





51330202120100102

## QUARTERLY STATEMENT

AS OF JUNE 30, 2021

## OF THE CONDITION AND AFFAIRS OF THE

## **Ohio Bar Title Insurance Company**

NAIC Group Code	0070 (Current Period)	0070 (Prior Period)	NAIC Company Code	51330	Employer's ID Number	31-0573692
Organized under the Laws of Country of Domicile	Ohio USA		State of Domicile or Port of Entry		OH	
Incorporated/Organized Statutory Home Office	July 27, 1953 545 Metro Place South, Suite 475 (Street and Number)		Commenced Business		April 15, 1955 Dublin, OH US 43017 (City or Town, State, Country and Zip Code)	
Main Administrative Office	1 First American Way Santa Ana, CA US 92707 (Street and Number)		(Street and Number)		714-250-3372 (Area Code) (Telephone Number)	
Mail Address	1 First American Way (Street and Number or P.O. Box)		Santa Ana, CA US 92707 (City or Town, State, Country and Zip Code)		714-250-3372 (Area Code) (Telephone Number)	
Primary Location of Books and Records	545 Metro Place South, Suite 475 (Street and Number)		Dublin, OH US 43017 (City or Town, State, Country and Zip Code)		800-628-4853 (Area Code) (Telephone Number)	
Internet Website Address	www.firsiam.com					
Statutory Statement Contact	John P Megna (Name)		714-250-3372 (Area Code)		(Telephone Number) (Extension)	
	jmegna@firsiam.com (E-Mail Address)				714-250-3215 (Fax Number)	

## OFFICERS

1.	Name	Title
2.	Kevin Francis Eichner	President
3.	Paul Anthony DePascale	Secretary
4.	Matthew Feivish Wainer	Treasurer

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**VICE-PRESIDENTS**

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**DIRECTORS OR TRUSTEES**

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**State of California**

County of Orange ss

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)  
Kevin Francis Eichner  
(Printed Name)  
1.  
President  
(Title)

(Signature)  
Paul Anthony DePascale  
(Printed Name)  
2.  
Secretary  
(Title)

(Signature)  
Matthew Feivish Wagner  
(Printed Name)  
3.  
Treasurer  
(Title)

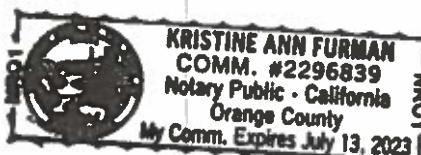
Subscribed and sworn to before me this

9 day of August, 2021

*WT Fr*

a. Is this an original filing?  Yes  No  
b. If no: 

1. State the amendment number
2. Date filed
3. Number of pages attached



**Ohio****Department  
of Insurance**Mike DeWine, Governor  
Jon Husted, Lt Governor

Jillian Froment, Director

**Electronic Filing Authenticity Affidavit**Office of Risk Assessment, 50 W Town Street, 3rd Floor - Suite 300, Columbus OH 43215  
614-644-2658 | 614-644-3256 (Fax) | insurance.ohio.gov**Ohio Domestic Insurers Only**Company Name: Ohio Bar Title Insurance CompanyNAIC No. 51330

We, the undersigned executive officers of Ohio Bar Title Insurance Company (herein referred to as the "Company"), an insurance company organized under the laws of Ohio, hereby certify that the documents indicated below by an "X" were filed electronically with the National Association of Insurance Commissioners ("NAIC") and that the electronic filing or filings, including "PDF" filings, are exact copies of the original documents, except for formatting differences due to electronic filing. The original documents are maintained in this Company's office and are available for inspection upon request by the Ohio Department of Insurance for at least five years following the date of filing. An executed, notarized NAIC Annual Statement or Quarterly Statement jurat page or an original, notarized signature page (if this filing relates to a supplemental filing without a jurat page) attesting to the accuracy and authenticity of the corresponding NAIC Annual Statement or Quarterly Statement or supplemental schedule is attached to this Affidavit.

Company Type:  Fraternal  Title  Property & Casualty  Life & Health  Health  Other \_\_\_\_\_

**Applicable documents:**

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Annual Statement Electronic Filing[s]," which include "the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail."  
Date of filing with the NAIC: \_\_\_\_\_  An original jurat page is attached.  
 Original filing.  Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Risk-Based Capital Electronic Filing," which "includes all risk-based capital data" due March 1.  
Date of filing with the NAIC: \_\_\_\_\_  An original, notarized signature page is attached.  
 Original filing.  Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Supplemental Electronic Filing," which "includes all supplements due April 1, per the *Annual Statement Instructions*."  
Date of filing with the NAIC: \_\_\_\_\_  
List of supplemental documents included in this Affidavit: \_\_\_\_\_  
 All original notarized signature pages are attached, as applicable.  
 Original filing.  Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Quarterly Statement Electronic Filing," which "includes the complete quarterly statement data" due May 15, August 15, and November 15.  
Date of filing with the NAIC: 8/13/2021  
 Original filing.  Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Combined Annual Statement Electronic Filing," which "includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit" due May 1.  
Date of filing with the NAIC: \_\_\_\_\_

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "June PDF Filing," which includes "the Audited Financial Statements" due June 1.  
Date of filing with the NAIC: \_\_\_\_\_  
 Original filing.  Amended filing.

 8/4/21  8/4/21

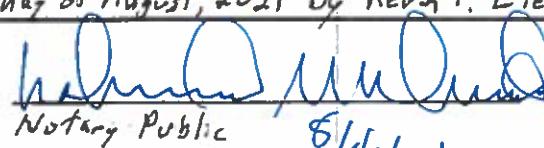
Signature	Date	Signature	Date	Signature	Date
(Name) <u>Kevin Francis Eichner</u>		(Name) <u>Paul Anthony DePascale</u>		(Name) <u>Matthew Feivish Wajner</u>	
(Title) <u>President</u>		(Title) <u>Secretary</u>		(Title) <u>Treasurer</u>	

\*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)

Subscribed and sworn to before me this 4th day of August, 2021 by Kevin F. Eichner and

Paul A. DePascale.

KATHERINE M. WHITE  
Notary Public, State of Ohio  
My Commission Expires 11-08-2023

  
Notary Public

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8/4/21



Department  
of Insurance

Mike DeWine, Governor  
Jon Husted, Lt Governor

Jillian Froment, Director

## Electronic Filing Authenticity Affidavit

Office of Risk Assessment, 50 W Town Street, 3rd Floor - Suite 300, Columbus OH 43215  
614-644-2658 | 614-644-3256 (Fax) | insurance.ohio.gov

### Ohio Domestic Insurers Only

Company Name: Ohio Bar Title Insurance Company

NAIC No. 51330

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Original filing.  Amended filing.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Name) Kevin Francis Eichner  
(Title) President

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Name) Paul Anthony DePascale  
(Title) Secretary

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Name) Matthew Feivish Wajner  
(Title) Treasurer

\*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)