



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021
OF THE CONDITION AND AFFAIRS OF THE

Affinity Mutual Insurance Company

NAIC Group Code _____ (Current) _____ (Prior) _____ Ohio _____, State of Domicile or Port of Entry _____ OH

Organized under the Laws of _____ United States of America

Country of Domicile _____

Incorporated/Organized _____ 12/17/1934 _____ Commenced Business _____ 05/01/1935

Statutory Home Office _____ 722 North Cable Road _____ Lima, OH, US 45805-1795
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office _____ 722 North Cable Road _____
(Street and Number) (Area Code) (Telephone Number)

_____ 419-227-6604
(Area Code) (Telephone Number)

Mail Address _____ 722 North Cable Road _____ Lima, OH, US 45805-1795
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records _____ 722 North Cable Road _____
(Street and Number) (Area Code) (Telephone Number)

_____ 419-227-6604
(Area Code) (Telephone Number)

Internet Website Address _____ www.affinity-mutual.com

Statutory Statement Contact _____ Brent A. Helmke _____ 419-227-6604
(Name) (Area Code) (Telephone Number)

_____ bhelmke@affinity-mutual.com _____
(E-mail Address) (FAX Number)

OFFICERS

President _____ Brent A. Helmke _____ Treasurer _____ Daniel R. Combs
Secretary _____ Brent A. Helmke _____

OTHER

Scott W. Boullis #, Chairman _____ Alvin J. King #, Vice Chairman _____

DIRECTORS OR TRUSTEES

Daniel R. Combs _____ Alvin J. King _____
Scott W. Boullis _____ David W. Seemann _____ Gary L. Luginbill _____
Brent R. Petersen _____ Dale N. Hirschfeld _____
Dennis A. Kapcar _____

State of _____ Ohio _____ SS: _____
County of _____

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.

Brent A. Helmke

Brent A. Helmke

Alvin J. King

Subscribed and sworn to before me this _____ day of _____ 2021
Angela M. Lambert

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

Yes [X] No []



ANGELA M. LAMBERT
Notary Public, State of Ohio
My Commission Expires
November 17, 2021