* 5 2 5 6 9 2 0 0 3 2 0 1 0 0 1 0 3 *

HEALTH QUARTERLY STATEMENT

As of September 30, 2003

of the Condition and Affairs of the

Physicians Health Plan of Southwest Michigan

NAIC Group Code..... 1334, (Current Period) (Prior Period) NAIC Company Code..... 52569 Employer's ID Number..... 38-3376063

Organized under the Laws of Michigan State of Domicile or Port of Entry Michigan

Country of Domicile US

Licensed as Business Type Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ] Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [X] Other [ ]

Is HMO Federally Qualified? Yes [X] No [ ]

Date Incorporated or Organized..... March 31, 2000 Date Commenced Business..... June 1, 2000

Statutory Home Office	106 Farmers Alley Suite 300 ..... Kalamazoo ..... MI ..... 49005-1100 *(Street and Number) (City or Town, State and Zip Code)*	
Main Administrative Office	106 Farmers Alley Suite 300 ..... Kalamazoo ..... MI ..... 49005-1100 *(Street and Number) (City or Town, State and Zip Code)*	269-341-7200 *(Area Code) (Telephone Number)*
Mail Address	106 Farmers Alley Suite 300 ..... Kalamazoo ..... MI ..... 49005-1100 *(Street and Number or P. O. Box) (City or Town, State and Zip Code)*	
Primary Location of Books and Records	106 Farmers Alley Suite 300 ..... Kalamazoo ..... MI ..... 49005-1100 *(Street and Number) (City or Town, State and Zip Code)*	269-341-7200 *(Area Code) (Telephone Number)*
Internet Website Address	www.phpiba.com	
Statutory Statement Contact	David Lee Vis *(Name)*	269-341-7311 *(Area Code) (Telephone Number) (Extension)*
	dvis@ibahealth.com *(E-Mail Address)*	*269-341-6928* *(Fax Number)*
Policyowner Relations Contact	106 Farmers Alley Suite 300 ..... Kalamazoo ..... MI ..... 49005-1100 *(Street and Number) (City or Town, State and Zip Code)*	269-341-7200 *(Area Code) (Telephone Number) (Extension)*

OFFICERS

Chief Executive Officer ..... Kenneth Lee Taft Chief Financial Officer ..... David Lee Vis Secretary ..... Kenneth Lee Taft

President ..... David Ike Kibbe

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Susan Mary Ulshafer	Kenneth Lee Taft	Owen Mark Berow M.D.	David William Burke M.D. #
Abbe Jane Siver	David Vincent Copeland	Dawn Joann Kline	Konrads Valentins Lubvas M.D
Judy Markusse Mann #			

State of..... Michigan
County of..... Kalamazoo

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.

(Signature)	(Signature)	(Signature)
Kenneth Lee Taft	Kenneth Lee Taft	David Lee Vis
(Printed Name)	(Printed Name)	(Printed Name)
Chief Executive Officer	Secretary	Chief Financial Officer

Subscribed and sworn to before me this

.....day of ....., 2003

.....

ASSETS

	Current Statement Date 1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Prior Year Net Admitted Assets
1. Bonds	4,747,623		4,747,623	3,937,240
2. Stocks:				
2.1 Preferred stocks			0	
2.2 Common stocks			0	
3. Mortgage loans on real estate:				
3.1 First liens			0	
3.2 Other than first liens			0	
4. Real estate:				
4.1 Properties occupied by the company (less $.....0 encumbrances)			0	
4.2 Properties held for the production of income (less $.....0 encumbrances)			0	
4.3 Properties held for sale (less $.....0 encumbrances)			0	
5. Cash ($.....(1,207,455)) and short-term investments ($.....10,882,883)	9,675,428		9,675,428	11,483,401
6. Contract loans (including $.....0 premium notes)			0	
7. Other invested assets	353,246	44,198	309,048	302,680
8. Receivable for securities			0	
9. Aggregate write-ins for invested assets	0	0	0	0
10. Subtotals, cash and invested assets (Lines 1 to 9)	14,776,297	44,198	14,732,099	15,723,321
11. Investment income due and accrued	34,206		34,206	44,698
12. Premiums and considerations:				
12.1 Uncollected premiums and agents' balances in course of collection	65,083	5,108	59,975	39,291
12.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $.....0 earned but unbilled premiums)			0	
12.3 Accrued retrospective premiums			0	
13. Reinsurance:				
13.1 Amounts recoverable from reinsurers	14,262		14,262	226,638
13.2 Funds held by or deposited with reinsured companies			0	
13.3 Other amounts receivable under reinsurance contracts			0	
14. Amounts receivable relating to uninsured plans			0	
15.1 Current federal and foreign income tax recoverable and interest thereon			0	
15.2 Net deferred tax asset			0	
16. Guaranty funds receivable or on deposit			0	
17. Electronic data processing equipment and software			0	
18. Furniture and equipment, including health care delivery assets ($.....0)	565	85	480	1,630
19. Net adjustment in assets and liabilities due to foreign exchange rates			0	
20. Receivable from parent, subsidiaries and affiliates	44		44	16,416
21. Health care ($.....1,391,835) and other amounts receivable	1,391,835		1,391,835	2,429,342
22. Other assets nonadmitted			0	
23. Aggregate write-ins for other than invested assets	0	0	0	106,805
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 through 23)	16,282,292	49,391	16,232,901	18,588,141
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
26. TOTALS (Lines 24 and 25)	16,282,292	49,391	16,232,901	18,588,141

DETAILS OF WRITE-INS

0901.			0	
0902.			0	
0903.			0	
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0999) (Line 9 above)	0	0	0	0
2301. Receivable from PHP of South Michigan			0	99,783
2302. Other Receivable			0	7,023
2303.			0	
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	0	0	0	106,805

LIABILITIES, CAPITAL AND SURPLUS

	Current Period 1 Covered	Current Period 2 Uncovered	Current Period 3 Total	Prior Year 4 Total
1. Claims unpaid (less $.....308,421 reinsurance ceded)	6,215,453	647,143	6,862,596	7,823,716
2. Accrued medical incentive pool and bonus payments	384,960		384,960	773,817
3. Unpaid claims adjustment expenses	153,487		153,487	272,475
4. Aggregate health policy reserves	493,000		493,000	493,000
5. Aggregate life policy reserves			0	
6. Property/casualty unearned premium reserve			0	
7. Aggregate health claim reserves			0	
8. Premiums received in advance	62,603		62,603	103,993
9. General expenses due or accrued	388,868		388,868	690,333
10.1 Current federal and foreign income tax payable and interest thereon (including $.....0 on realized gains (losses))			0	
10.2 Net deferred tax liability			0	
11. Ceded reinsurance premiums payable			0	
12. Amounts withheld or retained for the account of others			0	
13. Remittances and items not allocated	5,030		5,030	
14. Borrowed money (including $.....0 current) and interest thereon $.....0 (including $.....0 current)			0	
15. Amounts due to parent, subsidiaries and affiliates	629,886		629,886	977,483
16. Payable for securities			0	
17. Funds held under reinsurance treaties with ($.....0 authorized reinsurers and $.....0 unauthorized reinsurers)			0	
18. Reinsurance in unauthorized companies			0	
19. Net adjustments in assets and liabilities due to foreign exchange rates			0	
20. Liability for amounts held under uninsured accident and health plans			0	
21. Aggregate write-ins for other liabilities (including $.....891,107 current)	891,107	0	891,107	0
22. Total liabilities (Lines 1 to 21)	9,224,394	647,143	9,871,537	11,134,817
23. Common capital stock	XXX	XXX	450	450
24. Preferred capital stock	XXX	XXX		
25. Gross paid in and contributed surplus	XXX	XXX	10,232,000	10,232,000
26. Surplus notes	XXX	XXX		
27. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
28. Unassigned funds (surplus)	XXX	XXX	(3,871,086)	(2,779,126)
29. Less treasury stock, at cost:				
29.1 .....0.000 shares common (value included in Line 23 $.....0)	XXX	XXX		
29.2 .....0.000 shares preferred (value included in Line 24 $.....0)	XXX	XXX		
30. Total capital and surplus (Lines 23 to 28 minus Line 29)	XXX	XXX	6,361,364	7,453,324
31. Total liabilities, capital and surplus (Lines 22 and 30)	XXX	XXX	16,232,901	18,588,141

DETAILS OF WRITE-INS

2101. QAAP State Assessment	891,107		891,107	
2102.			0	
2103.			0	
2198. Summary of remaining write-ins for Line 21 from overflow page	0	0	0	0
2199. Totals (Lines 2101 thru 2103 plus 2198) (Line 21 above)	891,107	0	891,107	0
2701.	XXX	XXX		
2702.	XXX	XXX		
2703.	XXX	XXX		
2798. Summary of remaining write-ins for Line 27 from overflow page	XXX	XXX	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year to Date		Prior Year to Date
	1 Uncovered	2 Total	3 Total
1. Member months	XXX	280,561	295,710
2. Net premium income (including $.....0 non-health premium income)	XXX	43,847,601	47,169,704
3. Change in unearned premium reserves and reserve for rate credits	XXX		
4. Fee-for-service (net of $.....0 medical expenses)	XXX		
5. Risk revenue	XXX		
6. Aggregate write-ins for other health care related revenues	XXX	(1,520,602)	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	42,326,999	47,169,704
Hospital and Medical:			
9. Hospital/medical benefits	2,454,906	26,032,937	30,072,652
10. Other professional services	1,872	19,856	22,151
11. Outside referrals			
12. Emergency room and out-of-area	279,266	2,961,461	
13. Prescription drugs	868,165	9,206,417	9,805,252
14. Aggregate write-ins for other hospital and medical	(8,049)	(85,352)	14,183
15. Incentive pool and withhold adjustments		(160,409)	925,571
16. Subtotal (Lines 9 to 15)	3,596,160	37,974,910	40,839,808
Less:			
17. Net reinsurance recoveries		452,632	(300,807)
18. Total hospital and medical (Lines 16 minus 17)	3,596,160	37,522,278	41,140,615
19. Non-health claims			
20. Claims adjustment expenses		1,733,368	1,349,380
21. General administrative expenses		4,391,607	4,964,985
22. Increase in reserves for life and accident and health contracts (including $.....0 increase in reserves for life only)			
23. Total underwriting deductions (Lines 18 through 22)	3,596,160	43,647,253	47,454,980
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(1,320,254)	(285,276)
25. Net investment income earned		210,432	345,871
26. Net realized capital gains or (losses)		33,363	
27. Net investment gains or (losses) (Lines 25 plus 26)	0	243,795	345,871
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $.....0) (amount charged off $.....0)]			
29. Aggregate write-ins for other income or expenses	0	0	0
30. Net income or (loss) before federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(1,076,459)	60,595
31. Federal and foreign income taxes incurred	XXX		
32. Net income (loss) (Lines 30 minus 31)	XXX	(1,076,459)	60,595

DETAILS OF WRITE-INS

0601. QAAP Tax	XXX	(1,520,602)	
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	(1,520,602)	0
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0
1401. Other Medical Costs	(8,049)	(85,352)	14,183
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	(8,049)	(85,352)	14,183
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year
33. Capital and surplus prior reporting period	7,453,324	5,556,435
GAINS AND LOSSES TO CAPITAL & SURPLUS		
34. Net income or (loss) from Line 32	(1,076,459)	184,367
35. Change in valuation basis of aggregate policy and claim reserves		
36. Net unrealized capital gains and losses	17,145	32,908
37. Change in net unrealized foreign exchange capital gain or (loss)		
38. Change in net deferred income tax		
39. Change in nonadmitted assets	(15,970)	268,041
40. Change in unauthorized reinsurance		
41. Change in treasury stock		
42. Change in surplus notes		
43. Cumulative effect of changes in accounting principles		
44. Capital changes:		
44.1 Paid in		
44.2 Transferred from surplus (Stock Dividend)		
44.3 Transferred to surplus		
45. Surplus adjustments:		
45.1 Paid in		1,350,450
45.2 Transferred to capital (Stock Dividend)		
45.3 Transferred from capital		
46. Dividends to stockholders		
47. Aggregate write-ins for gains or (losses) in surplus	(16,676)	61,124
48. Net change in capital and surplus (Lines 34 to 47)	(1,091,960)	1,896,890
49. Capital and surplus end of reporting period (Line 33 plus 48)	6,361,364	7,453,324

DETAILS OF WRITE-INS

4701. Accounts Receivable allowance for bad debt and retroactivity	(16,676)	61,124
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	(16,676)	61,124

CASH FLOW

		1 Current Year to Date	2 Prior Year
	CASH FROM OPERATIONS		
1.	Premiums collected net of reinsurance	43,676,426	61,830,009
2.	Net investment income	232,669	495,883
3.	Miscellaneous income	(525,502)	
4.	Total (Lines 1 through 3)	43,383,593	62,325,893
5.	Benefit and loss related payments	40,512,235	58,742,055
6.	Net transfers to Separate, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	4,693,072	6,794,271
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) $.....0 net tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	45,205,307	65,536,326
11.	Net cash from operations (Line 4 minus Line 10)	(1,821,714)	(3,210,433)
	CASH FROM INVESTMENTS		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	6,520,766	4,775,000
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,520,766	4,775,000
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	7,309,530	3,049,163
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	7,309,530	3,049,163
14.	Net increase (decrease) in policy loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Lines 13.7 and 14)	(788,764)	1,725,837
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		0
	16.2 Capital and paid in surplus, less treasury stock		1,350,450
	16.3 Borrowed funds received		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	802,505	725,782
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	802,505	2,076,232
	RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
18.	Net change in cash and short-term investments (Line 11 plus Line 15 plus Line 17)	(1,807,973)	591,636
19.	Cash and short-term investments:		
	19.1 Beginning of year	11,483,401	10,891,766
	19.2 End of period (Line 18 plus Line 19.1)	9,675,428	11,483,401

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at End of:													
1. Prior Year	31,856	67	5,564						26,225				
2. First Quarter	30,361	59	3,746						26,556				
3. Second Quarter	31,095	56	3,598						27,441				
4. Third Quarter	32,391	52	3,223						29,116				
5. Current Year	0												
6. Current Year Member Months	280,561	510	32,107						247,944				
Total Member Ambulatory Encounters for Period:													
7. Physician	152,282	541	25,334						126,407				
8. Non-Physician	81,388	182	8,542						72,664				
9. Total	233,670	723	33,876	0	0	0	0	0	199,071	0	0	0	0
10. Hospital Patient Days Incurred	7,412	15	838						6,559				
11. Number of Inpatient Admissions	1,880	8	201						1,671				
12. Health Premiums Collected	44,230,491	179,329	7,834,999						36,216,163				
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	44,292,643	170,805	7,987,027						36,134,811				
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	37,790,483	149,798	6,916,153						30,724,532				
18. Amount Incurred for Provision of Health Care Services	37,974,908	140,757	6,498,722						31,335,429				

CLAIMS PAYABLE (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Payable (Reported)						
0299999. Aggregate Accounts Not Individually Listed-Uncovered	186,530	15,280	(1,129)	(563)	(2,554)	197,564
0399999. Aggregate Accounts Not Individually Listed-Covered	1,791,522	146,756	(10,840)	(5,404)	(24,531)	1,897,503
0499999. Subtotals	1,978,052	162,036	(11,969)	(5,967)	(27,085)	2,095,067
0599999. Unreported Claims and Other Claim Reserves						4,794,204
0699999. Total Amounts Withheld						281,746
0799999. Total Claims Payable						7,171,017
0899999. Accrued Medical Incentive Pool						384,960

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)	(497,724)	7,340,619	(80,222)	273,352	(577,946)	591,754
2. Medicare Supplement					0	
3. Dental only					0	
4. Vision only					0	
5. Federal Employees Health Benefits Plan Premiums					0	
6. Title XVIII - Medicare					0	
7. Title XIX - Medicaid	3,291,276	26,985,495	35,706	5,227,662	3,326,982	4,301,728
8. Other health					0	
9. Health subtotal (Lines 1 to 8)	2,793,552	34,326,114	(44,516)	5,501,014	2,749,036	4,893,482
10. Other non-health					0	
11. Medical incentive pools, accruals and disbursements	405,226	(176,775)		384,960	405,226	773,817
12. Totals	3,198,778	34,149,339	(44,516)	5,885,974	3,154,262	5,667,299

NOTES TO FINANCIAL STATEMENTS

Basis of Presentation

The financial statements of Physicians Health Plan of Southwest Michigan are presented on the basis of accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) as adopted by the State of Michigan.

The Department of Consumer & Industry Services recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under Michigan Insurance Law. The National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures manual, version effective January 1, 2001, (NAIC SAP) was adopted by the State of Michigan starting with the first quarter 2003 filing.

Change in Presentation:

The Company received clarification from the NAIC during 2003 as to the components and presentation of the claim reserve rollforward. Based upon this clarification, the beginning and end of year claim reserves in 2003 are shown net of health care receivables. In 2002 incurred claims excluded the effect of pharmacy rebates and health care receivables.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements? Yes [ ] No [X]

1.2 If yes, explain:...

2.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [ ] No [X]

2.2 If yes, has the report been filed with the domiciliary state? Yes [ ] No [ ]

3.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [ ] No [X]

3.2 If yes, date of change: .....
If not previously filed, furnish herewith a certified copy of the instrument as amended.

4. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [ ] No [X]
If yes, attach an organizational chart.

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]

5.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [ ] No [X] N/A [ ]
If yes, attach an explanation.

7.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2001.....

7.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .....12/31/2001.....

7.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .....06/04/2003.....

7.4 By what department or departments?..... Michigan Office of Financial and Insurance Services

8.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.) Yes [ ] No [X]

8.2 If yes, give full information:

9.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [ ] No [X]

9.2 If response to 9.1 is yes, please identify the name of the bank holding company.

9.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [ ] No [X]

9.4 If the response to 9.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC
.....	.....	.....	.....	.....	.....	.....

GENERAL INTERROGATORIES (continued)

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

INVESTMENT

10.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [ ] No [X]

10.2 If yes, explain:...

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [X]

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: .....

13. Amount of real estate and mortgages held in short-term investments: .....

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [X] No [ ]

14.2 If yes, please complete the following:

	1 Prior Year-End Statement Value	2 Current Quarter Statement Value
14.21 Bonds		
14.22 Preferred Stock		
14.23 Common Stock		
14.24 Short-Term Investments		
14.25 Mortgages, Loans or Real Estate		
14.26 All Other	$302,680	$309,048
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$302,680	$309,048
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above		
14.29 Receivable from Parent not included in Lines 14.21 to 14.26 above		

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]
If no, attach a description with this statement.

16. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV. H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No [ ]

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Bank One	1111 Polaris Parkway, Columbus, OH 43240

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation.

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? Yes [X] No [ ]

16.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
National City	Bank One	07/09/2003	Better service

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
Bank One	Craig Haynes	611 Woodward Avenue, Detroit, MI 48226

SCHEDULE A - VERIFICATION

NONE

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
2. Increase (decrease) by adjustment		
3. Cost of acquired		
4. Cost of additions to and permanent improvements		
5. Total profit (loss) on sales		
6. Increase (decrease) by foreign exchange adjustment		
7. Amount received on sales		
8. Book/adjusted carrying value at end of current period	0	0
9. Total valuation allowance		
10. Subtotal (Lines 8 plus 9)	0	0
11. Total nonadmitted amounts		
12. Statement value, current period (Page 2, real estate lines, current period)	0	0

SCHEDULE B - VERIFICATION

NONE

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year	0	
2. Amount loaned during period:		
2.1 Actual cost at time of acquisitions		
2.2 Additional investment made after acquisitions		
3. Accrual of discount and mortgage interest points and commitment fees		
4. Increase (decrease) by adjustment		
5. Total profit (loss) on sale		
6. Amounts paid on account or in full during the period		
7. Amortization of premium		
8. Increase (decrease) by foreign exchange adjustment		
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0	0
10. Total valuation allowance		
11. Subtotal (Lines 9 plus 10)	0	0
12. Total nonadmitted amounts		
13. Statement value of mortgages owned at end of current period	0	0

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	336,101	303,193
2. Cost of acquisitions during period:		
2.1 Actual cost at time of acquisitions		
2.2 Additional investment made after acquisitions		
3. Accrual of discount		
4. Increase (decrease) by adjustment	17,145	32,908
5. Total profit (loss) on sale		
6. Amounts paid on account or in full during the period		
7. Amortization of premium		
8. Increase (decrease) by foreign exchange adjustment		
9. Book/adjusted carrying value of long-term invested assets at end of current period	353,246	336,101
10. Total valuation allowance		
11. Subtotal (Lines 9 plus 10)	353,246	336,101
12. Total nonadmitted amounts	44,198	33,421
13. Statement value of long-term invested assets at end of current period	309,048	302,680

SCHEDULE D - VERIFICATION

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	3,937,240	5,659,157
2. Cost of bonds and stocks acquired	7,309,530	3,049,163
3. Accrual of discount	5,408	
4. Increase (decrease) by adjustment		1,600
5. Increase (decrease) by foreign exchange adjustment		
6. Total profit (loss) on disposal	33,364	2,321
7. Consideration for bonds and stocks disposed of	6,520,766	4,775,000
8. Amortization of premium	17,153	
9. Book/adjusted carrying value, current period	4,747,623	3,937,240
10. Total valuation allowance		
11. Subtotal (Lines 9 plus 10)	4,747,623	3,937,240
12. Total nonadmitted amounts		
13. Statement value (Lines 11 minus 12)	4,747,623	3,937,240

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1	15,127,065	32,862,458	32,385,351	26,334	14,385,159	15,127,065	15,630,506	17,281,521
2. Class 2	221,248		221,248		221,248	221,248		221,248
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	15,348,313	32,862,458	32,606,599	26,334	14,606,407	15,348,313	15,630,506	17,502,768
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	15,348,313	32,862,458	32,606,599	26,334	14,606,407	15,348,313	15,630,506	17,502,768

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Amount of Interest Received Current Quarter	5 Paid for Accrued Interest
8099999. Totals	10,882,883	XXX	10,882,883	44,585	

SCHEDULE DA - PART 2 - Verification

Short-Term Investments Owned

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	13,565,528	256,580
2. Cost of short-term investments acquired	56,676,597	69,061,825
3. Increase (decrease) by adjustment		
4. Increase (decrease) by foreign exchange adjustment		
5. Total profit (loss) on disposal of short-term investments		
6. Consideration received on disposal of short-term investments	59,359,242	55,752,877
7. Book/adjusted carrying value, current period	10,882,883	13,565,528
8. Total valuation allowance		
9. Subtotal (Lines 7 plus 8)	10,882,883	13,565,528
10. Total nonadmitted amounts		
11. Statement value (Lines 9 minus 10)	10,882,883	13,565,528
12. Income collected during period	44,585	223,759
13. Income earned during period	44,585	213,631

SCHEDULE DB - PART F - SECTION 1

Summary of Replicated (Synthetic) Assets Open

Replicated (Synthetic) Asset					Components of the Replicated (Synthetic) Asset						
					Derivative Instruments Open		Cash Instrument(s) Held				
1 Replication RSAT Number	2 Description	3 NAIC Designation or Other Description	4 Statement Value	5 Fair Value	6 Description	7 Fair Value	8 CUSIP	9 Description	10 Statement Value	11 Fair Value	12 NAIC Designation or Other Description

NONE

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory			0	0	0	0	0	0	0	0
2. Add: Opened or Acquired Transactions									0	0
3. Add: Increases in Replicated Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
4. Less: Closed or Disposed of Transactions									0	0
5. Less: Positions Disposed of for Failing Effectiveness Criteria									0	0
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
7. Ending inventory	0	0	0	0	0	0	0	0	0	0

NONE

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Location	5 Is Insurer Authorized? (Yes or No)

NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

	1	2	Direct Business Only Year-to-Date					
			3	4	5	6	7	8
State, Etc.	Guaranty Fund (Yes or No)	Is Insurer Licensed? (Yes or No)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Deposit-Type Contract Funds	Property/Casualty Premiums
1. Alabama AL		Invalid						
2. Alaska AK		Invalid						
3. Arizona AZ		Invalid						
4. Arkansas AR		Invalid						
5. California CA		Invalid						
6. Colorado CO		Invalid						
7. Connecticut CT		Invalid						
8. Delaware DE		Invalid						
9. District of Columbia DC		Invalid						
10. Florida FL		Invalid						
11. Georgia GA		Invalid						
12. Hawaii HI		Invalid						
13. Idaho ID		Invalid						
14. Illinois IL		Invalid						
15. Indiana IN		Invalid						
16. Iowa IA		Invalid						
17. Kansas KS		Invalid						
18. Kentucky KY		Invalid						
19. Louisiana LA		Invalid						
20. Maine ME		Invalid						
21. Maryland MD		Invalid						
22. Massachusetts MA		Invalid						
23. Michigan MI	NO	YES	21,856,752		22,435,891			
24. Minnesota MN		Invalid						
25. Mississippi MS		Invalid						
26. Missouri MO		Invalid						
27. Montana MT		Invalid						
28. Nebraska NE		Invalid						
29. Nevada NV		Invalid						
30. New Hampshire NH		Invalid						
31. New Jersey NJ		Invalid						
32. New Mexico NM		Invalid						
33. New York NY		Invalid						
34. North Carolina NC		Invalid						
35. North Dakota ND		Invalid						
36. Ohio OH		Invalid						
37. Oklahoma OK		Invalid						
38. Oregon OR		Invalid						
39. Pennsylvania PA		Invalid						
40. Rhode Island RI		Invalid						
41. South Carolina SC		Invalid						
42. South Dakota SD		Invalid						
43. Tennessee TN		Invalid						
44. Texas TX		Invalid						
45. Utah UT		Invalid						
46. Vermont VT		Invalid						
47. Virginia VA		Invalid						
48. Washington WA		Invalid						
49. West Virginia WV		Invalid						
50. Wisconsin WI		Invalid						
51. Wyoming WY		Invalid						
52. American Samoa AS		Invalid						
53. Guam GU		Invalid						
54. Puerto Rico PR		Invalid						
55. U.S. Virgin Islands VI		Invalid						
56. Canada CN		Invalid						
57. Aggregate Other alien OT	XXX	XXX	0	0	0	0	0	0
58. Total (Direct Business)	XXX	(a) 1	21,856,752	0	22,435,891	0	0	0

DETAILS OF WRITE-INS

5701.							
5702.							
5703.							
5798.	Summary of remaining write-ins for line 57 from overflow page	0	0	0	0	0	0
5799.	Total (Lines 5701 thru 5703 plus 5798) (Line 57 above)	0	0	0	0	0	0

(a) Insert the number of yes responses except for Canada and Other Alien.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

NAME	DOMICILE	% OWNED	FEIN	NAIC CO CODE
Bronson Healthcare Group, Inc.	MI	100	38-2418383	
Bronson Methodist Hospital	MI	100	38-1359087	
Bronson Vicksburg Hospital	MI	100	38-2610349	
Bronson Properties Corporation	MI	100	38-6052573	
Bronson Health Foundation	MI	100	38-2415081	
Child Care Plus, Inc.	MI	100	38-2767444	
KalamazooCounty Safe Kids Coalition	MI	100	38-3283257	
Hospital Network, Inc.	MI	71.5	38-2625715	
Van Buren Emergency Medical Services, Inc.	MI	50	38-2745910	
AlleganEmergency Medical Services, Inc.	MI	50	38-2893665	
VanBuren Healthcare Services Corporation	MI	50	38-3027386	
West Michigan Air Care, Inc.	MI	50	38-3067256	
West Michigan Cancer Center	MI	50	38-3061574	
West Michigan Health Ventures, Inc.	MI	50	38-2938976	
Michigan Health Partners	MI	100	38-3252721	
Michigan HealthLink	MI	50	38-3145044	
FirstHealth Development Corporation	MI	50	38-2787945	
Physicians Health Plan of Southwest Michigan	MI	100	38-3376063	52569
Physicians Health Plan Shared Services L.L.C.	MI	33.3	38-3361367	
BronsonManagement Services Corporation	MI	100	38-2415032	
IBA Health and Life Assurance Company	MI	100	38-2346432	81450
Southwest Michigan Health Network, Inc.	MI	100	38-2609888	
IBA Self Funded Group, Inc.	MI	100	38-2432067	
Bronson Practice Management, Inc.	MI	100	38-2511179	
Bronson Physician Services, Inc	MI	100	38-2756971	
Bronson Retirement Center, Inc.	MI	100	38-2850098	
Bronson Community Home Care, Inc.	MI	100	38-3277697	
Bronson Lifestyle Improvement & Research Center	MI	100	38-3552556	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the SVO Compliance Certification be filed with this statement?	YES

EXPLANATION:

BAR CODE:

Overflow Page for Write-Ins

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Description of Property	City	State	Date Acquired	Name of Vendor	Actual Cost	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Expended for Additions and Permanent Improvements

NONE

E01

SCHEDULE A - PART 3

Showing all Real Estate SOLD During the Quarter, Including Payments During the Final Year on "Sales Under Contract

1	Location		4	5	6	7	8	9	10	11	12	13	14	15	16
	2	3													
Description of Property	City	State	Disposal Date	Name of Purchaser	Actual Cost	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Expended for Additions, Permanent Improvements and Changes in Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Amounts Received	Foreign Exchange Profit (Loss) on Sale	Realized Profit (Loss) on Sale	Total Profit (Loss) on Sale	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs, and Expenses Incurred

NONE

SCHEDULE B - PART 1

Showing all Mortgage Loans ACQUIRED During the Current Quarter

1	Location		4	5	6	7	8	9	10	11
	2	3								
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Book Value/Recorded Investment Excluding Accrued Interest	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Value of Land and Buildings	Date of Last Appraisal or Valuation

NONE

SCHEDULE B - PART 2

Showing all Mortgage Loans SOLD, Transferred or Paid in Full During the Current Quarter

1	Location		4	5	6	7	8	9	10	11	12	13
	2	3										
Loan Number	City	State	Loan Type	Date Acquired	Book Value/ Recorded Investment Excluding Accrued Interest Prior Year	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Book Value/ Recorded Investment Excluding Accrued Interest at Disposition	Consideration Received	Foreign Exchange Profit (Loss) on Sale	Realized Profit (Loss) on Sale	Total Profit (Loss) on Sale

NONE

SCHEDULE BA - PART 1

Showing Other Long-Term Invested Assets ACQUIRED During the Current Quarter

1	Location		4	5	6	7	8	9	10
	2	3							
Number of Units and Description	City	State	Name of Vendor	Date Acquired	Actual Cost	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets SOLD, Transferred or Paid in Full During the Current Quarter

1	Location		4	5	6	7	8	9	10	11	12	13
	2	3										
Number of Units and Description	City	State	Name of Purchaser or Nature of Disposition	Date Acquired	Book/Adjusted Carrying Value Less Encumbrances Prior Year	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Book/ Adjusted Carrying Value Less Encumbrances at Disposition	Consideration Received	Foreign Exchange Profit (Loss) on Sale	Realized Profit (Loss) on Sale	Total Profit (Loss) on Sale

NONE

SCHEDULE D - PART 3

Show all Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation (a)
Bonds - U.S. Government								
912828AG5	US Treasury Nts	08/11/2003	ABN Amro Bond		201,813	200,000	342	1
912828AS9	US Treasury Nts	08/27/2003	JP Morgan		300,012	300,000	437	1
912828BB5	US Treasury Nts	08/27/2003	Goldman, Sachs & Co		297,012	300,000	912	1
912828BF6	US Treasury Nts	08/27/2003	Deutsche Banc Securities		358,116	360,000	302	1
912828AN0	US Treasury Nts	08/27/2003	JP Morgan		252,898	255,000	2,183	1
912828BG4	US Treasury Nts	08/27/2003	Barclays Capital Inc		251,703	255,000	315	1
912828AJ9	US Treasury Nts	08/27/2003	Barclays Capital Inc		417,277	420,000	649	1
3134A4TZ7	FHLMC	08/29/2003	Barclays Capital Inc		230,051	240,000	1,320	1
31359MQM8	FNMA	09/11/2003	MLPF &S		248,320	250,000	1,264	1
912828AP5	US Treasury Nts	09/11/2003	Barclays Capital Inc		151,028	155,000	2,005	1
31359MSQ7	FNMA	09/30/2003	Deutsche Banc Securities		179,996	180,000	731	1
912828AY6	US Treasury Nts	08/11/2003	MLPF &S		1,094,715	1,100,000	5,321	1
0399999.	Total - Bonds - U.S. Government				3,982,939	4,015,000	15,781	XXX
6099997.	Total - Bonds - Part 3				3,982,939	4,015,000	15,781	XXX
6099999.	Total - Bonds				3,982,939	4,015,000	15,781	XXX
7299999.	Total - Bonds, Preferred and Common Stocks				3,982,939	XXX	15,781	XXX

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues: 0.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarte

1 CUSIP Identification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Book/Adjusted Carrying Value At Disposal Date	10 Increase (Decrease) by Adjustment	11 Increase (Decrease) by Foreign Exchange Adjustment	12 Foreign Exchange Gain (Loss) on Disposal	13 Realized Gain (Loss) on Disposal	14 Total Gain (Loss) on Disposal	15 Interest on Bonds Received During Year	16 Dividends on Stocks Received During Year	17 NAIC Designation (a)
Bonds - U.S. Government																
3133F0PE3	FHLB Mtg Corp	09/30/2003	Blackford Securities Corp		1,035,313	1,000,000	1,058,000	1,054,247				(18,934)	(18,934)	22,917		1
0399999.	Total - Bonds - U.S. Government				1,035,313	1,000,000	1,058,000	1,054,247	0	0	0	(18,934)	(18,934)	22,917	0	XXX
Bonds - Industrial and Miscellaneous																
United States																
345397SQ7	Ford Mtr Co	08/27/2003	Warburg Dillon Read		232,434	220,000	222,750	220,886				11,548	11,548	7,654		2
046003FA2	ACNA Note	09/30/2003	Warburg Dillon Read		216,260	200,000	200,600	200,179				16,081	16,081	1,938		1
337358DB8	First Union Note	09/30/2003	Warburg Dillon Read		230,837	220,000	220,000	220,000				10,837	10,837	1,953		1
585510CF5	Mellon Note	09/30/2003	Warburg Dillon Read		254,930	250,000	239,375	248,721				6,209	6,209	8,708		1
92344GAR7	Verizon Global Fdg	09/30/2003	Blackford Securities Corp		276,148	250,000	252,388	251,791				24,357	24,357	4,466		1
38122NAG7	Golden St Tob Sec	08/27/2003	Pershing LLC		220,000	250,000	250,000	250,000				(30,000)	(30,000)	2,149		1
45974VZA9	International Lease	08/27/2003	Blackford Securities Corp		254,309	250,000	251,095	250,916				3,392	3,392	752		1
260543BU6	Dow Chemical	09/11/2003	Blackford Securities Corp		363,300	350,000	363,300	361,858				1,442	1,442	5,639		1
12560PCT6	Citi Group Holdings	09/30/2003	Blackford Securities Corp		252,655	250,000	250,515	250,350				2,305	2,305	1,679		1
254687AM8	Disney Walt Co Sr Nt	09/30/2003	Blackford Securities Corp		385,081	350,000	387,118	380,330				4,751	4,751	11,813		1
	United States				2,685,953	2,590,000	2,637,140	2,635,031	0	0	0	50,922	50,922	46,750	0	XXX
4599999.	Total - Bonds - Industrial & Miscellaneous				2,685,953	2,590,000	2,637,140	2,635,031	0	0	0	50,922	50,922	46,750	0	XXX
6099997.	Total - Bonds - Part 4				3,721,266	3,590,000	3,695,140	3,689,278	0	0	0	31,988	31,988	69,666	0	XXX
6099999.	Total - Bonds				3,721,266	3,590,000	3,695,140	3,689,278	0	0	0	31,988	31,988	69,666	0	XXX
7299999.	Total - Bonds, Preferred and Common Stocks				3,721,266	XXX	3,695,140	3,689,278	0	0	0	31,988	31,988	69,666	0	XXX

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues: 0.

SCHEDULE DB - PART A - SECTION 1

Showing All Options, Caps, Floors and Insurance Futures Options Owned at Current Statement Date

1 Description	2 Number of Contracts or Notional Amount	3 Date of Maturity, Expiry, or Settlement	4 Strike Price, Rate or Index	5 Date of Acquisition	6 Exchange or Counterparty	7 Cost/ Option Premium	8 Book Value	9 *	10 Statement Value	11 Fair Value	12 Year to Date Increase/ (Decrease) by Adjustment	13 Used to Adjust Basis of Hedged Item	14 Other Investment/ Miscellaneous Income

NONE

SCHEDULE DB - PART B - SECTION 1

Showing All Options, Caps, Floors and Insurance Futures Options Written and In-Force at Current Statement Date

1 Description	2 Number of Contracts or Notional Amount	3 Date of Maturity, Expiry, or Settlement	4 Strike Price, Rate or Index	5 Date of Issuance/ Purchase	6 Exchange or Counterparty	7 Consideration Received	8 Book Value	9 *	10 Statement Value	11 Fair Value	12 Year to Date Increase/ (Decrease) by Adjustment	13 Used to Adjust Basis	14 Other Investment/ Miscellaneous Income

NONE

SCHEDULE DB - PART C - SECTION 1

Showing All Collar, Swap and Forwards Open at Current Statement Date

1 Description	2 Notional Amount	3 Date of Maturity, Expiry, or Settlement	4 Strike Price, Rate or Index Rec (Pay)	5 Date of Opening Position or Agreement	6 Exchange or Counterparty	7 Cost or (Consideration Received)	8 Book Value	9 *	10 Statement Value	11 Fair Value	12 Year to Date Increase/ (Decrease) by Adjustment	13 Used to Adjust Basis of Hedged Item	14 Other Investment/ Miscellaneous Income	15 Potential Exposure

NONE

SCHEDULE DB - PART D - SECTION 1

Showing All Futures Contracts and Insurance Futures Contracts at Current Statement Date

1	2	3	4	5	6	7	8	9	Variation Margin Information			13
									10	11	12	
Description	Number of Contracts	Maturity Date	Original Value	Current Value	Variation Margin	Date of Opening Position	Exchange or Counterparty	Cash Deposit	Recognized	Used to Adjust Basis of Hedged Item	Deferred	Potential Exposure

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Rate of Interest	3 Amount of Interest Received During Current Quarter	4 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter 5 First Month	6 Second Month	7 Third Month	8 *
Open Depositories							
The Chase Manhattan Bank				(1,399,774)	(857,398)	(1,270,272)	XXX
Comerica Bank Detroit				112,960	101,997	58,007	XXX
National City Bank of Michigan				140,100	22,929	4,810	XXX
0199999. Total Open Depositories	XXX	0	0	(1,146,713)	(732,472)	(1,207,455)	XXX
0399999. Total Cash on Deposit	XXX	0	0	(1,146,713)	(732,472)	(1,207,455)	XXX
0599999. Total Cash	XXX	0	0	(1,146,713)	(732,472)	(1,207,455)	XXX