



QUARTERLY STATEMENT
AS OF MARCH 31, 2022
OF THE CONDITION AND AFFAIRS OF THE
BATTLEFACE INSURANCE COMPANY

NAIC Group Code	NAIC Company Code	17137	Employer's ID Number	86-3851728
(Current) (Prior)				
Organized under the Laws of	OH	State of Domicile or Port of Entry OH		
Country of Domicile	US			
Incorporated/Organized	05/13/2021	Commenced Business		
Statutory Home Office	629 N High St, 6th Floor			
Main Administrative Office	629 N High St, 6th Floor			
	Columbus, OH, US 43215			
Mail Address	629 N High St, 6th Floor	(Telephone Number)		
Primary Location of Books and Records	629 N High St, 6th Floor	Columbus, OH, US 43215		
	Columbus, OH, US 43215			
Internet Website Address	www.battleface.com			
Statutory Statement Contact	Lois Virginia Beckman	(614)-937-7845		
	lois@battleface.com	(Telephone Number)		
	(E-Mail Address)	(Fax Number)		
OFFICERS				
Alexander Gennady Gainullin, President				
Michael John Meeks, Secretary	Lois Virginia Beckman, Treasurer			
DIRECTORS OR TRUSTEES				
Lisa Rebecca Conway	Molly McCartin Bonakdarpour			
Cynthia Ann Powell				

State of Ohio
 County of Franklin 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.

<u>x</u>	<u>x</u>	<u>x</u>
Alexander Gainullin President	Michael Meeks Secretary	Lois Beckman Treasurer

Subscribed and sworn to before me
 this 5th day of
May
Heather L. Szozda Crider

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



HEATHER L SZOZDA CRIDER
 Notary Public
 State of Ohio
 My Comm. Expires
 February 12, 2027



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X
Alexander Gainullin

X Michael Meeks

X
Lois Beckman

Subscribed and sworn to before me

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^x See attached document for notary signature and seal.

ALL-PURPOSE ACKNOWLEDGMENT

On 05/10/2022 before me, Reginald Renard Barnes,
Date Notary Name

personally appeared Michael John Meeks
Name(s) of Signer(s)

personally known to me -- **OR** --

proved to me on the basis of the oath of _____ **OR** --
Name of Credible Witness

proved to me on the basis of satisfactory evidence: _____ **OR** --
Type of ID Presented

Type of ID Presented

to be the individual(s) whose name(s) is (are) subscribed to the within instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and by proper authority, and that by his/her/their signature(s) on the instrument, the individual(s), or the person(s) or entity upon behalf of which the individual(s) acted, executed the instrument for the purposes and consideration therein stated.

WITNESS my hand and official seal.



Notary Public Signature: Reginald Renard Barnes

Notary Name: Reginald Renard Barnes

Notary Commission Number: 7950517

Notary Commission Expires: 08/31/2025

Notarized online using audio-video communication

DESCRIPTION OF ATTACHED DOCUMENT

Title or Type of Document: Quarterly Statement

Document Date: 5/10/2022 Number of Pages (w/ certificate): 2

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: Michael John Meeks

Corporate Officer Title: Secretary

Partner – Limited General

Individual Attorney in Fact

Trustee Guardian of Conservator

Other:

Signer Is Representing:

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- Corporate Officer Title: _____
- Partner – Limited General
- Individual Attorney in Fact
- Trustee Guardian of Conservator
- Other: _____

Signer Is Representing:



1 7 1 3 7 2 6 2 2 0 6 1 0 6 1 0 1

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[Signature] x Alexander Gainullin Michael Meeks Lois Beckman
President Secretary Treasurer

Subscribed and sworn to before me

this 10 day ofMay*[Signature]* x

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