2.00	0.00	(2.00)	0.00	0.00	0.00
2.2 Multiple peril crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.3 Federal flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.4 Private crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.5 Private flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. Farmowners multiple peril	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Homeowners multiple peril	7,539,647.00	8,389,312.00	0.00	3,813,874.00	5,733,614.00	5,549,946.00	4,329,538.00	68,584.00	34,535.00	123,799.00	1,089,854.00	156,994.00
5.1 Commercial multiple peril (non-liability portion)	298,288.00	276,884.00	0.00	153,128.00	62,125.00	97,417.00	86,889.00	1,834.00	3,391.00	5,952.00	55,457.00	6,149.00
5.2 Commercial multiple peril (liability portion)	177,106.00	165,340.00	0.00	86,048.00	309,443.00	3,831.00	197,114.00	100,626.00	(49,118.00)	95,167.00	38,832.00	3,195.00
6. Mortgage guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8. Ocean marine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9. Inland marine	182,717.00	202,689.00	0.00	93,196.00	32,917.00	24,422.00	5,334.00	0.00	(1,639.00)	2,011.00	26,520.00	3,779.00
10. Financial guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. Medical professional liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12. Earthquake	31,674.00	32,849.00	0.00	17,299.00	0.00	(613.00)	745.00	0.00	(201.00)	320.00	4,609.00	658.00
13. Group accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
14. Credit accident and health (group and individual)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.1 Collectively renewable accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.2 Non-cancelable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.3 Guaranteed renewable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.4 Non-renewable for stated reasons only (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.5 Other accident only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.6 Medicare Title XVIII exempt from state taxes or fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.7 All other accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.8 Federal employees health benefits plan premium (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
16. Workers' compensation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
17.1 Other Liability - occurrence	73,503.00	81,581.00	0.00	38,958.00	0.00	(15,454.00)	104,656.00	0.00	(178.00)	5,395.00	11,015.00	1,544.00
17.2 Other Liability - claims made	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
17.3 Excess workers' compensation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
18. Products liability	699.00	687.00	0.00	1,062.00	0.00	(46.00)	617.00	0.00	124.00	662.00	95.00	15.00
19.1 Private passenger auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.2 Other private passenger auto liability	15,880.00	16,762.00	0.00	4,160.00	33,515.00	55,448.00	55,631.00	0.00	(428.00)	1,962.00	2,039.00	331.00
19.3 Commercial auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.4 Other commercial auto liability	61,251.00	50,564.00	0.00	10,865.00	(800.00)	2,058.00	10,410.00	0.00	1,177.00	5,174.00	23,895.00	1,277.00
21.1 Private passenger auto physical damage	16,766.00	17,042.00	0.00	4,897.00	5,198.00	5,777.00	(218.00)	0.00	(5.00)	22.00	2,406.00	350.00
21.2 Commercial auto physical damage	20,718.00	16,241.00	0.00	4,477.00	11,113.00	13,624.00	2,531.00	0.00	19.00	33.00	8,938.00	432.00
22. Aircraft (all perils)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23. Fidelity	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
24. Surety	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
26. Burglary and theft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
27. Boiler and machinery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
28. Credit	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
29. International	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
30. Warranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34. Aggregate write-ins for other lines of business	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
35. TOTALS (a)	8,418,249.00	9,249,951.00	0.00	4,227,964.00	6,187,125.00	5,736,354.00	4,793,251.00	171,044.00	(12,327.00)	240,497.00	1,263,660.00	174,724.00
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

(a) Finance and service charges not included in Lines 1 to 35 \$27,001.00

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0.00 and number of persons insured under indemnity only products0.00



ANNUAL STATEMENT FOR THE YEAR 2020 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 2020

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	0.00	0.00	0.00	0.00	0.00	(3.00)	2.00	0.00	(2.00)	0.00	0.00	0.00
2.1 Allied lines	0.00	0.00	0.00	0.00	0.00	(53.00)	2.00	0.00	(2.00)	0.00	0.00	0.00
2.2 Multiple peril crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.3 Federal flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.4 Private crop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2.5 Private flood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. Farmowners multiple peril	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Homeowners multiple peril	7,539,647.00	8,389,312.00	0.00	3,813,874.00	5,733,614.00	5,549,946.00	4,329,538.00	68,584.00	34,535.00	123,799.00	1,093,815.00	156,994.00
5.1 Commercial multiple peril (non-liability portion)	298,288.00	276,884.00	0.00	153,128.00	62,125.00	97,417.00	86,889.00	1,834.00	3,391.00	5,952.00	55,457.00	6,149.00
5.2 Commercial multiple peril (liability portion)	177,106.00	165,340.00	0.00	86,048.00	309,443.00	3,831.00	197,114.00	100,626.00	(49,118.00)	95,167.00	38,832.00	3,195.00
6. Mortgage guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8. Ocean marine	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9. Inland marine	182,717.00	202,689.00	0.00	93,196.00	32,917.00	24,422.00	5,334.00	0.00	(1,639.00)	2,011.00	26,520.00	3,779.00
10. Financial guaranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. Medical professional liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12. Earthquake	31,674.00	32,849.00	0.00	17,299.00	0.00	(613.00)	745.00	0.00	(201.00)	320.00	4,609.00	658.00
13. Group accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
14. Credit accident and health (group and individual)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.1 Collectively renewable accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.2 Non-cancelable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.3 Guaranteed renewable accident and health(b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.4 Non-renewable for stated reasons only (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.5 Other accident only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.6 Medicare Title XVIII exempt from state taxes or fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.7 All other accident and health (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.8 Federal employees health benefits plan premium (b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
16. Workers' compensation	1,178,928.00	1,249,709.00	0.00	365,418.00	237,434.00	519,797.00	5,129,494.00	37,914.00	45,674.00	212,005.00	105,226.00	(12,138.00)
17.1 Other Liability - occurrence	74,389.00	82,358.00	0.00	39,067.00	0.00	(15,897.00)	104,213.00	0.00	(207.00)	5,366.00	11,158.00	1,514.00
17.2 Other Liability - claims made	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
17.3 Excess workers' compensation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
18. Products liability	699.00	687.00	0.00	1,062.00	0.00	(46.00)	617.00	0.00	124.00	662.00	95.00	15.00
19.1 Private passenger auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.2 Other private passenger auto liability	15,880.00	16,762.00	0.00	4,160.00	33,515.00	55,448.00	55,631.00	0.00	(428.00)	1,962.00	2,039.00	331.00
19.3 Commercial auto no-fault (personal injury protection)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19.4 Other commercial auto liability	61,251.00	50,564.00	0.00	10,865.00	(800.00)	2,058.00	10,410.00	0.00	1,177.00	5,174.00	23,895.00	1,277.00
21.1 Private passenger auto physical damage	16,766.00	17,042.00	0.00	4,897.00	5,198.00	5,777.00	(218.00)	0.00	(5.00)	22.00	2,406.00	350.00
21.2 Commercial auto physical damage	20,718.00	16,241.00	0.00	4,477.00	11,113.00	13,624.00	2,531.00	0.00	19.00	33.00	8,938.00	432.00
22. Aircraft (all perils)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23. Fidelity	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
24. Surety	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
26. Burglary and theft	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
27. Boiler and machinery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
28. Credit	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
29. International	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
30. Warranty	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34. Aggregate write-ins for other lines of business	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
35. TOTALS (a)	9,598,063.00	10,500,437.00	0.00	4,593,491.00	6,424,559.00	6,255,708.00	9,922,302.00	208,958.00	33,318.00	452,473.00	1,372,990.00	162,556.00
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

(a) Finance and service charges not included in Lines 1 to 35 \$30,431.00

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0.00 and number of persons insured under indemnity only products0.00

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year	2019	2018	2017
Reinsurance Effected	100	100	100
Reinsurance Canceled	100	100	100
Total	200	200	200

1 ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
		NONE			

ANNUAL STATEMENT FOR THE YEAR 2020 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 Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On								16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 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 Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
38-0421730	31534	CITIZENS INS CO OF AMERICA	MI		9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
0499999. Total Authorized - Affiliates - U.S. Non-Pool					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
0899999. Total Authorized - Affiliates					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2299999. Total Unauthorized - Affiliates					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
3299999. Total Certified - Affiliates - U.S. Non-Pool					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
3699999. Total Certified - Affiliates					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5099999. Total Reciprocal Jurisdiction - Affiliates					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
9999999 Totals					9,657.00000	0.00000	0.00000	5,097.00000	17.00000	5,211.00000	582.00000	4,613.00000	0.00000	15,520.00000	0.00000	0.00000	15,520.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
38-0421730	CITIZENS INS CO OF AMERICA	0.00000	0.00000		0.00000	0.00000	15,520.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
0899999. Total Authorized - Affiliates		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
2299999. Total Unauthorized - Affiliates		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
3299999. Total Certified - Affiliates - U.S. Non-Pool		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
3699999. Total Certified - Affiliates		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non- U.S.)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
5099999. Total Reciprocal Jurisdiction - Affiliates		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0.00000	0.00000	XXX	0.00000	0.00000	0.00000	0.00000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		0.00000	0.00000	XXX	0.00000	0.00000	15,520.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53	
		37	Overdue					43	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
			38	39	40	41	42												
		Current	1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38+39 +40+41	Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
38-0421730	CITIZENS INS CO OF AMERICA	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	YES	0.00000	
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
0899999. Total Authorized - Affiliates		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
2299999. Total Unauthorized - Affiliates		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
3299999. Total Certified - Affiliates - U.S. Non-Pool		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
3699999. Total Certified - Affiliates		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
5099999. Total Reciprocal Jurisdiction - Affiliates		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	
9999999 Totals		0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.0	0.0	0.0	XXX	0.00000	

SCHEDULE F - PART 3 (Continued)

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col. 22 + Col. 24) / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 20% of Amount in Col. 67	
38-0421730	CITIZENS INS CO OF AMERICA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
3699999. Total Certified - Affiliates				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
9999999 Totals				XXX	0.0000	0.0000	0.0000	XXX	XXX	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
38-0421730	CITIZENS INS CO OF AMERICA	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
0899999	Total Authorized - Affiliates	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0.00000	0.00000	0.00000	XXX	XXX	XXX	0.00000	XXX	0.00000
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0.00000	0.00000	0.00000	XXX	XXX	XXX	0.00000	XXX	0.00000
2299999	Total Unauthorized - Affiliates	0.00000	0.00000	0.00000	XXX	XXX	XXX	0.00000	XXX	0.00000
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0.00000	0.00000	0.00000	XXX	XXX	XXX	0.00000	XXX	0.00000
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
5099999	Total Reciprocal Jurisdiction - Affiliates	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0.00000	XXX	XXX	0.00000	0.00000	0.00000	XXX	XXX	0.00000
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
9999999	Totals	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
			NONE	
Total				

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.		0.000	0.00000
2.		0.000	0.00000
3.		0.000	0.00000
4.		0.000	0.00000
5.		0.000	0.00000

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3,Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	CITIZENS INS CO OF AMERICA	15,520.00000	9,657.00000	Yes [X] No []
7.		0.00000	0.00000	Yes [] No []
8.		0.00000	0.00000	Yes [] No []
9.		0.00000	0.00000	Yes [] No []
10.		0.00000	0.00000	Yes [] No []

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

SCHEDULE F - PART 6

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)	11,738,338.64	0.00	11,738,338.64
2. Premiums and considerations (Line 15)	0.00	0.00	0.00
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0.00	0.00	0.00
4. Funds held by or deposited with reinsured companies (Line 16.2)	0.00	0.00	0.00
5. Other assets	69,691.00	0.00	69,691.00
6. Net amount recoverable from reinsurers	0.00	15,520,000.00	15,520,000.00
7. Protected cell assets (Line 27)	0.00	0.00	0.00
8. Totals (Line 28)	11,808,029.64	15,520,000.00	27,328,029.64
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0.00	10,907,000.00	10,907,000.00
10. Taxes, expenses, and other obligations (Lines 4 through 8)	17,206.00	0.00	17,206.00
11. Unearned premiums (Line 9)	0.00	4,613,000.00	4,613,000.00
12. Advance premiums (Line 10)	0.00	0.00	0.00
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0.00	0.00	0.00
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	0.00	0.00	0.00
15. Funds held by company under reinsurance treaties (Line 13)	0.00	0.00	0.00
16. Amounts withheld or retained by company for account of others (Line 14)	0.00	0.00	0.00
17. Provision for reinsurance (Line 16)	0.00	0.00	0.00
18. Other liabilities	1,623.00	0.00	1,623.00
19. Total liabilities excluding protected cell business (Line 26)	18,829.00	15,520,000.00	15,538,829.00
20. Protected cell liabilities (Line 27)	0.00	0.00	0.00
21. Surplus as regards policyholders (Line 37)	11,789,201.00	XXX	11,789,201.00
22. Totals (Line 38)	11,808,030.00	15,520,000.00	27,328,030.00

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [X] 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 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Test of 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 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	(0.80004)	(0.80004)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	10,472.57029	10,472.57029	0.00000	12,736.27938	12,736.27938	107.47431	107.47431	1,125.92154	1,125.92154	0.00000	0.00000	2,537
3. 2012.....	13,749.06373	13,749.06373	0.00000	13,908.35341	13,908.35341	129.66239	129.66239	1,235.25142	1,235.25142	0.00000	0.00000	2,914
4. 2013.....	14,210.92573	14,210.92573	0.00000	8,442.52681	8,442.52681	125.28517	125.28517	793.03553	793.03553	0.00000	0.00000	1,766
5. 2014.....	11,704.58735	11,704.58735	0.00000	6,233.16356	6,233.16356	82.75626	82.75626	816.20007	816.20007	0.00000	0.00000	1,277
6. 2015.....	10,668.51051	10,668.51051	0.00000	4,220.87703	4,220.87703	57.25817	57.25817	721.99285	721.99285	0.00000	0.00000	998
7. 2016.....	9,931.05075	9,931.05075	0.00000	4,141.25496	4,141.25496	90.65158	90.65158	550.42427	550.42427	0.00000	0.00000	736
8. 2017.....	10,229.32845	10,229.32845	0.00000	5,075.34910	5,075.34910	82.47240	82.47240	716.92878	716.92878	0.00000	0.00000	978
9. 2018.....	10,865.41021	10,865.41021	0.00000	4,802.98825	4,802.98825	38.85602	38.85602	637.39216	637.39216	0.00000	0.00000	861
10. 2019.....	10,176.59902	10,176.59902	0.00000	6,979.12572	6,979.12572	98.15602	98.15602	697.52037	697.52037	0.00000	0.00000	980
11. 2020.....	8,389.31184	8,389.31184	0.00000	3,407.18889	3,407.18889	29.14715	29.14715	514.76248	514.76248	0.00000	0.00000	622
12. Totals	XXX	XXX	XXX	69,946.30707	69,946.30707	841.71947	841.71947	7,809.42947	7,809.42947	0.00000	0.00000	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	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.01995	0.01995	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	1.50682	1.50682	0.00000	0.00000	0.41547	0.41547	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	40.00000	40.00000	(1.44305)	(1.44305)	0.00000	0.00000	0.25187	0.25187	2.52227	2.52227	0.00000	0.00000	2
5. 2014.....	0.00000	0.00000	(0.29726)	(0.29726)	0.00000	0.00000	0.71262	0.71262	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	(0.03280)	(0.03280)	0.00000	0.00000	0.30439	0.30439	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	5.44990	5.44990	0.00000	0.00000	1.83567	1.83567	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	10.00000	10.00000	7.39966	7.39966	17.36605	17.36605	6.55818	6.55818	1.26114	1.26114	0.00000	0.00000	1
9. 2018.....	0.00000	0.00000	42.80337	42.80337	0.00000	0.00000	17.26551	17.26551	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	617.93857	617.93857	89.66798	89.66798	0.00000	0.00000	29.26292	29.26292	20.17818	20.17818	0.00000	0.00000	16
11. 2020.....	395.70960	395.70960	3,120.83569	3,120.83569	0.00000	0.00000	49.80611	49.80611	34.05067	34.05067	0.00000	0.00000	27
12. Totals	1,063.64817	1,063.64817	3,265.89031	3,265.89031	17.36605	17.36605	106.43269	106.43269	58.01226	58.01226	0.00000	0.00000	46

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	13,969.67523	13,969.67523	0.00000	133.4	133.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	15,275.18951	15,275.18951	0.00000	111.1	111.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	9,402.17860	9,402.17860	0.00000	66.2	66.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	7,132.53525	7,132.53525	0.00000	60.9	60.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	5,000.39964	5,000.39964	0.00000	46.9	46.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	4,789.61638	4,789.61638	0.00000	48.2	48.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	5,917.33531	5,917.33531	0.00000	57.8	57.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	5,539.30531	5,539.30531	0.00000	51.0	51.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	8,531.84976	8,531.84976	0.00000	83.8	83.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	7,551.50059	7,551.50059	0.00000	90.0	90.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	(0.11880)	(0.11880)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	216.94086	216.94086	0.00000	309.57823	309.57823	0.00000	0.00000	18.24333	18.24333	0.00000	0.00000	25
3. 2012.....	175.73790	175.73790	0.00000	91.74260	91.74260	16.84987	16.84987	19.39272	19.39272	0.00000	0.00000	32
4. 2013.....	129.89411	129.89411	0.00000	10.39073	10.39073	0.00000	0.00000	8.37852	8.37852	0.00000	0.00000	8
5. 2014.....	71.42985	71.42985	0.00000	21.27691	21.27691	0.00000	0.00000	3.81152	3.81152	0.00000	0.00000	7
6. 2015.....	51.73526	51.73526	0.00000	1.22179	1.22179	0.00000	0.00000	1.41428	1.41428	0.00000	0.00000	2
7. 2016.....	41.27783	41.27783	0.00000	3.85952	3.85952	0.00000	0.00000	3.24539	3.24539	0.00000	0.00000	6
8. 2017.....	31.81359	31.81359	0.00000	19.53567	19.53567	0.03900	0.03900	3.08726	3.08726	0.00000	0.00000	4
9. 2018.....	27.02388	27.02388	0.00000	0.00000	0.00000	0.00000	0.00000	1.59493	1.59493	0.00000	0.00000	2
10. 2019.....	21.83913	21.83913	0.00000	36.47408	36.47408	0.00000	0.00000	3.40278	3.40278	0.00000	0.00000	5
11. 2020.....	16.76174	16.76174	0.00000	2.15987	2.15987	0.00000	0.00000	1.65814	1.65814	0.00000	0.00000	1
12. Totals	XXX	XXX	XXX	496.12060	496.12060	16.88887	16.88887	64.22887	64.22887	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00014	0.00014	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00045	0.00045	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00081	0.00081	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00154	0.00154	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00062	0.00062	0.00000	0.00000	0.00438	0.00438	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.00245	0.00245	0.00000	0.00000	0.01212	0.01212	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.00869	0.00869	0.00000	0.00000	0.03053	0.03053	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	0.48570	0.48570	0.00000	0.00000	0.12693	0.12693	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	1.02731	1.02731	0.00000	0.00000	0.28491	0.28491	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	42.30000	42.30000	3.09797	3.09797	0.00000	0.00000	0.62566	0.62566	2.82431	2.82431	0.00000	0.00000	2
11. 2020.....	0.00000	0.00000	8.70834	8.70834	0.00000	0.00000	0.87404	0.87404	0.00000	0.00000	0.00000	0.00000	0
12. Totals	42.30000	42.30000	13.33108	13.33108	0.00000	0.00000	1.96151	1.96151	2.82431	2.82431	0.00000	0.00000	2

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	327.82201	327.82201	0.00000	151.1	151.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	127.98600	127.98600	0.00000	72.8	72.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	18.77079	18.77079	0.00000	14.5	14.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	25.09343	25.09343	0.00000	35.1	35.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	2.65064	2.65064	0.00000	5.1	5.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	7.14413	7.14413	0.00000	17.3	17.3	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	23.27456	23.27456	0.00000	73.2	73.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	2.90715	2.90715	0.00000	10.8	10.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	88.72480	88.72480	0.00000	406.3	406.3	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	13.40039	13.40039	0.00000	79.9	79.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	(0.80004)	(0.80004)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	37.91720	37.91720	0.00000	14.09359	14.09359	0.00000	0.00000	10.09544	10.09544	0.00000	0.00000	6
3. 2012.....	66.60815	66.60815	0.00000	11.03685	11.03685	0.00000	0.00000	4.43657	4.43657	0.00000	0.00000	3
4. 2013.....	56.44960	56.44960	0.00000	1.59337	1.59337	0.00000	0.00000	2.46452	2.46452	0.00000	0.00000	2
5. 2014.....	52.57910	52.57910	0.00000	14.96696	14.96696	0.00000	0.00000	8.25511	8.25511	0.00000	0.00000	5
6. 2015.....	48.65841	48.65841	0.00000	0.00000	0.00000	0.00000	0.00000	3.92456	3.92456	0.00000	0.00000	1
7. 2016.....	36.79490	36.79490	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	32.10457	32.10457	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	28.84389	28.84389	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	27.09950	27.09950	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	50.56364	50.56364	0.00000	0.00000	0.00000	0.00000	0.00000	2.78123	2.78123	0.00000	0.00000	1
12. Totals	XXX	XXX	XXX	40.89073	40.89073	0.00000	0.00000	31.95743	31.95743	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.13225	0.13225	0.00000	0.00000	0.00601	0.00601	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.05547	0.05547	0.00000	0.00000	0.00137	0.00137	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.02690	0.02690	0.00000	0.00000	0.04170	0.04170	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.03568	0.03568	0.00000	0.00000	0.05173	0.05173	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	0.13111	0.13111	0.00000	0.00000	0.22157	0.22157	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	0.74497	0.74497	0.00000	0.00000	1.12051	1.12051	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	2.15071	2.15071	0.00000	0.00000	1.63211	1.63211	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	7.13326	7.13326	0.00000	0.00000	2.09907	2.09907	0.00000	0.00000	0.00000	0.00000	0
12. Totals	0.00000	0.00000	10.41035	10.41035	0.00000	0.00000	5.17407	5.17407	0.00000	0.00000	0.00000	0.00000	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	24.18903	24.18903	0.00000	63.8	63.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	15.47342	15.47342	0.00000	23.2	23.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	4.05789	4.05789	0.00000	7.2	7.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	23.27891	23.27891	0.00000	44.3	44.3	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	3.99316	3.99316	0.00000	8.2	8.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	0.08741	0.08741	0.00000	0.2	0.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	0.35268	0.35268	0.00000	1.1	1.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	1.86548	1.86548	0.00000	6.5	6.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	3.78282	3.78282	0.00000	14.0	14.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	12.01356	12.01356	0.00000	23.8	23.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	21.12289	21.12289	3.44699	3.44699	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	5,127.67202	5,127.67202	0.00000	1,523.43450	1,523.43450	102.90353	102.90353	935.57620	935.57620	0.00000	0.00000	538
3. 2012.....	5,042.20145	5,042.20145	0.00000	2,203.74771	2,203.74771	100.60501	100.60501	378.14461	378.14461	0.00000	0.00000	478
4. 2013.....	4,212.75628	4,212.75628	0.00000	1,640.63948	1,640.63948	98.43758	98.43758	319.60951	319.60951	0.00000	0.00000	419
5. 2014.....	4,126.09727	4,126.09727	0.00000	1,359.96511	1,359.96511	131.29824	131.29824	618.00042	618.00042	0.00000	0.00000	490
6. 2015.....	3,767.20140	3,767.20140	0.00000	1,431.98645	1,431.98645	60.30292	60.30292	396.50525	396.50525	0.00000	0.00000	379
7. 2016.....	2,163.90390	2,163.90390	0.00000	2,892.72701	2,892.72701	97.38635	97.38635	187.28482	187.28482	0.00000	0.00000	168
8. 2017.....	1,315.62084	1,315.62084	0.00000	257.72654	257.72654	13.87794	13.87794	91.01080	91.01080	0.00000	0.00000	122
9. 2018.....	1,393.31404	1,393.31404	0.00000	150.12550	150.12550	6.43832	6.43832	70.15873	70.15873	0.00000	0.00000	94
10. 2019.....	1,416.22255	1,416.22255	0.00000	211.18580	211.18580	21.36318	21.36318	146.68897	146.68897	0.00000	0.00000	170
11. 2020	1,314.38248	1,314.38248	0.00000	108.78090	108.78090	5.68816	5.68816	153.56516	153.56516	0.00000	0.00000	155
12. Totals	XXX	XXX	XXX	11,801.44189	11,801.44189	641.74822	641.74822	3,296.54447	3,296.54447	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	148.01962	148.01962	605.74865	605.74865	0.00000	0.00000	69.63259	69.63259	9.36231	9.36231	0.00000	0.00000	6
2. 2011.....	3.90501	3.90501	48.29783	48.29783	0.00000	0.00000	7.71947	7.71947	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	8.60056	8.60056	110.11585	110.11585	0.00000	0.00000	10.31968	10.31968	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	184.83913	184.83913	125.61180	125.61180	0.00000	0.00000	10.66384	10.66384	3.12077	3.12077	0.00000	0.00000	2
5. 2014.....	27.14287	27.14287	105.52459	105.52459	0.00000	0.00000	8.86670	8.86670	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	35.81866	35.81866	77.50473	77.50473	0.00000	0.00000	9.36570	9.36570	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	2,688.36667	2,688.36667	105.53622	105.53622	0.00000	0.00000	9.78805	9.78805	6.24154	6.24154	0.00000	0.00000	4
8. 2017.....	10.56121	10.56121	64.28658	64.28658	0.00000	0.00000	9.12054	9.12054	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	20.98835	20.98835	60.69439	60.69439	0.00000	0.00000	17.44783	17.44783	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	531.67665	531.67665	81.58052	81.58052	0.00000	0.00000	24.44917	24.44917	9.36231	9.36231	0.00000	0.00000	6
11. 2020.....	226.10150	226.10150	244.12127	244.12127	0.00000	0.00000	34.63134	34.63134	48.37191	48.37191	0.00000	0.00000	31
12. Totals.....	3,886.02023	3,886.02023	1,629.02243	1,629.02243	0.00000	0.00000	212.00491	212.00491	76.45884	76.45884	0.00000	0.00000	49

	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	27	28	29	30	31	32	33		35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	2,621.83654	2,621.83654	0.00000	51.1	51.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	2,811.53342	2,811.53342	0.00000	55.8	55.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	2,382.92211	2,382.92211	0.00000	56.6	56.6	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	2,250.79793	2,250.79793	0.00000	54.6	54.6	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	2,011.48371	2,011.48371	0.00000	53.4	53.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	5,987.33066	5,987.33066	0.00000	276.7	276.7	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	446.58361	446.58361	0.00000	33.9	33.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	325.85312	325.85312	0.00000	23.4	23.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	1,026.30660	1,026.30660	0.00000	72.5	72.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	821.26024	821.26024	0.00000	62.5	62.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	1.26618	1.26618	(0.79333)	(0.79333)	0.00000	0.00000	XXX
2. 2011.....	662.33036	662.33036	0.00000	150.24977	150.24977	1.56950	1.56950	18.96820	18.96820	0.00000	0.00000	28
3. 2012.....	818.09416	818.09416	0.00000	619.49525	619.49525	171.67304	171.67304	39.47967	39.47967	0.00000	0.00000	42
4. 2013.....	850.10124	850.10124	0.00000	54.19750	54.19750	0.01995	0.01995	21.52361	21.52361	0.00000	0.00000	26
5. 2014.....	941.33034	941.33034	0.00000	122.20030	122.20030	0.16935	0.16935	32.57415	32.57415	0.00000	0.00000	32
6. 2015.....	877.60119	877.60119	0.00000	465.64434	465.64434	366.88369	366.88369	36.27901	36.27901	0.00000	0.00000	31
7. 2016.....	861.86199	861.86199	0.00000	212.08444	212.08444	2.10730	2.10730	42.90982	42.90982	0.00000	0.00000	34
8. 2017.....	787.61894	787.61894	0.00000	127.92373	127.92373	0.96692	0.96692	39.95580	39.95580	0.00000	0.00000	27
9. 2018.....	635.57840	635.57840	0.00000	51.63733	51.63733	11.29824	11.29824	30.17181	30.17181	0.00000	0.00000	22
10. 2019.....	472.23533	472.23533	0.00000	20.16861	20.16861	1.83320	1.83320	14.04260	14.04260	0.00000	0.00000	9
11. 2020.....	442.22355	442.22355	0.00000	58.80059	58.80059	1.83390	1.83390	25.14849	25.14849	0.00000	0.00000	16
12. Totals	XXX	XXX	XXX	1,882.40186	1,882.40186	559.62127	559.62127	300.25983	300.25983	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	42.50200	42.50200	3.67618	3.67618	0.00000	0.00000	2.71934	2.71934	5.97481	5.97481	0.00000	0.00000	6
2. 2011.....	0.00000	0.00000	0.86266	0.86266	0.00000	0.00000	1.41684	1.41684	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	3.25165	3.25165	0.00000	0.00000	0.87049	0.87049	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.26672	0.26672	0.00000	0.00000	2.22204	2.22204	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	8.64518	8.64518	0.00000	0.00000	2.57687	2.57687	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	4.36379	4.36379	0.00000	0.00000	3.86370	3.86370	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	9.37784	9.37784	0.00000	0.00000	10.48192	10.48192	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	18.88229	18.88229	0.00000	0.00000	15.63941	15.63941	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	34.36539	34.36539	0.00000	0.00000	24.50673	24.50673	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	60.00000	60.00000	97.80928	97.80928	0.00000	0.00000	36.82113	36.82113	2.98741	2.98741	0.00000	0.00000	3
12. Totals	102.50200	102.50200	181.50098	181.50098	0.00000	0.00000	101.11847	101.11847	8.96222	8.96222	0.00000	0.00000	9

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	173.06697	173.06697	0.00000	26.1	26.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	830.64796	830.64796	0.00000	101.5	101.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	79.86320	79.86320	0.00000	9.4	9.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	157.43256	157.43256	0.00000	16.7	16.7	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	880.02909	880.02909	0.00000	100.3	100.3	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	265.32905	265.32905	0.00000	30.8	30.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	188.70621	188.70621	0.00000	24.0	24.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	127.62908	127.62908	0.00000	20.1	20.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	94.91653	94.91653	0.00000	20.1	20.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	283.40080	283.40080	0.00000	64.1	64.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

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 2020 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
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
3. 2012.....	0.27671	0.27671	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
4. 2013.....	0.53378	0.53378	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
5. 2014.....	0.00051	0.00051	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
6. 2015.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
7. 2016.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
8. 2017.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
9. 2018.....	0.06400	0.06400	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
10. 2019.....	0.03200	0.03200	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
11. 2020.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
12. Totals.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
12. Totals.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	443.62264	443.62264	0.00000	425.00000	425.00000	2.67891	2.67891	16.05673	16.05673	0.00000	0.00000	5
3. 2012.....	470.26325	470.26325	0.00000	1.60092	1.60092	0.02075	0.02075	22.35117	22.35117	0.00000	0.00000	10
4. 2013.....	348.68002	348.68002	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	247.61362	247.61362	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	155.00553	155.00553	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	129.60147	129.60147	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	129.60709	129.60709	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	113.22771	113.22771	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	98.79101	98.79101	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	82.35735	82.35735	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
12. Totals	XXX	XXX	XXX	426.60092	426.60092	2.69966	2.69966	38.40790	38.40790	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.85771	0.85771	0.00000	0.00000	0.10085	0.10085	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00001	0.00001	0.00000	0.00000	0.04805	0.04805	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.07318	0.07318	0.00000	0.00000	0.01104	0.01104	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.84571	0.84571	0.00000	0.00000	0.11715	0.11715	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	5.55566	5.55566	0.00000	0.00000	0.21584	0.21584	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	10.13457	10.13457	0.00000	0.00000	0.47145	0.47145	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	28.34629	28.34629	0.00000	0.00000	1.20672	1.20672	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	58.39989	58.39989	0.00000	0.00000	3.19432	3.19432	0.00000	0.00000	0.00000	0.00000	0
12. Totals	0.00000	0.00000	104.21302	104.21302	0.00000	0.00000	5.36542	5.36542	0.00000	0.00000	0.00000	0.00000	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	27	28	29	30	31	32	33		35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	443.73564	443.73564	0.00000	100.0	100.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	23.97284	23.97284	0.00000	5.1	5.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	0.04806	0.04806	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	0.08422	0.08422	0.00000	0.1	0.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	0.96286	0.96286	0.00000	0.7	0.7	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	5.77150	5.77150	0.00000	4.5	4.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	10.60602	10.60602	0.00000	9.4	9.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	29.55301	29.55301	0.00000	29.9	29.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	61.59421	61.59421	0.00000	74.8	74.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00281	0.00281	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.11869	0.11869	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.13050	0.13050	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.13726	0.13726	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.03474	0.03474	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
12. Totals	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00038	0.00038	0.00000	0.00000	0.00000	0.00000	0
12. Totals	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00038	0.00038	0.00000	0.00000	0.00000	0.00000	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	27	28	29	30	31	32	33		35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	0.00038	0.00038	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SCHEDULE P - PART 11 - 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2019	293.99305	293.99305	0.00000	177.18827	177.18827	0.00000	0.00000	14.27715	14.27715	0.00000	0.00000	XXX
3. 2020	235.53859	235.53859	0.00000	19.72994	19.72994	0.00000	0.00000	5.59335	5.59335	0.00000	0.00000	XXX
4. Totals	XXX	XXX	XXX	196.91821	196.91821	0.00000	0.00000	19.87050	19.87050	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0.00000	0.00000	0.93181	0.93181	0.00000	0.00000	0.52818	0.52818	0.00000	0.00000	0.00000	0.00000	0
2. 2019	0.00000	0.00000	0.83088	0.83088	0.00000	0.00000	0.45024	0.45024	0.00000	0.00000	0.00000	0.00000	0
3. 2020	0.00000	0.00000	4.31983	4.31983	0.00000	0.00000	1.35266	1.35266	0.00000	0.00000	0.00000	0.00000	0
4. Totals	0.00000	0.00000	6.08252	6.08252	0.00000	0.00000	2.33108	2.33108	0.00000	0.00000	0.00000	0.00000	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2019	192.74654	192.74654	0.00000	65.6	65.6	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2020	30.99578	30.99578	0.00000	13.2	13.2	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

ANNUAL STATEMENT FOR THE YEAR 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2019.....	28.98328	28.98328	0.00000	16.03228	16.03228	0.00000	0.00000	0.43283	0.43283	0.00000	0.00000	6
3. 2020.....	33.28262	33.28262	0.00000	16.66621	16.66621	0.00000	0.00000	14.40005	14.40005	0.00000	0.00000	5
4. Totals.....	XXX	XXX	XXX	32.69849	32.69849	0.00000	0.00000	14.83288	14.83288	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0.00000	0.00000	0.00257	0.00257	0.00000	0.00000	0.00820	0.00820	0.00000	0.00000	0.00000	0.00000	0
2. 2019	0.00000	0.00000	0.00876	0.00876	0.00000	0.00000	0.00813	0.00813	0.00000	0.00000	0.00000	0.00000	0
3. 2020	2.50000	2.50000	(0.19856)	(0.19856)	0.00000	0.00000	0.03874	0.03874	0.71253	0.71253	0.00000	0.00000	1
4. Totals	2.50000	2.50000	(0.18723)	(0.18723)	0.00000	0.00000	0.05507	0.05507	0.71253	0.71253	0.00000	0.00000	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	27	28	29	30	31	32	33		35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2019.....	16.48200	16.48200	0.00000	56.9	56.9	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2020.....	34.11897	34.11897	0.00000	102.5	102.5	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

Schedule P - Part 1K - Fidelity/Surety

N O N E

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 2020 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX
2. 2011.....	(1.42091)	(1.42091)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.97595	0.97595	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	2.50655	2.50655	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	1.25530	1.25530	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.68660	0.68660	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
12. Totals	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.00000	0.00000	0.01014	0.01014	0.00000	0.00000	0.01089	0.01089	0.00000	0.00000	0.00000	0.00000	0
2. 2011.....	0.00000	0.00000	(0.00668)	(0.00668)	0.00000	0.00000	(0.00717)	(0.00717)	0.00000	0.00000	0.00000	0.00000	0
3. 2012.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
4. 2013.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
5. 2014.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
6. 2015.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
7. 2016.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0
8. 2017.....	0.00000	0.00000	0.05681	0.05681	0.00000	0.00000	0.06101	0.06101	0.00000	0.00000	0.00000	0.00000	0
9. 2018.....	0.00000	0.00000	0.22206	0.22206	0.00000	0.00000	0.23846	0.23846	0.00000	0.00000	0.00000	0.00000	0
10. 2019.....	0.00000	0.00000	0.18921	0.18921	0.00000	0.00000	0.20319	0.20319	0.00000	0.00000	0.00000	0.00000	0
11. 2020.....	0.00000	0.00000	0.14511	0.14511	0.00000	0.00000	0.15583	0.15583	0.00000	0.00000	0.00000	0.00000	0
12. Totals	0.00000	0.00000	0.61665	0.61665	0.00000	0.00000	0.66221	0.66221	0.00000	0.00000	0.00000	0.00000	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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	0.00000	0.00000	XXX	0.00000	0.00000
2. 2011.....	(0.01385)	(0.01385)	0.00000	1.0	1.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
3. 2012.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
4. 2013.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
5. 2014.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
6. 2015.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
7. 2016.....	0.00000	0.00000	0.00000	0.0	0.0	0.0	0.00000	0.00000	0.0	0.00000	0.00000
8. 2017.....	0.11782	0.11782	0.00000	12.1	12.1	0.0	0.00000	0.00000	0.0	0.00000	0.00000
9. 2018.....	0.46052	0.46052	0.00000	18.4	18.4	0.0	0.00000	0.00000	0.0	0.00000	0.00000
10. 2019.....	0.39240	0.39240	0.00000	31.3	31.3	0.0	0.00000	0.00000	0.0	0.00000	0.00000
11. 2020.....	0.30094	0.30094	0.00000	43.8	43.8	0.0	0.00000	0.00000	0.0	0.00000	0.00000
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	XXX	0.00000	0.00000

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 2020 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	2	3	4	5	6	7	8	9	10		
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020		
1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	20	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2,004	533
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2,260	654
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	1,280	484
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	895	382
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	692	306
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	525	211
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	687	290
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	595	266
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	697	267
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	422	173

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

1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	1	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	22	3
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	28	4
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	6	2
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	5	2
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	1	1
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	3	3
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	2	2
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0	2
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	3	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	1	0

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

1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	5	1
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	3	0
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2	0
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2	3
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	1
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0	1

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

1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	77	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	313	225
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	304	174
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	233	184
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	236	254
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	148	231
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	128	36
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	98	24
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	56	38
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	120	44
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	92	32

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	15	13
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	23	19
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	16	10
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	19	13
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	20	11
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	20	14
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	18	9
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	13	9
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	5	4
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	7	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	2	3	4	5	6	7	8	9	10		
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020		
1. Prior.....	.000											
2. 2011.....												
3. 2012.....	XXX											
4. 2013.....	XXX	XXX										
5. 2014.....	XXX	XXX	XXX									
6. 2015.....	XXX	XXX	XXX	XXX								
7. 2016.....	XXX	XXX	XXX	XXX	XXX							
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1. Prior.....	.000											
2. 2011.....												
3. 2012.....	XXX											
4. 2013.....	XXX	XXX										
5. 2014.....	XXX	XXX	XXX									
6. 2015.....	XXX	XXX	XXX	XXX								
7. 2016.....	XXX	XXX	XXX	XXX	XXX							
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2020.....	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. 2011.....											XXX	XXX
3. 2012.....	XXX										XXX	XXX
4. 2013.....	XXX	XXX									XXX	XXX
5. 2014.....	XXX	XXX	XXX								XXX	XXX
6. 2015.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2016.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

1. Prior.....	.000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	1	4
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	2	8
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
5. 2014.....	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0	0

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

1. Prior.....	.000											
2. 2011.....												
3. 2012.....	XXX											
4. 2013.....	XXX	XXX										
5. 2014.....	XXX	XXX	XXX									
6. 2015.....	XXX	XXX	XXX	XXX								
7. 2016.....	XXX	XXX	XXX	XXX	XXX							
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2020.....	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	2	3	4	5	6	7	8	9	10		
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	0.00000	0.00000	0	0
2. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	5	1
3. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	4	0

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	.000										XXX	XXX
2. 2011.....											XXX	XXX
3. 2012.....	XXX										XXX	XXX
4. 2013.....	XXX	XXX									XXX	XXX
5. 2014.....	XXX	XXX	XXX								XXX	XXX
6. 2015.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2016.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	126	8	6	2	1	3	0	0	0	0
2. 2011.....	1,753	1,990	1,996	1,999	2,001	2,004	2,004	2,004	2,004	2,004
3. 2012.....	XXX	1,991	2,243	2,257	2,260	2,260	2,260	2,260	2,260	2,260
4. 2013.....	XXX	XXX	1,135	1,265	1,277	1,279	1,279	1,279	1,279	1,280
5. 2014.....	XXX	XXX	XXX	814	885	894	895	895	895	895
6. 2015.....	XXX	XXX	XXX	XXX	620	688	691	692	692	692
7. 2016.....	XXX	XXX	XXX	XXX	XXX	455	518	524	525	525
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	585	677	685	687
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	526	587	595
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	598	697
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	422

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	13	9	5	1	3	0	0	0	0	0
2. 2011.....	72	4	4	0	0	0	0	0	0	0
3. 2012.....	XXX	101	5	1	1	0	0	0	0	0
4. 2013.....	XXX	XXX	68	14	6	2	2	2	2	2
5. 2014.....	XXX	XXX	XXX	43	8	1	1	1	0	0
6. 2015.....	XXX	XXX	XXX	XXX	41	5	1	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	49	4	1	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	43	11	3	1
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	3	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	16
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	94	9	3	1	3	0	0	0	0	0
2. 2011.....	2,264	2,522	2,530	2,531	2,534	2,537	2,537	2,537	2,537	2,537
3. 2012.....	XXX	2,667	2,896	2,911	2,914	2,914	2,914	2,914	2,914	2,914
4. 2013.....	XXX	XXX	1,625	1,756	1,763	1,764	1,764	1,764	1,765	1,766
5. 2014.....	XXX	XXX	XXX	1,197	1,265	1,276	1,277	1,277	1,277	1,277
6. 2015.....	XXX	XXX	XXX	XXX	928	996	998	998	998	998
7. 2016.....	XXX	XXX	XXX	XXX	XXX	676	730	735	736	736
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	877	973	977	978
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	788	854	861
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	896	980
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	622

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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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	8	0	0	1	0	0	0	0	0	0
2. 2011.....	16	20	22	22	22	22	22	22	22	22
3. 2012.....	XXX	19	26	27	28	28	28	28	28	28
4. 2013.....	XXX	XXX	6	6	6	6	6	6	6	6
5. 2014.....	XXX	XXX	XXX	5	5	5	5	5	5	5
6. 2015.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2016.....	XXX	XXX	XXX	XXX	XXX	2	3	3	3	3
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	1	2	2	2
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	3
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	2	2	1	0	0	0	0	0	0	0
2. 2011.....	3	0	0	0	0	0	0	0	0	0
3. 2012.....	XXX	4	1	1	0	0	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	1	0	0	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	1	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	4	0	0	0	0	0	0	0	0	0
2. 2011.....	21	23	25	25	25	25	25	25	25	25
3. 2012.....	XXX	27	31	32	32	32	32	32	32	32
4. 2013.....	XXX	XXX	8	8	8	8	8	8	8	8
5. 2014.....	XXX	XXX	XXX	7	7	7	7	7	7	7
6. 2015.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2
7. 2016.....	XXX	XXX	XXX	XXX	XXX	6	6	6	6	6
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	3	4	4	4
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	5
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

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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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2011.....	5	5	5	5	5	5	5	5	5	5
3. 2012.....	XXX	2	3	3	3	3	3	3	3	3
4. 2013.....	XXX	XXX	2	2	2	2	2	2	2	2
5. 2014.....	XXX	XXX	XXX	0	2	2	2	2	2	2
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	2	0	0	0	0	0	0	0	0	0
2. 2011.....	0	0	0	0	0	0	0	0	0	0
3. 2012.....	XXX	1	0	0	0	0	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	1	1	0	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	1	(2)	0	0	0	0	0	0	0	0
2. 2011.....	6	6	6	6	6	6	6	6	6	6
3. 2012.....	XXX	3	3	3	3	3	3	3	3	3
4. 2013.....	XXX	XXX	2	2	2	2	2	2	2	2
5. 2014.....	XXX	XXX	XXX	2	5	5	5	5	5	5
6. 2015.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	143	34	24	8	2	5	2	2	0	0
2. 2011.....	204	296	300	307	312	313	313	313	313	313
3. 2012.....	XXX	200	279	295	299	304	304	304	304	304
4. 2013.....	XXX	XXX	147	209	225	233	233	233	233	233
5. 2014.....	XXX	XXX	XXX	147	217	233	236	236	236	236
6. 2015.....	XXX	XXX	XXX	XXX	105	136	143	148	148	148
7. 2016.....	XXX	XXX	XXX	XXX	XXX	94	123	128	128	128
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	69	97	98	98
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	54	56
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	120
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	92

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	79	50	29	20	18	13	8	6	6	6
2. 2011.....	91	16	12	6	2	0	0	0	0	0
3. 2012.....	XXX	87	19	8	4	0	0	0	0	0
4. 2013.....	XXX	XXX	67	21	8	2	2	2	2	2
5. 2014.....	XXX	XXX	XXX	83	26	4	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	41	14	4	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	27	6	2	2	4
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	21	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	1	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	6
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	73	16	10	(1)	0	1	(2)	0	0	0
2. 2011.....	476	534	535	537	538	538	538	538	538	538
3. 2012.....	XXX	407	466	471	477	478	478	478	478	478
4. 2013.....	XXX	XXX	358	413	417	419	419	419	419	419
5. 2014.....	XXX	XXX	XXX	423	488	490	490	490	490	490
6. 2015.....	XXX	XXX	XXX	XXX	367	378	378	379	379	379
7. 2016.....	XXX	XXX	XXX	XXX	XXX	149	165	166	166	168
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	108	121	122	122
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77	93	94
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	147	170
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	155

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	4	0	1	0	0	0	0	1	0	0
2. 2011.....	13	15	15	15	15	15	15	15	15	15
3. 2012.....	XXX	19	21	21	23	23	23	23	23	23
4. 2013.....	XXX	XXX	15	16	16	16	16	16	16	16
5. 2014.....	XXX	XXX	XXX	16	18	19	19	19	19	19
6. 2015.....	XXX	XXX	XXX	XXX	15	19	19	19	19	20
7. 2016.....	XXX	XXX	XXX	XXX	XXX	12	20	20	20	20
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	12	18	18	18
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	10	13
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	5
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	5	3	3	5	6	5	9	9	7	6
2. 2011.....	1	0	0	0	0	0	0	0	0	0
3. 2012.....	XXX	5	3	4	0	0	0	0	0	0
4. 2013.....	XXX	XXX	2	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	7	1	0	1	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	6	2	2	2	2	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	7	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	4	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	1	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	4	(2)	2	2	2	(1)	4	1	(2)	(1)
2. 2011.....	23	28	28	28	28	28	28	28	28	28
3. 2012.....	XXX	32	41	42	42	42	42	42	42	42
4. 2013.....	XXX	XXX	23	26	26	26	26	26	26	26
5. 2014.....	XXX	XXX	XXX	29	31	31	32	32	32	32
6. 2015.....	XXX	XXX	XXX	XXX	27	31	31	31	31	31
7. 2016.....	XXX	XXX	XXX	XXX	XXX	28	33	34	34	34
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	24	27	27	27
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	20	22
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	9
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

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 2020 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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2011.....	0	0	1	1	1	1	1	1	1	1
3. 2012.....	XXX	2	2	2	2	2	2	2	2	2
4. 2013.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2011.....	1	0	0	0	0	0	0	0	0	0
3. 2012.....	XXX	3	0	0	0	0	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	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	2	3	4	5	6	7	8	9	10
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior.....	(1)	0	0	0	0	0	0	0	0	0
2. 2011.....	4	4	5	5	5	5	5	5	5	5
3. 2012.....	XXX	10	10	10	10	10	10	10	10	10
4. 2013.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2020.....	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 2020 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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	0.00000
3. 2012.....	XXX	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	0.00000
4. 2013.....	XXX	XXX	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	0.00000
5. 2014.....	XXX	XXX	XXX	52.57910	52.57910	52.57910	52.57910	52.57910	52.57910	52.57910	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	48.65841	48.65841	48.65841	48.65841	48.65841	48.65841	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	36.79490	36.79490	36.79490	36.79490	36.79490	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	32.10457	32.10457	32.10457	32.10457	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28.84389	28.84389	28.84389	0.00000
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27.09950	27.09950	0.00000
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50.56364	50.56364
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50.56364
13. Earned Premiums (Sch P-Pt. 1)	37.91720	66.60815	56.44960	52.57910	48.65841	36.79490	32.10457	28.84389	27.09950	50.56364	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	37.91720	0.00000
3. 2012.....	XXX	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	66.60815	0.00000
4. 2013.....	XXX	XXX	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	56.44960	0.00000
5. 2014.....	XXX	XXX	XXX	52.57910	52.57910	52.57910	52.57910	52.57910	52.57910	52.57910	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	48.65841	48.65841	48.65841	48.65841	48.65841	48.65841	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	36.79490	36.79490	36.79490	36.79490	36.79490	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	32.10457	32.10457	32.10457	32.10457	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28.84389	28.84389	28.84389	0.00000
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27.09950	27.09950	0.00000
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50.56364	50.56364
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50.56364
13. Earned Premiums (Sch P-Pt. 1)	37.91720	66.60815	56.44960	52.57910	48.65841	36.79490	32.10457	28.84389	27.09950	50.56364	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	3.70144	1.40041	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	5,123.97058	5,209.68475	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	0.00000
3. 2012.....	XXX	4,955.08687	5,031.26100	5,025.03034	5,021.45459	5,021.36359	5,021.36359	5,021.36359	5,021.36359	5,021.36359	0.00000
4. 2013.....	XXX	XXX	4,131.95315	4,153.21674	4,147.82967	4,147.29142	4,147.29142	4,147.29142	4,147.29142	4,147.29142	0.00000
5. 2014.....	XXX	XXX	XXX	4,111.06434	4,120.91886	4,119.30369	4,119.30369	4,119.30369	4,119.30369	4,119.30369	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	3,766.30970	3,795.26167	3,795.26167	3,794.87767	3,794.87767	3,794.87767	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	2,137.19635	2,137.19635	2,140.80010	2,140.80010	2,140.80010	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	1,315.62084	1,415.12256	1,411.84779	1,411.52212	(0.32567)
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,290.59257	1,338.21661	1,330.35753	(7.85908)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,371.87328	1,437.39178	65.51850
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,257.04873	1,257.04873
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,314.38248
13. Earned Premiums (Sch P-Pt. 1)	5,127.67202	5,042.20145	4,212.75628	4,126.09727	3,767.20140	2,163.90390	1,315.62084	1,393.31404	1,416.22255	1,314.38248	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	3.70144	1.40041	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	5,123.97058	5,209.68475	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	5,214.31375	0.00000
3. 2012.....	XXX	4,955.08687	5,031.26100	5,025.03034	5,021.45459	5,021.36359	5,021.36359	5,021.36359	5,021.36359	5,021.36359	0.00000
4. 2013.....	XXX	XXX	4,131.95315	4,153.21674	4,147.82967	4,147.29142	4,147.29142	4,147.29142	4,147.29142	4,147.29142	0.00000
5. 2014.....	XXX	XXX	XXX	4,111.06434	4,120.91886	4,119.30369	4,119.30369	4,119.30369	4,119.30369	4,119.30369	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	3,766.30970	3,795.26167	3,795.26167	3,794.87767	3,794.87767	3,794.87767	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	2,137.19635	2,137.19635	2,140.80010	2,140.80010	2,140.80010	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	1,315.62084	1,415.12256	1,411.84779	1,411.52212	(0.32567)
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,290.59257	1,338.21661	1,330.35753	(7.85908)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,371.87328	1,437.39178	65.51850
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,257.04873	1,257.04873
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,314.38248
13. Earned Premiums (Sch P-Pt. 1)	5,127.67202	5,042.20145	4,212.75628	4,126.09727	3,767.20140	2,163.90390	1,315.62084	1,393.31404	1,416.22255	1,314.38248	XXX

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(1.66683)	0.03983	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	663.99719	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	0.00000
3. 2012.....	XXX	817.35016	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	0.00000
4. 2013.....	XXX	XXX	846.43241	845.84424	845.84424	845.84424	845.84424	845.84424	845.84424	845.84424	0.00000
5. 2014.....	XXX	XXX	XXX	941.91851	940.51560	940.51560	940.51560	940.51560	940.51560	940.51560	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	879.00410	879.09910	879.09910	879.09910	879.09910	879.09910	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	861.76699	861.76699	862.06166	862.06166	862.06166	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	787.61894	791.50627	792.59252	792.59252	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	631.39640	620.93315	621.13023	0.19708
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	481.61233	482.30425	0.69192
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	441.33455	441.33455
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	442.22355
13. Earned Premiums (Sch P-Pt. 1)	662.33036	818.09416	850.10124	941.33034	877.60119	861.86199	787.61894	635.57840	472.23533	442.22355	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(1.66683)	0.03983	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	663.99719	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	664.70136	0.00000
3. 2012.....	XXX	817.35016	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	821.01899	0.00000
4. 2013.....	XXX	XXX	846.43241	845.84424	845.84424	845.84424	845.84424	845.84424	845.84424	845.84424	0.00000
5. 2014.....	XXX	XXX	XXX	941.91851	940.51560	940.51560	940.51560	940.51560	940.51560	940.51560	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	879.00410	879.09910	879.09910	879.09910	879.09910	879.09910	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	861.76699	861.76699	862.06166	862.06166	862.06166	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	787.61894	791.50627	792.59252	792.59252	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	631.39640	620.93315	621.13023	0.19708
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	481.61233	482.30425	0.69192
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	441.33455	441.33455
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	442.22355
13. Earned Premiums (Sch P-Pt. 1)	662.33036	818.09416	850.10124	941.33034	877.60119	861.86199	787.61894	635.57840	472.23533	442.22355	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(0.01567)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	0.00000
3. 2012.....	XXX	470.26325	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	0.00000
4. 2013.....	XXX	XXX	348.64576	349.93642	349.93642	349.93642	349.93642	349.93642	349.93642	349.93642	0.00000
5. 2014.....	XXX	XXX	XXX	246.32296	246.18576	246.18576	246.18576	246.18576	246.18576	246.18576	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	155.14273	155.14273	155.14273	155.14273	155.14273	155.14273	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	129.60147	129.60147	129.60147	129.60147	129.60147	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	129.60709	131.04859	131.10992	131.10992	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111.78621	111.90888	111.83721	(0.07167)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98.60701	98.24868	(0.35833)
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82.78735	82.78735
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82.35735
13. Earned Premiums (Sch P-Pt. 1)	443.62264	470.26325	348.68002	247.61362	155.00553	129.60147	129.60709	113.22771	98.79101	82.35735	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(0.01567)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	443.63831	0.00000
3. 2012.....	XXX	470.26325	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	470.29751	0.00000
4. 2013.....	XXX	XXX	348.64576	349.93642	349.93642	349.93642	349.93642	349.93642	349.93642	349.93642	0.00000
5. 2014.....	XXX	XXX	XXX	246.32296	246.18576	246.18576	246.18576	246.18576	246.18576	246.18576	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	155.14273	155.14273	155.14273	155.14273	155.14273	155.14273	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	129.60147	129.60147	129.60147	129.60147	129.60147	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	129.60709	131.04859	131.10992	131.10992	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111.78621	111.90888	111.83721	(0.07167)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98.60701	98.24868	(0.35833)
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82.78735	82.78735
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82.35735
13. Earned Premiums (Sch P-Pt. 1)	443.62264	470.26325	348.68002	247.61362	155.00553	129.60147	129.60709	113.22771	98.79101	82.35735	XXX

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5. 2014.....	XXX	XXX	XXX	0.00281	0.00281	0.00281	0.00281	0.00281	0.00281	0.00281	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	0.11869	0.11869	0.11869	0.11869	0.11869	0.11869	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.13050	0.13050	0.13050	0.13050	0.13050	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.13726	0.13726	0.13726	0.13726	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.03474	0.03474	0.03474	0.00000
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000
13. Earned Premiums (Sch P-Pt. 1)	0.00000	0.00000	0.00000	0.00281	0.11869	0.13050	0.13726	0.03474	0.00000	0.00000	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4. 2013.....	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
5. 2014.....	XXX	XXX	XXX	0.00281	0.00281	0.00281	0.00281	0.00281	0.00281	0.00281	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	0.11869	0.11869	0.11869	0.11869	0.11869	0.11869	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.13050	0.13050	0.13050	0.13050	0.13050	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.13726	0.13726	0.13726	0.13726	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.03474	0.03474	0.03474	0.00000
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.00000
13. Earned Premiums (Sch P-Pt. 1)	0.00000	0.00000	0.00000	0.00281	0.11869	0.13050	0.13726	0.03474	0.00000	0.00000	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....											
2. 2011.....											
3. 2012.....	XXX										
4. 2013.....	XXX	XXX									
5. 2014.....	XXX	XXX									
6. 2015.....	XXX	XXX									
7. 2016.....	XXX	XXX									
8. 2017.....	XXX	XXX									
9. 2018.....	XXX	XXX									
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2020.....	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....											
2. 2011.....											
3. 2012.....	XXX										
4. 2013.....	XXX	XXX									
5. 2014.....	XXX	XXX									
6. 2015.....	XXX	XXX									
7. 2016.....	XXX	XXX									
8. 2017.....	XXX	XXX									
9. 2018.....	XXX	XXX									
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2020.....	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 2020 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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(0.01167)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	0.00000
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4. 2013.....	XXX	XXX	0.00000	1.78867	1.78867	1.78867	1.78867	1.78867	1.78867	1.78867	0.00000
5. 2014.....	XXX	XXX	XXX	(1.78867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	(0.12000)	(0.12000)	(0.12000)	(0.12000)	(0.12000)	(0.12000)	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.97595	0.97595	1.04362	1.04362	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2.50655	2.64188	2.54605	(0.09583)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1.05230	0.57313	(0.47917)
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1.26160	1.26160
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.68660
13. Earned Premiums (Sch P-Pt. 1)	(1.42091)	0.00000	0.00000	0.00000	0.00000	0.00000	0.97595	2.50655	1.25530	0.68660	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....	(0.01167)	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
2. 2011.....	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	(1.40924)	0.00000
3. 2012.....	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
4. 2013.....	XXX	XXX	0.00000	1.78867	1.78867	1.78867	1.78867	1.78867	1.78867	1.78867	0.00000
5. 2014.....	XXX	XXX	XXX	(1.78867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	(1.66867)	0.00000
6. 2015.....	XXX	XXX	XXX	XXX	(0.12000)	(0.12000)	(0.12000)	(0.12000)	(0.12000)	(0.12000)	0.00000
7. 2016.....	XXX	XXX	XXX	XXX	XXX	0.00000	0.00000	0.00000	0.00000	0.00000	0.00000
8. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	0.97595	0.97595	1.04362	1.04362	0.00000
9. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2.50655	2.64188	2.54605	(0.09583)
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1.05230	0.57313	(0.47917)
11. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1.26160	1.26160
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0.68660
13. Earned Premiums (Sch P-Pt. 1)	(1.42091)	0.00000	0.00000	0.00000	0.00000	0.00000	0.97595	2.50655	1.25530	0.68660	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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....											
2. 2011.....											
3. 2012.....	XXX										
4. 2013.....	XXX	XXX									
5. 2014.....	XXX	XXX									
6. 2015.....	XXX	XXX									
7. 2016.....	XXX	XXX									
8. 2017.....	XXX	XXX									
9. 2018.....	XXX	XXX									
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2020.....	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 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	2	3	4	5	6	7	8	9	10	
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	
1. Prior.....											
2. 2011.....											
3. 2012.....	XXX										
4. 2013.....	XXX	XXX									
5. 2014.....	XXX	XXX									
6. 2015.....	XXX	XXX									
7. 2016.....	XXX	XXX									
8. 2017.....	XXX	XXX									
9. 2018.....	XXX	XXX									
10. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2020.....	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 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

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)?\$0.00
- 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	0.00	0.00
1.602	2011	0.00	0.00
1.603	2012	0.00	0.00
1.604	2013	0.00	0.00
1.605	2014	0.00	0.00
1.606	2015	0.00	0.00
1.607	2016	0.00	0.00
1.608	2017	0.00	0.00
1.609	2018	0.00	0.00
1.610	2019	0.00	0.00
1.611	2020	0.00	0.00
1.612	Totals	0.00	0.00

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 Fidelity0.00000

5.2 Surety0.00000
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.)
.....

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

Allocated by States and Territories

States, Etc.		Direct Business Only				
		1	2	3	4	6
		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	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 2020 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	16
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	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0088	The Hanover Insurance Group	12833	80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	12833	27-1304098				AIX Insurance Services of California, Inc.	CA	NIA	AIX, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	10212	20-3051651				AIX, Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		04-3272695				Allmerica Financial Alliance Insurance Co.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co.	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	12260	54-1632456				Allmerica Securities Trust	MA	NIA	The Hanover Insurance Group, Inc.	Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		52-1827116				Campania Holding Company, Inc.	VA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	31534	38-0421730				Campmed Casualty & Indemnity Co. Inc.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		36-4123481				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	10714	36-4123481				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		38-3167100				Citizens Insurance Company of Ohio	OH	RE	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NIA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	27-3626264	27-3626264				CitySquare II Investment Co., L.L.C	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	22306	38-4000989				Front Street Financing LLC	MA	NIA	CitySquare II Investment Co. LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc.	VA	NIA	Verlan Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	42552	04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	36064	16-1140177				NOVA Casualty Company	NY	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	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.	N	
.0088	The Hanover Insurance Group	41602	38-3324634				Professionals Direct, Inc.	MI	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		04-3063898				The Hanover American Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	22292	98-1303999				The Hanover Atlantic Insurance Company Ltd.	BMU	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	Y	
	The Hanover Insurance Group		75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	13147	13-5129825				The Hanover Insurance Company	NH	UDP	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		04-3263626				The Hanover Insurance Group, Inc.	DE	UIP			0.000		N	
.0088	The Hanover Insurance Group	11705	74-3242673				The Hanover National Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		86-1070355				The Hanover New Jersey Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
.0088	The Hanover Insurance Group	10815	04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		52-2044133				Verlan Holdings, Inc.	MD	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	

Asterisk	

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
12833	20-5233538	AIX Specialty Insurance Co.	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	307,111,606.00
10212	04-3272695	Allmerica Financial Alliance Ins Co.	(400,000.00)	0.00	0.00	0.00	0.00	(46,538,142.00)		0.00	(46,938,142.00)	200,357,346.00
41840	23-2643430	Allmerica Financial Benefit Ins Co.	0.00	4,000,000.00	0.00	0.00	0.00	(107,772,390.00)		0.00	(103,772,390.00)	726,935,606.00
	04-3194493	Allmerica Plus Insurance Agency, Inc.	(200,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(200,000.00)	0.00
12260	52-1827116	Campmed Casualty & Indemnity Company, Inc.	(400,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(400,000.00)	11,212,366.00
31534	38-0421730	Citizens Insurance Co. of America	(82,000,000.00)	0.00	(53,998,467.00)	0.00	156,520,315.00	22,345,367.00		0.00	42,867,215.00	(165,719,854.00)
10714	36-4123481	Citizens Insurance Co. of Illinois	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	44,839,174.00
10176	38-3167100	Citizens Insurance Co. of Ohio	(1,200,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(1,200,000.00)	15,520,593.00
10395	35-1958418	Citizens Insurance Co. of the Midwest	0.00	12,000,000.00	0.00	0.00	0.00	(208,980,754.00)		0.00	(196,980,754.00)	1,073,804,137.00
36064	04-3063898	The Hanover American Insurance Co.	0.00	2,000,000.00	0.00	0.00	0.00	0.00		0.00	2,000,000.00	473,466,673.00
	98-1300399	The Hanover Atlantic Insurance Company	(3,000,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(3,000,000.00)	24,603,774.00
22292	13-5129825	The Hanover Insurance Company	(150,400,000.00)	(18,500,000.00)	(130,355,010.00)	0.00	(70,935,756.00)	504,216,293.00		(125,000,000.00)	9,025,527.00	(4,374,494,612.00)
11705	86-1070355	Hanover New Jersey Insurance Company	(800,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(800,000.00)	0.00
41602	75-1827351	The Hanover Casualty Company	(1,000,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(1,000,000.00)	67,109,365.00
22306	04-2217600	Massachusetts Bay Insurance Company	(1,700,000.00)	0.00	0.00	0.00	0.00	(163,270,374.00)		0.00	(164,970,374.00)	909,315,956.00
42552	16-1140177	NOVA Casualty Co.	(3,000,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(3,000,000.00)	592,274,624.00
	04-3263626	The Hanover Insurance Group, Inc.	245,000,000.00	0.00	184,353,477.00	0.00	(85,584,559.00)	0.00		125,000,000.00	468,768,918.00	0.00
13147	74-3242673	The Hanover National Insurance Company	(200,000.00)	0.00	0.00	0.00	0.00	0.00		0.00	(200,000.00)	0.00
10815	52-0903682	Verlan Fire Insurance Co.	(700,000.00)	500,000.00	0.00	0.00	0.00	0.00		0.00	(200,000.00)	93,663,246.00
9999999	Control Totals		0.00	0.00	0.00	0.00	0.00	0.00	XXX	0.00	0.00	0.00

ANNUAL STATEMENT FOR THE YEAR 2020 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		
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 the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

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?	YES
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
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....	NO
APRIL FILING		
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	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
33.	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
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	YES
AUGUST FILING		
38.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
Explanations:		
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Bar Codes:

12.	SIS Stockholder Information Supplement [Document Identifier 420]	
13.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	
14.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
15.	Supplement A to Schedule T [Document Identifier 455]	
16.	Trusteed Surplus Statement [Document Identifier 490]	
17.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	
18.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

19.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 0 1 7 6 2 0 2 0 3 6 5 0 0 0 0 0
21.	Reinsurance Attestation Supplement [Document Identifier 399]	 1 0 1 7 6 2 0 2 0 3 8 9 0 0 0 0 0
22.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 0 1 7 6 2 0 2 0 4 0 0 0 0 0 0 0
23.	Bail Bond Supplement [Document Identifier 500]	 1 0 1 7 6 2 0 2 0 5 0 0 0 0 0 0 0
25.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 0 1 7 6 2 0 2 0 2 2 4 0 0 0 0 0
26.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 0 1 7 6 2 0 2 0 2 2 5 0 0 0 0 0
27.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 0 1 7 6 2 0 2 0 2 2 6 0 0 0 0 0
28.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 0 1 7 6 2 0 2 0 5 5 5 0 0 0 0 0
29.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 0 1 7 6 2 0 2 0 2 3 0 0 0 0 0 0
30.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 0 1 7 6 2 0 2 0 3 0 6 0 0 0 0 0
31.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 0 1 7 6 2 0 2 0 2 1 0 0 0 0 0 0
32.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 1 0 1 7 6 2 0 2 0 2 1 6 0 0 0 0 0
33.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 1 0 1 7 6 2 0 2 0 2 1 7 0 0 0 0 0
35.	Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290]	 1 0 1 7 6 2 0 2 0 2 8 0 0 0 0 0 0
36.	Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300]	 1 0 1 7 6 2 0 2 0 3 0 0 0 0 0 0 0

NONE



SUPPLEMENT FOR THE YEAR 2020 OF THE CITIZENS INSURANCE COMPANY OF OHIO

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2020
(To Be Filed by March 1)

NAIC Group Code0088

NAIC Company Code10176

Company NameCITIZENS INSURANCE COMPANY OF OHIO

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

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0.0 %	0.0 %

2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [X] No []

2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [X] No []

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:\$ 251.00

2.32 Amount estimated using reasonable assumptions:\$ 0.00

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	100.0 %	0.0 %