Section 754.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 10/01/2009.

	(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		
13.	Commercial Multi-Peril	6,928,709	+4.8
14.	Crop Hail		
15.	Other Life 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): Adopting CF-2008-RLA1, CF-2008-RTERU, GL-2008-SUKPP and GL-2008-IALL1. Also revised our Bis-Pak property and general liability loss cost multipliers.

*Adjusted to reflect all prior rate changes.

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

ACUITY, A Mutual Insurance Company
Name of Company

Regulatory Filing Technician
Official – Title

Section 754.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 10-01-2009 .

(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	$2,711,738	+ 1.7%
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: Adopt ISO loss cost changes from designation GL-2008-IALL1. Our company utlitizes Tables 1 and 2.

* Adjusted to reflect all prior rate changes

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

Admiral Indemnity Company
Name of Company

Donald Togneri – Sr. VP - Underwriting
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-01-2009 NB & RB

(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	$2,204,891	6.7%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

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):
Please refer to the enclosed Actuarial Memorandum.

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

American Fire and Casualty Company
Name of Company

Scott Edwards, Regulatory Filing Analyst
Official – Title

Section 754.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 07/01/2009.

	(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		
13.	Commercial Multi-Peril	$15,753,654	+2.3%
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: This filing does not solely apply to certain territories or classes.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Rate and rule revision.

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

Auto-Owners Insurance Company
Name of Company

Emily Schmit - Manager CP&L Actuarial
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-15-09 New / 12-15-09 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		
13. Commercial Multi-Peril	661,909	6.1%
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):
We are adopting ISO rule, revising company package modification factor and miscellaneous changes to additional manual pages.

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

GuideOne America Insurance Company
Name of Company

Joseph Highbarger, FCAS, MAAA - Asst VP / Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-15-09 New / 12-15-09 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		
13. Commercial Multi-Peril	2,288,416	6.3%
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):
We are adopting ISO rule, revising company package modification factor and miscellaneous changes to additional manual pages.

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

GuideOne Elite Insurance Company
Name of Company

Joseph Highbarger, FCAS, MAAA - Asst VP / Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-15-09 New / 12-15-09 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		
13. Commercial Multi-Peril	4,775,943	6.3%
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):
We are adopting ISO rule, revising company package modification factor and miscellaneous changes to additional manual pages.

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

GuideOne Mutual Insurance Company
Name of Company

Joseph Highbarger, FCAS, MAAA - Asst VP / Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-15-09 New / 12-15-09 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		
13. Commercial Multi-Peril	113,888	6.6%
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):
We are adopting ISO rule, revising company package modification factor and miscellaneous changes to additional manual pages.

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

GuideOne Specialty Mutual Insurance
Name of Company

Joseph Highbarger, FCAS, MAAA - Asst VP / Actuary
Official – Title

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective: **1/1/10**

	(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 & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine _____		
12.	Homeowners		
13.	Commercial Multi-Peril	**$479,006**	**~ 1%**
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other:		

Line of Insurance

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): **Effective January 1, 2010, IMT Group is filing a revision rule for the premium associated with the endorsement, PAR PAK – Golf Course Coverage endorsement – BO 3008 01 10. (This endorsement is being filed under a separate filing number.) The premium increase for this endorsement was established by reviewing the additional coverages that are being provided.**

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

IMT Insurance Company
Name of Company

Jason Thompson, BA, MA Filing Analyst, Research & Development
Official - Title

Section 754.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 July 15, 2009.

	(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		
13.	Commercial Multi-Peril	$1,827	-49%
14.	Crop Hail		
15.	Other		
	Life 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): Adoption of AAIS Earthquake Rates, AAIS-99-58LC

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

Jewelers Mutual Insurance Company
Name of Company

cn=Sara Hillestad, o=Jewelers Mutual, ou=Actuary and Compliance, email=shillest@jmic.com, c=US
I agree to the terms defined by the placement of my signature on this document
JEWELERS MUTUAL INSURANCE
2009.07.06 09:15:21 -05'00'

Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-01-2009 NB & RB

(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	$1,407,680	6.7%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

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): _____
Please refer to the enclosed Actuarial Memorandum.

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

The Ohio Casualty Insurance Company
Name of Company

Scott Edwards, Regulatory Filing Analyst
Official – Title

Section 754.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 07/01/2009.

	(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		
13.	Commercial Multi-Peril	$16,657,414	+2.3%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: This filing does not solely apply to certain territories or classes.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Rate and rule revision.

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

Owners Insurance Company
Name of Company

Emily Schmit - Manager CP&L Actuarial
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

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

(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	$67,114	-11.76%
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): We are adopting AAIS' manual revision 06 09 and the corresponding loss cost revision and revised rating information page 07 09. We are making no change to our loss cost multiplier with these revisions.

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

Pharmacists Mutual Insurance Company
Name of Company

Janine M MacVey, Rate Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-01-2009 NB & RB

(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	$2,159,054	6.7%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

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):
Please refer to the enclosed Actuarial Memorandum.

*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

Scott Edwards, Regulatory Filing Analyst
Official – Title