Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/30/3009.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	$135,447,582	4.4%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): IL AIC RAF 4.4% Change

With this filing, Allstate Insurance Company is modifying its rates for Homeowners and Deluxe Plus Homeowners in the state of Illinois. The overall rate change associated with this filing is 4.4%. The Rate Adjustment Factors on HORC-1 and DPRC-1 have been adjusted to reach the overall 4.4% impact. DPRC-1, DPRC-2, and rules 17 and 27 have also been updated for clarification purposes. Please refer to the attached Filing Memorandum, Rates and Rules for more information about this change.

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* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Allstate Insurance Company
Name of Company

Stephen J. Burbick - State Filings Director
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-30-09 New, 4-1-09 Renewal

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	686,549	+14.6%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates uniformly by territory for Owners forms. The percent change is estimated.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

American Fire & Casualty Insurance Company
Name of Company

Nancy Greene, PL State Filing Technician II
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New Business eff. 3/30/08 & Renewal Business eff. 6/3/08

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$623,232	4.6%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Change in unities.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

American Select Insurance Company
Name of Company

Nichole Kelsey
Associate Financial Analyst
Product Management Department
Official - Title

H29219D

Section 745.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/25/09

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damag Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	190,000	-1.9%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Life of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain Classes? If so, Specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify Organization): Introduce new coverages and rating variables, revisions to current rating variables(PC, AOP Ded, Windstorm/Hail Ded, LPC, Liability, Optional Coverages). Please see Actuarial Memorandum for details.

**Change in Company's premium level which will result from application of new rates.

Bankers Standard Insurance Company
Name of Company

Diane De Santi - VP
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/23/09

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	0	5.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, this filing is applicable to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Base rates revision only

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

The First Liberty Insurance Company
Name of Company

Erin Rodliff - Senior Actuarial Analyst
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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FEB 09 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/28/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$414,441	3.0%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

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Does filing only apply to certain territory (territories) or certain classes? If so, specify:
applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
revision to base rate and cap

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Garrison Property And Casualty Insurance Company
Name of Company

Michael Foley – AVP Insurance Compliance
Official - Title

H29219D

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/23/09

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	39,607,277	5.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, this filing is applicable to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Base rates revision only

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Liberty Mutual Fire Insurance Company
Name of Company

Erin Rodliff - Senior Actuarial Analyst
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-30-09 New, 4-1-09 Renewal

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	284,206	+14.3%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates uniformly by territory for Owners forms. The percent change is estimated.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Ohio Casualty Insurance Company
Name of Company

Nancy Greene, PL State Filing Technician II
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/28/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$17,457,578	3.3%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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Does filing only apply to certain territory (territories) or certain classes? If so, specify:
applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
revision to base rate and cap

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

USAA Casualty Insurance Company
Name of Company

Michael Foley – AVP Insurance Compliance
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/28/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$131,414	3.5%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/DFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
revision to base rate and cap

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

USAA General Indemnity Company
Name of Company

Michael Foley – AVP Insurance Compliance
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/28/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$25,901,382	3.5%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/DFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
applies to all territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
revision to base rate and cap

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

United Services Automobile Association
Name of Company

Michael Foley – AVP Insurance Compliance
Official - Title

H29219D

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-30-09 New, 4-1-09 Renewal

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	6,462,091	+14.4%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates uniformly by territory for Owners forms. The percent change is estimated.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

West American Insurance Company
Name of Company

Nancy Greene, PL State Filing Technician II
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New Business eff. 3/30/08 & Renewal Business eff. 6/3/08

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$1,220,718	5.1 %
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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FEB 24 2009
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Change in unities.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Westfield Insurance Company
Name of Company

Nichole Kelsey
Associate Financial Analyst
Product Management Department
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New Business eff. 3/30/08 & Renewal Business eff. 6/3/08

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	$150,438	4.4%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Change in unities.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Westfield Insurance Company
(Wespak Estate)
Name of Company

Nichole Kelsey
Associate Financial Analyst
Product Management Department
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New Business eff. 3/30/08 & Renewal Business eff. 6/3/08

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$1,098,934	4.9%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Change in unities.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Westfield National Insurance Company (Wespak)
Name of Company

Nichole Kelsey
Associate Financial Analyst
Product Management Department
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New Business eff. 3/30/09 & Renewal Business eff. 6/3/09

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	$1,133,203	5.1%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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FEB 24 2009
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Change in unities.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Westfield National Insurance Company (Homepak)
Name of Company

Nichole Kelsey
Associate Financial Analyst
Product Management Department
Official - Title

H29219D