

QUARTERLY STATEMENT

For the Quarter Ended September 30 , 2021

OF THE CONDITION AND AFFAIRS OF THE

SANDY AND BEAVER VALLEY FARMERS MUTUAL INSURANCE COMPANY

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code	10270		
Home Office	108 N. Market Street Street and Number	Lisbon 44432 City Zip Code	OH
Mail Address	P. O. Box 490 Street and Number	Lisbon 44432 City Zip Code	OH
Main Administrative Office	(330) 424-1464 Telephone Number		
Organized	October 13, 1877	Commenced Business	October 13, 1877
Annual Statement Contact Person	James Sanor	Telephone Number	(330) 424-1464
Contact Person Email Address	jsanor@sbmins.com		

OFFICERS

President	James Sanor	Vice President	
Secretary	Shawna L'Italien	Treasurer	James Sanor

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

Tom Patterson	Tim Dickey		
Jerry Connor	Tad Rose		
James Sanor	Tom Korner		
Ted Bresnahan			

State of Ohio  
County of  
Columbiana

James Sanor President and  
SANDY AND BEAVER VALLEY FARMERS MUTUAL INSURANCE COMPANY  
Shawna L'Italien Secretary of the

being duly sworn each for himself/herself deposes and says, that they are the above described officers of said reporting entity, and that on the reporting period stated above all 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, with the schedules and explanations herein contained, annexed or referred to, is a full and correct 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, according to the best of their information, knowledge and belief, respectively.

Subscribed and sworn to before me, this 10<sup>th</sup>  
day of May 2021  
Notary Public



DARLENE K. ANDERSON  
Notary Public  
State Of Ohio  
My Comm. Expires  
Aug. 4, 2024

Signature of President  
Signature of Secretary  
Signature of Person Preparing Statement