ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 06/01/2009.

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	120,198,262	+ 2.7 %
16. Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JUN 01 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) **See cover letter;** (Adopt 1/1/09 Advisory Rates)

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

Amended Effective Date

ACE AMERICAN INSURANCE COMPANY
Name of Company

Steve Kreider – WC Associate Product Manager
Official — Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	$1,656,547	5.60%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: We are revising the list of credited classes to delete 3066 and add 3076 since NCCI has discontinued class 3066.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI Loss Costs (IL-2008-07). There is no change to our Loss Cost Multipliers.

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

Addison Insurance Company
Name of Company

Allen R. Sorensen, VP - Corporate Underwriting
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

F 540 UNIFORM

FORM (RF-3) ESTIMATED
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2009

	(1) Coverage	(2) Annual Premium Volume	(3) Percent Change(+or-)**
1.	Auto Liability		
	Private Passenger	N/A	N/A
	Commercial	N/A	N/A
2.	Auto Physical Damage		
	Private Passenger	N/A	N/A
	Commercial	N/A	N/A
3.	Liability Other Than Auto	N/A	N/A
4.	Burglary & Theft	N/A	N/A
5.	Glass	N/A	N/A
6.	Fidelity	N/A	N/A
7.	Surety	N/A	N/A
8.	Boiler & Machinery	N/A	N/A
9.	Fire	N/A	N/A
10.	Extended Coverage	N/A	N/A
11.	Inland Marine	N/A	N/A
12.	Homeowners	N/A	N/A
13.	Commercial Multi-Peril	N/A	N/A
14.	Crop Hail	N/A	N/A
15.	Other Workers Comp (Line of Insurance)	$61746	-2%

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

Brief description of filing.(If filing follows the rates of an advisory organization's specify organization): We are withdrawing the NCCI 3% rate charge for terrorism. The coverage is still provided but at no charge (0%). We are also adopting the NCCI Voluntary Advisory rates which are effective 1/1/09.

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

American Country Insurance Company, Inc.
Name of Company

Tom Gannon, Compliance Manager
Official Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED

JAN 01 2009

SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04-01-2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$5,238,666	+9.8

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):
Adopting 1-1-09 NCCI loss costs and rating values effective 4-1-09 and changing LCM from 1.49 to 1.61.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

American Economy Insurance Company
Name of Company

Eric B. Ummel

Eric B. Ummel
Vice President, Commercial Lines Product Management
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04-01-2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$5,758,482	+10.4

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):
Adopting 1-1-09 NCCI loss costs and rating values effective 4-1-09 and changing LCM from 1.66 to 1.79.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

American States Insurance Company
Name of Company

Eric B. Ummel
Vice President, Commercial Lines Product Management
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/09

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	$3,767.31	+3.62%
	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):
Adopt NCCI's 1/1/09 Rate Revision with 0.97 deviation to the rates and a change in the effective date to 3/1/09.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 1 2009
SPRINGFIELD, ILLINOIS

Ansur America Insurance Company
Name of Company

Wanda Raymond
R&D Senior Associate
Official - Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JAN 01 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/09.

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$150,962	+3.8 %

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): Adoption of the NCCI Loss Costs IL-2008-13 Maintaining Current multipliers. We are also filing a revision to our Installment Premium Payment Plan.

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

Atlantic Specialty Insurance Company
Name of Company

Cheryl R. Turner

Cheryl R. Turner, Assistant Vice President Workers Compensation

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 03/01/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$63,438,580.	+3.8%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 3/1/09. Please reference NCCI circulars IL-2008-09 and IL-2008-07.

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

The Cincinnati Casualty Company
Name of Company

Connie Petertonjes - Analyst
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$7,830,996.	+3.2%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 3/1/09. Please reference NCCI circulars IL-2008-09 and IL-2008-07.

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

The Cincinnati Indemnity Company
Name of Company

Connie Petertonjes - Analyst
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$11,268,486.	+3.4%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 3/1/09. Please reference NCCI circulars IL-2008-09 and IL-2008-07.

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

The Cincinnati Insurance Company
Name of Company

Connie Petertonjes - Analyst
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Workers Compensation** (Line of Insurance)	55,761	-0.8%

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):
Adoption of NCCI 1-1-2009 loss costs

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

DaimlerChrysler Insurance Company
Name of Company

Michelle Freitag, Consulting Actuary
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
FEB 01 2009
SPRINGFIELD, ILLINOIS

F 540 UNIFORM

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/09.

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$520,880	+3.8%

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): Adoption of the NCCI Loss Costs IL-2008-13 Maintain current multiplier. We are also filing a revision to our Installment Premium Payment Plan.

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JAN 01 2009
SPRINGFIELD, ILLINOIS

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

Employers Fire Insurance Company
Name of Company

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
DEC 29 2008
SPRINGFIELD, ILLINOIS

Cheryl R. Turner

Cheryl R. Turner, Assistant Vice President Workers Compensation

Official -Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04-01-2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$3,463,802	+3.5

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):
Adopting 1-1-09 NCCI loss costs and rating values effective 4-1-09 and changing LCM from 1.85 to 1.87.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

First National Insurance Company of America
Name of Company

Eric B. Ummel
Vice President, Commercial Lines Product Management
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/09

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	$107,045.16	+1.15%
	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):
Adopt NCCI's 1/1/09 Rate Revision with no deviation to the rates, just a change in the effective date to 3/1/09.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

Frankenmuth Mutual Insurance Com
Name of Company

Wanda Raymond
R&D Senior Associate
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04-01-2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$2,225,394	+10.7

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):
Adopting 1-1-09 NCCI loss costs and rating values effective 4-1-09 and changing LCM from 1.82 to 1.97.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

General Insurance Company of America
Name of Company

Eric B. Ummel

Eric B. Ummel
Vice President, Commercial Lines Product Management
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective ~~01/01/2009~~. 06-01-09

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	110,330,646	+2.7%
16. Other _____ Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JUN 01 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) **See cover letter;** (Adopt 1/1/09 Advisory Rates)

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

Amended Effective Date

INDEMNITY INSURANCE COMPANY of N. AMERICA
Name of Company

Steve Kreider – WC Associate Product Manager
Official — Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JUN 01 2009
SPRINGFIELD

Form (RF-3)

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revisions effective 03/01/2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	3,205,256	29.20%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We will adopt NCCI loss costs as approved in NCCI circular IL-2008-13 using a loss costs multiplier of 1.727 with the exception of classes except 0037, 0050, 0083, 2014, 4583, 8215, 8304, 8742, and 8810 where we will adopt the Assigned Risk rate due to poor loss experience.

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

Michigan Millers Mutual Insurance Company
Name of Company

Tom Lindell -- Executive Vice President
Official - Title

Form (RF-3)

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revisions effective 03/01/2008

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation Line of Insurance	3,887,272	29.20%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Using NCCI Circular IL-2008-13, we have used our company Loss Cost Modifier of 1.727 for all classes except 0037, 0050, 0083, 2014, 4583, 8215, 8304, 8742, and 8810 where we will use a loss costs multiplier of 2.032 due to poor loss experience.

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

Michigan Millers Mutual Insurance Company
Name of Company

Tom Lindell -- Executive Vice President
Official - Title

Section 754

Change in Company's premium or rate level produced by rate revision effective April1, 2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$2,782,000	9.8%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Yes, we are proposing an upward deviation of 1.176 for contractors, artisan contractor classes and automotive classes 8380 and 8393.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are proposing an upward deviation of 1.176 for contractors, artisan contractors classes and automotive classes 8380 and 8393.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 12 2009
SPRINGFIELD, ILLINOIS

Mid-Century Insurance Company
Name of Company

James J. Gebhard, FCAS, MAAA
Actuary, Workers Compensation

Form (RF-3) ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/09

	(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 & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers' Compensation	5,534,894	4.2%
16.	Other		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization.
Adoption of NCCI Loss cost and expense constant change to $350.

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

North American Specialty Insurance Company
Name of Company

Linda Snook, Compliance Specialist
Official -- Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/09.

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$1,325,653	+3.8 %

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, state which organization.) Adoption of the NCCI Loss Costs IL-2008-13 Maintaining the current multiplier. We are also filing a revision to our Installment Premium Payment Plan.

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JAN 01 2009
SPRINGFIELD, ILLINOIS

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

OneBeacon America Insurance Company
Name of Company

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
DEC 29 2008
SPRINGFIELD, ILLINOIS

Cheryl R. Turner

Cheryl R. Turner, Assistant Vice President Workers Compensation
Official -Title

H29219D

Form (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
JAN 01 2009
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 1/1/09.

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$12,284	-19.7 %

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI Loss Costs IL-2008-13 We are amending the multiplier to 1.00. We are also filing a revision to our Installment Premium Payment Plan.

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

OneBeacon Insurance Company
Name of Company

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
DEC 29 2008
SPRINGFIELD, ILLINOIS

Cheryl R. Turner

Cheryl R. Turner, Assistant Vice President Workers Compensation
Official -Title

H29219D

RECEIVED
DEC 19 2008
IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	10,918,146	0.5%

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):
We are adopting the NCCI loss costs that are effective 1/1/09 and revising our current loss cost multipliers.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
FEB 12 2009
SPRINGFIELD, ILLINOIS

Selective Insurance Company of South Carolina
Name of Company

Tracy Potter
State Filing Specialist
Official - Title

H29219D

RECEIVED
DEC 19 2008
IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2009

	(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		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	9,305,357	8.4%

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):
We are adopting the NCCI loss costs that are effective 1/1/09 and revising our current loss cost multipliers.

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

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
FEB 12 2009
SPRINGFIELD, ILLINOIS

Selective Insurance Company of the Southeast
Name of Company

Tracy Potter
State Filing Specialist
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 04-01-09

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	$36,900,863	+4.2%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI's 1/1/2009 loss costs and miscellaneous rating values.

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

State Farm Fire and Casualty Company
Name of Company

Gregory S. Girard, F.C.A.S., MAAA
Actuary and Assistant Secretary-Treasurer
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2009

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	$9,203,141	3.90%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: We are revising the list of credited classes to delete 3066 and add 3076 since NCCI has discontinued class 3066.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI Loss Costs (IL-2008-07). There is no change to our Loss Cost Multipliers.

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

United Fire & Casualty
Name of Company

Allen R. Sorensen, VP - Corporate Underwriting
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
APR 01 2009
SPRINGFIELD, ILLINOIS

F 540 UNIFORM

Form (RF-3) ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/09

(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 & Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers' Compensation	19,844,077	4.2%
16. Other		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2009
SPRINGFIELD, ILLINOIS

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization.
Adoption of NCCI Loss cost and expense constant change to $350.

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

Westport Insurance Corporation
Name of Company

Linda Snook, Compliance Specialist
Official -- Title