



**QUARTERLY STATEMENT**  
**AS OF SEPTEMBER 30, 2022**  
**OF THE CONDITION AND AFFAIRS OF THE**  
**Canton Regional Chamber Health Fund**

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	Employer's ID Number
Organized under the Laws of		Ohio	State of Domicile or Port of Entry	
Country of Domicile		United States of America		
Licensed as business type:	Life, Accident & Health[ <input type="checkbox"/> ] Dental Service Corporation[ <input type="checkbox"/> ] Other[X]	Property/Casualty[ <input type="checkbox"/> ] Vision Service Corporation[ <input type="checkbox"/> ] Is HMO Federally Qualified? Yes[ <input type="checkbox"/> ] No[X] N/A[ <input type="checkbox"/> ]	Hospital, Medical & Dental Service or Indemnity[ <input type="checkbox"/> ] Health Maintenance Organization[ <input type="checkbox"/> ]	
Incorporated/Organized	12/01/2017		Commenced Business	12/07/2017
Statutory Home Office	2600 Sixth Street SW (Street and Number)		Canton, OH, US 44710 (City or Town, State, County and Zip Code)	
Main Administrative Office	2600 Sixth Street SW (Street and Number)		Canton, OH, US 44710 (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	2600 Sixth Street SW (Street and Number)		Canton, OH, US 44710 (City or Town, State, Country and Zip Code)	
Internet Web Site Address				
Statutory Statement Contact	Jeffrey Alan Scheatzle (Name) jscheatzle@aulicare.com (E-Mail Address)		(330)363-4057 (Area Code) (Telephone Number) (330)363-5012 (Area Code)(Telephone Number)(Extension) (Fax Number)	

**OFFICERS**

Name	Title
Todd Hawke	Chairman
Joe Feltes	Vice Chairman
Daniele Caserta	Treasurer
Robert Mullen	Secretary

**OTHERS**

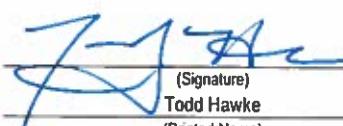
**DIRECTORS OR TRUSTEES**

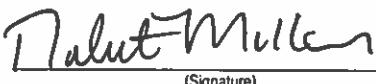
Daniele Caserta  
Todd Hawke  
Geoffrey Karcher  
Robert Mullen  
Dennis Saunier

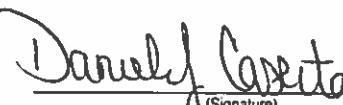
Joseph Feltes  
Francis Hayden  
Steven Meeks  
Mark Rosneck  
Cindy Stevens

State of Ohio  
County of Stark 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)  
Todd Hawke  
(Printed Name)  
1.  
Chairman

  
(Signature)  
Robert Mullen  
(Printed Name)  
2.  
Secretary

  
(Signature)  
Daniele Caserta  
(Printed Name)  
3.  
Treasurer