



ANNUAL STATEMENT

For the Year Ended December 31, 2020
of the Condition and Affairs of the

Westfield Touchstone Insurance Company

NAIC Group Code.....	0228, 0228	NAIC Company Code.....	16448	Employer's ID Number.....	36-4900986
(Current Period) (Prior Period)					
Organized under the Laws of OH	State of Domicile or Port of Entry OH			Country of Domicile US	
Incorporated/Organized.....	April 24, 2018			Commenced Business..... December 25, 2018	
Statutory Home Office	One Park Circle .. Westfield Center .. OH .. US .. 44251-5001 (Street and Number) (City or Town, State, Country and Zip Code)				
Main Administrative Office	One Park Circle .. Westfield Center .. OH .. US .. 44251-5001 (Street and Number) (City or Town, State, Country and Zip Code)			330-887-0101 (Area Code) (Telephone Number)	
Mail Address	P. O. Box 5001 .. Westfield Center .. OH .. US .. 44251-5001 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)				
Primary Location of Books and Records	One Park Circle .. Westfield Center .. OH .. US .. 44251-5001 (Street and Number) (City or Town, State, Country and Zip Code)			330-887-0101 (Area Code) (Telephone Number)	
Internet Web Site Address	www.westfieldgrp.com				
Statutory Statement Contact	Jeffrey Scott Gillentine (Name)			330-887-0101 (Area Code) (Telephone Number)	
	FinancialReporting@westfieldgrp.com (E-Mail Address)			330-887-4415 (Fax Number)	

OFFICERS

Name	Title	Name	Title
1. Edward James Largent III	President, CEO, and Board Chair	2. Joseph Christian Kohmann	Chief Financial Officer and Treasurer
3. Frank Anthony Carrino	Chief Legal Officer and Secretary		

OTHER

Robert William Bowers	National Claims and Customer Service Ldr	Jeffrey Scott Gillentine	Controller
Robyn Renee Hahn	President, Small Business Segment	Mark Anthony Kidd	Mid Market UW and Sales Leader
Terry Lee McClaskey Jr	National Personal Lines Leader	James Robert Merz	Chief Actuarial and Analytic Officer
Kristine Lynn Neate #	Chief of Staff	Jennifer Constantine Palmieri #	Chief People Officer
Tracey Lynn Petkovic	Chief Information Officer	Michael Joseph Prandi	Chief Insurance Operations Officer
Stuart Wayne Rosenberg	Chief Innovation and Strategy Officer	David Harold Ruppel	Agribusiness UW and Sales Ldr
Peter Robert Schwanke	Chief Risk Officer	Gary William Stumper	National Surety Leader
Craig David Welsh	Chief Distribution Officer	George Krieg Wiswesser	Chief Investment Officer

DIRECTORS OR TRUSTEES

Cheryl Lila Carlisle	Fariborz Ghadar	Gary Dean Hallman	David Preston Hollander #
John Patrick Lanigan Jr	Edward James Largent III	Craig David Pfeiffer	Billie Kay Rawot
John Lewis Watson			

State of..... Ohio
County of..... Medina

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

(Signature) Edward James Largent III	(Signature) Joseph Christian Kohmann	(Signature) Frank Anthony Carrino
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President, CEO, and Board Chair	Chief Financial Officer and Treasurer	Chief Legal Officer and Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This	15th	day of	February	2021
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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	

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

19 AL

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

19.A.R

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

19 AZ

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	52
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	37
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	89
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	89
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	89
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	89
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	445
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

19.CO

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

19.DE

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	124
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	86
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	210
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	210
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	210
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	210
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,050
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF **GEORGIA** DURING THE YEAR

19.GA

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	413
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	413
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	1,511
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	1,056
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	2,442
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	805
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	4,055
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	38
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	2,067
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	175
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	75
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	75
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	1,892
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	15,016
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN GRAND TOTAL DURING THE YEAR

19.GT

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	1,588
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	1,538
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	180,196	46,324	0	133,872	0	6,070	6,070	1	250	249	26,188	19,652
5.2 Commercial multiple peril (liability portion).....	50,610	12,608	0	38,002	0	28,099	28,099	1	12,709	12,708	7,668	13,833
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	9,839	2,269	0	7,571	0	286	286	0	15	15	1,543	30,766
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	7,196	2,688	0	4,508	0	0	0	0	0	0	1,124	11
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	38,498	9,032	0	29,465	0	6,293	6,293	0	2,366	2,366	4,060	1,355
17.1 Other liability-occurrence.....	31,792	7,365	0	24,427	0	5,345	5,345	0	1,291	1,290	4,992	35,389
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	138
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	31,301	4,020	0	27,281	0	9,548	9,548	0	1,482	1,482	4,955	29,362
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	12,473	1,383	0	11,090	197	905	709	0	48	48	1,986	776
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	92	22	0	70	0	10	10	0	1	1	14	275
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	275
27. Boiler and machinery.....	12,113	3,478	0	8,635	0	0	0	0	0	0	2,196	28,507
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	374,110	89,190	0	284,920	197	56,555	56,359	3	18,162	18,159	54,725	163,462

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....775.

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF IOWA DURING THE YEAR

19.1A

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	48
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	94
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	142
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	167
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	142
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	142
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	735

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

19.I.L

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	975
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	975
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	89,993	30,913	0	59,080	0	1,474	1,474	1	120	119	12,953	1,538
5.2 Commercial multiple peril (liability portion).....	20,792	7,152	0	13,640	0	13,487	13,487	0	6,100	6,100	3,116	1,074
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	1,162	438	0	724	0	34	34	0	2	2	185	1,948
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	7,196	2,688	0	4,508	0	0	0	0	0	0	1,124	11
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	37,068	8,954	0	28,114	0	6,059	6,059	0	2,278	2,278	3,948	300
17.1 Other liability-occurrence.....	7,526	2,474	0	5,052	0	1,265	1,265	0	306	305	1,188	4,167
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	7,638	2,203	0	5,435	0	2,330	2,330	0	362	362	1,199	814
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	2,872	700	0	2,172	0	163	163	0	11	11	451	357
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	2	2	0	(0)	0	0	0	0	0	0	0	75
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	75
27. Boiler and machinery.....	7,418	2,633	0	4,785	0	0	0	0	0	0	1,113	464
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	181,667	58,157	0	123,510	0	24,812	24,812	2	9,179	9,177	25,276	12,771

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....473.

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

19.IN

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	50
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	50
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	51,650	11,709	0	39,941	0	3,903	3,903	0	74	73	7,618	622
5.2 Commercial multiple peril (liability portion).....	16,259	4,005	0	12,254	0	8,267	8,267	0	3,739	3,739	2,507	435
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	6,850	1,501	0	5,349	0	199	199	0	10	10	1,071	266
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	1,430	78	0	1,351	0	234	234	0	88	88	111	50
17.1 Other liability-occurrence.....	15,840	3,504	0	12,336	0	2,663	2,663	0	643	643	2,493	489
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	25
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	12,690	716	0	11,974	0	3,871	3,871	0	601	601	1,988	250
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	4,452	314	0	4,138	197	449	253	0	17	17	700	84
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	69	18	0	51	0	8	8	0	1	1	10	25
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	25
27. Boiler and machinery.....	3,358	736	0	2,622	0	0	0	0	0	0	543	144
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	112,598	22,582	0	90,016	197	19,594	19,398	1	5,173	5,172	17,043	2,515

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....212.

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF **KANSAS** DURING THE YEAR

19.KS

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

19.KY

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	50
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	37
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	26
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	63
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	63
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	63
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	63
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	364

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

19.MD

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	184
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	129
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	313
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	313
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	313
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	313
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,563

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

19 MI

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

19.MO

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

19.MS

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

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

19.NC

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	294
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	206
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	500
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	500
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	500
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	500
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	2,500
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

19.NM

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	50
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	80
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	130
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	130
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	130
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	130
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	650
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

19.NV

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

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

19.OH

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	25
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	25
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	16,918	1,984	0	14,934	0	257	257	0	21	21	2,335	12,833
5.2 Commercial multiple peril (liability portion).....	2,425	326	0	2,099	0	2,355	2,355	0	1,065	1,065	361	8,964
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	1,154	272	0	882	0	34	34	0	2	2	178	21,582
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	5,198	1,113	0	4,085	0	874	874	0	211	211	803	21,731
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	25
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	2,486	467	0	2,019	0	758	758	0	118	118	385	21,564
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	767	127	0	640	0	44	44	0	3	3	120	31
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	21	2	0	19	0	2	2	0	0	0	3	25
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	25
27. Boiler and machinery.....	439	47	0	392	0	0	0	0	0	0	257	21,527
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	29,408	4,338	0	25,070	0	4,324	4,324	0	1,420	1,420	4,442	108,357

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....60.

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

19.PA

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	75
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	75
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	21,635	1,719	0	19,916	0	436	436	0	35	35	3,282	547
5.2 Commercial multiple peril (liability portion).....	11,134	1,125	0	10,009	0	3,989	3,989	0	1,804	1,804	1,683	382
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	673	57	0	616	0	20	20	0	1	1	110	104
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	150
17.1 Other liability-occurrence.....	3,228	274	0	2,954	0	543	543	0	131	131	508	424
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	25
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	8,487	634	0	7,853	0	2,589	2,589	0	402	402	1,384	243
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	4,382	242	0	4,140	0	249	249	0	17	17	715	129
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	50
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	50
27. Boiler and machinery.....	898	61	0	837	0	0	0	0	0	0	283	58
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	50,437	4,112	0	46,325	0	7,825	7,825	0	2,391	2,390	7,964	2,312

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

19.SC

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

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

19, TN

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	1,401
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	979
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	2,280
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	50
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	2,355
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	25
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	2,280
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	25
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	25
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	2,280
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	11,700
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

19.VA

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	185
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	130
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	315
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	315
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	315
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	315
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,575
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

19 WI

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	47
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	33
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	80
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	80
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	80
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	80
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	400

DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0228 NAIC Company Code....16448

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

19.WV

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	178
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	124
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	302
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	302
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	302
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	302
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
29. International.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,510

DETAILS OF WRITE-INS

3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

Sch. F - Pt. 1
NONE

Sch. F - Pt. 2
NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable on									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domi-ciliary Juris-diction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Col. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable from Reinsurers (Cols. 15 - [17 + 18])	Funds Held by Company Under Reinsurance Treaties
Authorized Affiliates-U.S. Intercompany Pooling																			
34-0438190.	24104...	Ohio Farmers Insurance Company.....	OH....	.....	.....356	0	0	3	0	53	22	272	0	350	0	0	0	350	0
0199999. Total Authorized Affiliates - U.S. Intercompany Pooling.....					356	0	0	3	0	53	22	272	0	350	0	0	0	350	0
0899999. Total Authorized Affiliates.....					356	0	0	3	0	53	22	272	0	350	0	0	0	350	0
Authorized Other U.S. Unaffiliated Insurers																			
06-0384680.	11452...	Hartford Steam Boil Inspec & Ins.....	CT....	.....	.....18	0	0	0	0	0	0	12	0	12	0	0	0	12	0
0999999. Total Authorized Other U.S. Unaffiliated Insurers.....					18	0	0	0	0	0	0	12	0	12	0	0	0	12	0
Authorized Pools-Mandatory Pools, Associations or Other Similar Facilities																			
AA-9991500.	00000...	Illinois Mine Subsidence Fund.....	IL.....	.....	.....1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1099999. Total Authorized Pools - Mandatory Pools, Associations or Similar Facilities.....					1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1499999. Total Authorized Excluding Protected Cells.....					375	0	0	3	0	53	22	284	0	362	0	0	0	362	0
5799999. Total Auth., Recip. Juris., Unauth. & Cert. Excl. Prot. Cells.....					375	0	0	3	0	53	22	284	0	362	0	0	0	362	0
9999999. Totals (Sum of 5799999 and 5899999).....					375	0	0	3	0	53	22	284	0	362	0	0	0	362	0

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 Confirmin g 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; 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 Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized Affiliates-U.S. Intercompany Pooling																	
34-0438190.	Ohio Farmers Insurance Company.....	0	0	0	0	0	350	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling.....	0	0	XXX...	0	0	350	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
0899999.	Total Authorized Affiliates.....	0	0	XXX...	0	0	350	0	0	0	0	0	0	0	XXX.....	0	0
Authorized Other U.S. Unaffiliated Insurers																	
06-0384680.	Hartford Steam Boil Inspec & Ins.....	0	0	0	0	0	12	0	12	14	0	14	0	14	1	0	1
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	0	0	XXX...	0	0	12	0	12	14	0	14	0	14	XXX.....	0	1
Authorized Pools-Mandatory Pools, Associations or Other Similar Facilities																	
AA-9991500.	Illinois Mine Subsidence Fund.....	0	0	0	0	0	0	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
1099999.	uthorized Pools - Mandatory Pools, Associations or Similar F.....	0	0	XXX...	0	0	0	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
1499999.	Total Authorized Excluding Protected Cells.....	0	0	XXX...	0	0	362	0	12	14	0	14	0	14	XXX.....	0	1
5799999.	Total Auth., Recip. Juris., Unauth. & Cert. Excl. Prot. Cells.....	0	0	XXX...	0	0	362	0	12	14	0	14	0	14	XXX.....	0	1
9999999.	Totals (Sum of 5799999 and 5899999).....	0	0	XXX...	0	0	362	0	12	14	0	14	0	14	XXX.....	0	1

Sch. F - Pt. 3
NONE

Sch. F - Pt. 3
NONE

Sch. F - Pt. 3
NONE

Sch. F - Pt. 4 Issuing or Confirming Banks for Letters of Credit from Scfpt3
NONE

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.	0.0	0
2.	0.0	0
3.	0.0	0
4.	0.0	0
5.	0.0	0

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 YES or NO
6. Ohio Farmers Insurance Company.....	350	356	YES.....
7. Hartford Steam Boil Inspec & Ins.....	12	18	NO.....
8.	0	0	.....
9.	0	0	.....
10.....	0	0	.....

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).....	7,724,192	0	7,724,192
2. Premiums and considerations (Line 15).....	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0	0	0
5. Other assets.....	79,947	0	79,947
6. Net amount recoverable from reinsurers.....	0	363,598	363,598
7. Protected cell assets (Line 27).....	0	0	0
8. Totals (Line 28).....	7,804,139	363,598	8,167,737
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	0	78,948	78,948
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	4,582	0	4,582
11. Unearned premiums (Line 9).....	0	284,510	284,510
12. Advance premiums (Line 10).....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	0	140	140
15. Funds held by company under reinsurance treaties (Line 13).....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14).....	0	0	0
17. Provision for reinsurance (Line 16).....	0	0	0
18. Other liabilities.....	0	0	0
19. Total liabilities excluding protected cell business (Line 26).....	4,582	363,598	368,180
20. Protected cell liabilities (Line 27).....	0	0	0
21. Surplus as regards policyholders (Line 37).....	7,799,557	XXX	7,799,557
22. Totals (Line 38).....	7,804,139	363,598	8,167,737

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 participation percentage is 19% to Ohio Farmers Insurance Company, 54% to Westfield Insurance Company, 13% to Westfield National Insurance Company, 5% to American

Select Insurance Company, 9% to Old Guard Insurance Company, 0% to Westfield Champion Insurance Company, 0% to Westfield Premier Insurance Company, 0% to Westfield

Superior Insurance Company, and 0% to Westfield Touchstone Insurance Company.

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

Sch. P - Pt. 1A
NONE

Sch. P - Pt. 1B
NONE

Sch. P - Pt. 1C
NONE

Sch. P - Pt. 1D
NONE

Sch. P - Pt. 1E
NONE

Sch. P - Pt. 1F - Sn. 1
NONE

Sch. P - Pt. 1F - Sn. 2
NONE

Sch. P - Pt. 1G
NONE

Sch. P - Pt. 1H - Sn. 1
NONE

Sch. P - Pt. 1H - Sn. 2
NONE

Sch. P - Pt. 1I
NONE

Sch. P - Pt. 1J
NONE

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

Sch. P - Pt. 1R - Sn. 1
NONE

Sch. P - Pt. 1R - Sn. 2
NONE

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

Sch. P - Pt. 2A
NONE

Sch. P - Pt. 2B
NONE

Sch. P - Pt. 2C
NONE

Sch. P - Pt. 2D
NONE

Sch. P - Pt. 2E
NONE

Sch. P - Pt. 2F - Sn. 1
NONE

Sch. P - Pt. 2F - Sn. 2
NONE

Sch. P - Pt. 2G
NONE

Sch. P - Pt. 2H - Sn. 1
NONE

Sch. P - Pt. 2H - Sn. 2
NONE

Sch. P - Pt. 2I
NONE

Sch. P - Pt. 2J
NONE

Sch. P - Pt. 2K
NONE

Sch. P - Pt. 2L
NONE

Sch. P - Pt. 2M
NONE

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

Sch. P - Pt. 2R - Sn. 1
NONE

Sch. P - Pt. 2R - Sn. 2
NONE

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

Sch. P - Pt. 3A
NONE

Sch. P - Pt. 3B
NONE

Sch. P - Pt. 3C
NONE

Sch. P - Pt. 3D
NONE

Sch. P - Pt. 3E
NONE

Sch. P - Pt. 3F - Sn. 1
NONE

Sch. P - Pt. 3F - Sn. 2
NONE

Sch. P - Pt. 3G
NONE

Sch. P - Pt. 3H - Sn. 1
NONE

Sch. P - Pt. 3H - Sn. 2
NONE

Sch. P - Pt. 3I
NONE

Sch. P - Pt. 3J
NONE

Sch. P - Pt. 3K
NONE

Sch. P - Pt. 3L
NONE

Sch. P - Pt. 3M
NONE

Sch. P - Pt. 3N
NONE

Sch. P - Pt. 3O
NONE

Sch. P - Pt. 3P
NONE

Sch. P - Pt. 3R - Sn. 1
NONE

Sch. P - Pt. 3R - Sn. 2
NONE

Sch. P - Pt. 3S
NONE

Sch. P - Pt. 3T
NONE

Sch. P - Pt. 4A
NONE

Sch. P - Pt. 4B
NONE

Sch. P - Pt. 4C
NONE

Sch. P - Pt. 4D
NONE

Sch. P - Pt. 4E
NONE

Sch. P - Pt. 4F - Sn. 1
NONE

Sch. P - Pt. 4F - Sn. 2
NONE

Sch. P - Pt. 4G
NONE

Sch. P - Pt. 4H - Sn. 1
NONE

Sch. P - Pt. 4H - Sn. 2
NONE

Sch. P - Pt. 4I
NONE

Sch. P - Pt. 4J
NONE

Sch. P - Pt. 4K
NONE

Sch. P - Pt. 4L
NONE

Sch. P - Pt. 4M
NONE

Sch. P - Pt. 4N
NONE

Sch. P - Pt. 4O
NONE

Sch. P - Pt. 4P
NONE

Sch. P - Pt. 4R - Sn. 1
NONE

Sch. P - Pt. 4R - Sn. 2
NONE

Sch. P - Pt. 4S
NONE

Sch. P - Pt. 4T
NONE

Sch. P - Pt. 5A - Sn. 1
NONE

Sch. P - Pt. 5A - Sn. 2
NONE

Sch. P - Pt. 5A - Sn. 3
NONE

Sch. P - Pt. 5B - Sn. 1
NONE

Sch. P - Pt. 5B - Sn. 2
NONE

Sch. P - Pt. 5B - Sn. 3
NONE

Sch. P - Pt. 5C - Sn. 1
NONE

Sch. P - Pt. 5C - Sn. 2
NONE

Sch. P - Pt. 5C - Sn. 3
NONE

Sch. P - Pt. 5D - Sn. 1
NONE

Sch. P - Pt. 5D - Sn. 2
NONE

Sch. P - Pt. 5D - Sn. 3
NONE

Sch. P - Pt. 5E - Sn. 1
NONE

Sch. P - Pt. 5E - Sn. 2
NONE

Sch. P - Pt. 5E - Sn. 3
NONE

Sch. P - Pt. 5F - Sn. 1A
NONE

Sch. P - Pt. 5F - Sn. 2A
NONE

Sch. P - Pt. 5F - Sn. 3A
NONE

Sch. P - Pt. 5F - Sn. 1B
NONE

Sch. P - Pt. 5F - Sn. 2B
NONE

Sch. P - Pt. 5F - Sn. 3B
NONE

Sch. P - Pt. 5H - Sn. 1A
NONE

Sch. P - Pt. 5H - Sn. 2A
NONE

Sch. P - Pt. 5H - Sn. 3A
NONE

Sch. P - Pt. 5H - Sn. 1B
NONE

Sch. P - Pt. 5H - Sn. 2B
NONE

Sch. P - Pt. 5H - Sn. 3B
NONE

Sch. P - Pt. 5R - Sn. 1A
NONE

Sch. P - Pt. 5R - Sn. 2A
NONE

Sch. P - Pt. 5R - Sn. 3A
NONE

Sch. P - Pt. 5R - Sn. 1B
NONE

Sch. P - Pt. 5R - Sn. 2B
NONE

Sch. P - Pt. 5R - Sn. 3B
NONE

Sch. P - Pt. 5T - Sn. 1
NONE

Sch. P - Pt. 5T - Sn. 2
NONE

Sch. P - Pt. 5T - Sn. 3
NONE

Sch. P - Pt. 6C - Sn. 1
NONE

Sch. P - Pt. 6C - Sn. 2
NONE

Sch. P - Pt. 6D - Sn. 1
NONE

Sch. P - Pt. 6D - Sn. 2
NONE

Sch. P - Pt. 6E - Sn. 1
NONE

Sch. P - Pt. 6E - Sn. 2
NONE

Sch. P - Pt. 6H - Sn. 1A
NONE

Sch. P - Pt. 6H - Sn. 2A
NONE

Sch. P - Pt. 6H - Sn. 1B
NONE
Sch. P - Pt. 6H - Sn. 2B
NONE
Sch. P - Pt. 6M - Sn. 1
NONE
Sch. P - Pt. 6M - Sn. 2
NONE
Sch. P - Pt. 6N - Sn. 1
NONE
Sch. P - Pt. 6N - Sn. 2
NONE
Sch. P - Pt. 6O - Sn. 1
NONE
Sch. P - Pt. 6O - Sn. 2
NONE
Sch. P - Pt. 6R - Sn. 1A
NONE
Sch. P - Pt. 6R - Sn. 2A
NONE
Sch. P - Pt. 6R - Sn. 1B
NONE
Sch. P - Pt. 6R - Sn. 2B
NONE
Sch. P - Pt. 7A - Sn. 1
NONE
Sch. P - Pt. 7A - Sn. 2
NONE
Sch. P - Pt. 7A - Sn. 3
NONE
Sch. P - Pt. 7A - Sn. 4
NONE
Sch. P - Pt. 7A - Sn. 5
NONE
Sch. P - Pt. 7B - Sn. 1
NONE
Sch. P - Pt. 7B - Sn. 2
NONE
Sch. P - Pt. 7B - Sn. 3
NONE

Sch. P - Pt. 7B - Sn. 4
NONE

Sch. P - Pt. 7B - Sn. 5
NONE

Sch. P - Pt. 7B - Sn. 6
NONE

Sch. P - Pt. 7B - Sn. 7
NONE

Sch. P - Interrogatories
NONE

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		Direct Business Only				
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts
States, Etc.						
						6 Totals
1.	Alabama.....AL	0	0	0	0	0
2.	Alaska.....AK	0	0	0	0	0
3.	Arizona.....AZ	0	0	0	0	0
4.	Arkansas.....AR	0	0	0	0	0
5.	California.....CA	0	0	0	0	0
6.	Colorado.....CO	0	0	0	0	0
7.	Connecticut.....CT	0	0	0	0	0
8.	Delaware.....DE	0	0	0	0	0
9.	District of Columbia.....DC	0	0	0	0	0
10.	Florida.....FL	0	0	0	0	0
11.	Georgia.....GA	0	0	0	0	0
12.	Hawaii.....HI	0	0	0	0	0
13.	Idaho.....ID	0	0	0	0	0
14.	Illinois.....IL	0	0	0	0	0
15.	Indiana.....IN	0	0	0	0	0
16.	Iowa.....IA	0	0	0	0	0
17.	Kansas.....KS	0	0	0	0	0
18.	Kentucky.....KY	0	0	0	0	0
19.	Louisiana.....LA	0	0	0	0	0
20.	Maine.....ME	0	0	0	0	0
21.	Maryland.....MD	0	0	0	0	0
22.	Massachusetts.....MA	0	0	0	0	0
23.	Michigan.....MI	0	0	0	0	0
24.	Minnesota.....MN	0	0	0	0	0
25.	Mississippi.....MS	0	0	0	0	0
26.	Missouri.....MO	0	0	0	0	0
27.	Montana.....MT	0	0	0	0	0
28.	Nebraska.....NE	0	0	0	0	0
29.	Nevada.....NV	0	0	0	0	0
30.	New Hampshire.....NH	0	0	0	0	0
31.	New Jersey.....NJ	0	0	0	0	0
32.	New Mexico.....NM	0	0	0	0	0
33.	New York.....NY	0	0	0	0	0
34.	North Carolina.....NC	0	0	0	0	0
35.	North Dakota.....ND	0	0	0	0	0
36.	Ohio.....OH	0	0	0	0	0
37.	Oklahoma.....OK	0	0	0	0	0
38.	Oregon.....OR	0	0	0	0	0
39.	Pennsylvania.....PA	0	0	0	0	0
40.	Rhode Island.....RI	0	0	0	0	0
41.	South Carolina.....SC	0	0	0	0	0
42.	South Dakota.....SD	0	0	0	0	0
43.	Tennessee.....TN	0	0	0	0	0
44.	Texas.....TX	0	0	0	0	0
45.	Utah.....UT	0	0	0	0	0
46.	Vermont.....VT	0	0	0	0	0
47.	Virginia.....VA	0	0	0	0	0
48.	Washington.....WA	0	0	0	0	0
49.	West Virginia.....WV	0	0	0	0	0
50.	Wisconsin.....WI	0	0	0	0	0
51.	Wyoming.....WY	0	0	0	0	0
52.	American Samoa.....AS	0	0	0	0	0
53.	Guam.....GU	0	0	0	0	0
54.	Puerto Rico.....PR	0	0	0	0	0
55.	US Virgin Islands.....VI	0	0	0	0	0
56.	Northern Mariana Islands.....MP	0	0	0	0	0
57.	Canada.....CAN	0	0	0	0	0
58.	Aggregate Other Alien.....OT	0	0	0	0	0
59.	Totals.....	0	0	0	0	0

NONE

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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
0228	OFIC & Affiliates.....	24104...	34-0438190..	0	0		Ohio Farmers Insurance Company.....	OH.....	UDP.....	NA.....	NA.....	0.000	NA.....	N.....	1.....
0228	OFIC & Affiliates.....	24112...	34-6516838..	0	0		Westfield Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	24120...	34-1022544..	0	0		Westfield National Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	19992...	31-6016426..	0	0		American Select Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	17558...	23-0929640..	0	0		Old Guard Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	16447...	32-0569613..	0	0		Westfield Champion Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	16450...	83-0887963..	0	0		Westfield Premier Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	16449...	83-0871392..	0	0		Westfield Superior Insurance Company.....	OH.....	IA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0228	OFIC & Affiliates.....	16448...	36-4900986..	0	0		Westfield Touchstone Insurance Company.....	OH.....	RE.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	34-1788314..	0	0		Westfield Management Company.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	22-3981501..	0	0		WMC Properties, LLC.....	OH.....	NIA.....	Westfield Management Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	27-1229534..	0	0		Westfield Marketing LLC.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	34-1861077..	0	0		Westfield Services, Inc.....	OH.....	NIA.....	Westfield Marketing LLC.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	77-0633192..	0	0		Westfield Bancorp, Inc.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	Y.....	0.....
0.....	.....	0.....	34-1962005..	0	0		Westfield Credit Corp.....	OH.....	NIA.....	Westfield Bancorp, Inc.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	46-4010767..	0	0		Westfield Asset Management, LLC.....	OH.....	NIA.....	Westfield Bancorp, Inc.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	34-1940362..	0	0		Westfield Bank, FSB.....	OH.....	NIA.....	Westfield Bancorp, Inc.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	20-0361702..	0	0		Westfield Mortgage Company, LLC.....	OH.....	NIA.....	Westfield Bank, FSB.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	27-2415287..	0	0		COIN Financial, Inc.....	OH.....	NIA.....	Westfield Bank, FSB.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	45-4485129..	0	0		Westfield Securities, LLC.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	46-2569087..	0	0		150 South Road, LLC.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....
0.....	.....	0.....	35-2614052..	0	0		1848 Ventures, LLC.....	OH.....	NIA.....	Ohio Farmers Insurance Company.....	Ownership.....	...100.000	Ohio Farmers Insurance Company.....	N.....	0.....

Asteri

Explanation

1	No Entity(ies) or Person(s) has control of Ohio Farmers Insurance Company
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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)
Affiliated Transactions												
24104.....	34-0438190.....	Ohio Farmers Insurance Company.....	100,000,000	(8,050,000)	0	0	(717,027)	0	...*	0	91,232,973	380,216,846
24112.....	34-6516838.....	Westfield Insurance Company.....	(100,000,000)	0	1,500,000	0	0	0	...*	0	(98,500,000)	(193,873,239)
24120.....	34-1022544.....	Westfield National Insurance Company.....	0	500,000	0	0	0	0	...*	0	500,000	(50,196,717)
19992.....	31-6016426.....	American Select Insurance Company.....	0	0	0	0	0	0	...*	0	0	(362,780,963)
17558.....	23-0929640.....	Old Guard Insurance Company.....	0	0	0	0	0	0	...*	0	0	228,632,476
16447.....	32-0569613.....	Westfield Champion Insurance Company.....	0	0	0	0	0	0	...*	0	0	(1,054,671)
16450.....	83-0887963.....	Westfield Premier Insurance Company.....	0	0	0	0	0	0	...*	0	0	(87,992)
16449.....	83-0871392.....	Westfield Superior Insurance Company.....	0	0	0	0	0	0	...*	0	0	(504,740)
16448.....	36-4900986.....	Westfield Touchstone Insurance Company.....	0	0	0	0	0	0	...*	0	0	(351,000)
00000.....	77-0633192.....	Westfield Bancorp, Inc.....	0	0	0	0	184,112	0	.....	.....0	184,112	0
00000.....	34-1962005.....	Westfield Credit Corp.....	0	0	(1,500,000)	0	0	0	.....	.....0	(1,500,000)	0
00000.....	27-1229534.....	Westfield Marketing LLC.....	0	0	0	0	(399,077)	0	.....	.....0	(399,077)	0
00000.....	46-2569087.....	150 South Road, LLC.....	0	0	0	0	941,992	0	.....	.....0	941,992	0
00000.....	35-2614052.....	1848 Ventures, LLC.....	0	7,550,000	0	0	(10,000)	0	.....	.....0	7,540,000	0
9999999.....	Control Totals.....	.....	.....0	0	0	0	0	0	XXX	0	0	0

Detailed Explanation

The lead company, Ohio Farmers Insurance Company, and its property casualty companies participate in a single 100% reinsurance pooling arrangement. The following companies are participants:
Ohio Farmers Insurance Company (19%), Westfield Insurance Company (54%), Westfield National Insurance Company (13%), American Select Insurance Company (5%), Old Guard Insurance Company (9%),
Westfield Champion Insurance Company (0%), Westfield Premier Insurance Company (0%), Westfield Superior Insurance Company (0%), and Westfield Touchstone Insurance Company (0%).

Westfield Touchstone Insurance Company
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.

MARCH FILING		Responses
1.	Will an actuarial opinion be filed by March 1?	WAIVED
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 the Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement that 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 Accountants 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 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.**

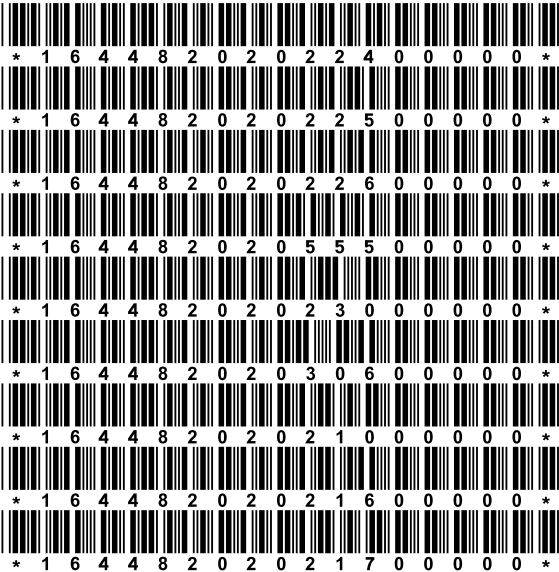
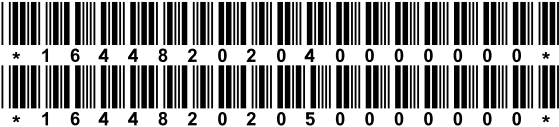
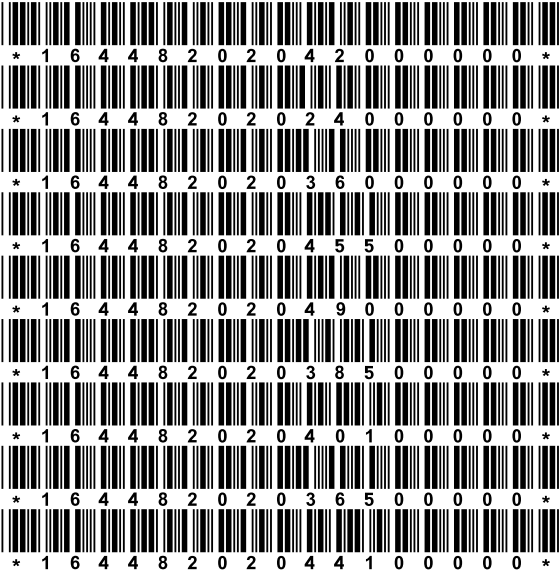
If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

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)?	SEE EXPLANATION
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
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 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 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?	NO
AUGUST FILING		
38.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

EXPLANATION:

1. Exemption granted from the State of Domicile.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
14. The data for this supplement is not required to be filed.
15. The data for this supplement is not required to be filed.
16. The data for this supplement is not required to be filed.
17. The data for this supplement is not required to be filed.
18. The data for this supplement is not required to be filed.
19. The data for this supplement is not required to be filed.
20. Exemption granted from the State of Domicile.
21.
22. The data for this supplement is not required to be filed.
23. The data for this supplement is not required to be filed.
24.
25. The data for this supplement is not required to be filed.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34.

BAR CODE:



Annual Statement for the year 2020 of the

Westfield Touchstone Insurance Company

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.

35. The data for this supplement is not required to be filed.



36. The data for this supplement is not required to be filed.



37. The data for this supplement is not required to be filed.



38.

Overflow Page
NONE

Overflow Page
NONE



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For the Year Ended December 31, 2020
(To be Filed by March 1)

NAIC Group Code.....0228
Company Name: Westfield Touchstone Insurance Company

NAIC Company Code.....16448

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	0	0	0	0	0	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 the D&O liability coverage in CMP packaged policies:

2.31 Amount quantified: \$.....3

2.32 Amount estimated using reasonable assumptions: \$.....0
- 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	0	0	0	0.0	0.0