Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08-01-2009

| (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 | 6380(exact) | +3.0 |
| 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 _____ (Line of Insurance) | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are revising the factors in the Rule 45. portion of our liquor liability manual. Our previously approved liquor rating manual (NWCM-125541309) have been amended to display the ISO factors. These factors are shaded in our revised manual.

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

Allied Property & Casualty Insurance Company
Name of Company

Janis A La Barre, Filing Specialist
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 05 2009
SPRINGFIELD, ILLINOIS

Serff# NWCM-126054856

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08-01-2009

| (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 | 8576 (exact) | +3.0 |
| 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 _____ (Line of Insurance) | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the factors in the Rule 45. portion of our liquor liability manual. Our previously approved liquor rating manual (NWCM-125541309) have been amended to display the ISO factors. These factors are shaded in our revised manual.

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

AMCO Insurance Company
Name of Company

Janis A La Barre, Filing Specialist
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 05 2009
SPRINGFIELD, ILLINOIS

Serff # NWCM-126054856

**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 03/30/2009.

| | (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 | 563,542 | 25.00% (exact) |
| 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 | | |
| | Life of Insurance | | |

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
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MAR 13 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): BancInsure, Inc. is increasing the base rates in our Extended Professional Liability Insurance program.

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

BancInsure, Inc.
Name of Company

Debbie Tebbe, Assistant Vice President
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 | $630,069 | +19.8 |
| 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 | | |
| | Life of Insurance | | |

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 25 2009
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing applies to all classes insured - Independently filed rates.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): CAMICO is filing for a 19.8% rate increase. The rate increase is pricipally due to adverse development in the loss reserves due to a change in the loss climate as losses resulting from the economic downturn have adversely affected the accountants' professional liability exposures. The increase loss exposure has impacted the loss development factors as claims are emerging latter than expected and additional high value loss exposure. Also the data doesn't reflect the losses from the "Madoff ponzi" scheme.

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

CAMICO Mutual Insurance Company
Name of Company

John T. Takayoshi
Official – Title

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE
## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2009

| (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 | 587,000 | +8.0% |
| 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 _____ (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):
Rate revision for AICPA Personal Catastrophe Liability Program

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

Continental Casualty Company
Name of Company

Robert Anderson, ACAS
Actuarial Consulting Director, Proprietary Rating
Official – Title

F 540 UNIFORM

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective **7/15/2009**

| (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 | **$2,663,746 Liquor Liability** | **+0.03%** |
| 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 _____ Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
**Liquor Liability risks/classes only**

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
**Adopting ISO Filing Designation CL-2009-RLIQ1 - Illinois Liquor Liability Rule Revision.**

* 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
RECEIVED
MAR 24 2009
SPRINGFIELD, ILLINOIS

**Continental Western Insurance Company**
Name of Company

**Lisa Sumners-Gist- Research Analyst**
Official - Title

H29219D

Serff # CONT-126078361

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2009

| (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 | 9,704 | +1.3 |
| 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 _____ (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): Submission to adopt ISOs Increased Limit Factors.

*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 Corporation
Name of Company

Luann Benetti — Senior State Filings Analyst
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 183,311 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Accident and Indemnity Company**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 1,102,711 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Casualty Insurance Company**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 7,584,169 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Fire Insurance Company**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 103,433 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Insurance Company of Illinois**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 476,877 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Insurance Company of the Midwest**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 1,145,652 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Hartford Underwriters Insurance Company**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3.31.2009

| (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 | $2,418,016 | 0.19% |
| 14. Crop Hail | | |
| 15. Other _____ Line of Insurance | | |

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

Brief description of filing: (If filing follows rates of an advisory organization, specify organization):
We are adding Liquor Liability as an optional coverage to our Vintner program which was effective 12.1.2008. We are using ISO's occurrence coverage form, CG 00 33 (12/07).

* 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
RECEIVED
MAR 09 2009
SPRINGFIELD, ILLINOIS

Hastings Mutual Insurance Co.
Name of Company

Agnes Karas-Product Manager
Official - Title

H29219D

Serff #HAST-126066434

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2009

| (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 | 2,750,622 | +1.3 |
| 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 _____ (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): Submission to adopt ISOs Increased Limit Factors.

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

Liberty Insurance Corporation
Name of Company

Luann Benetti — Senior State Filings 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 08/01/2009

| (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 | 17,465,414 | +1.3 |
| 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 _____ (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): Submission to adopt ISOs Increased Limit Factors.

*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

Luann Benetti — Senior State Filings 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 08/01/2009

| (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 | 11,066,483 | +1.3 |
| 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 _____ (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): Submission to adopt ISOs Increased Limit Factors.

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

Liberty Mutual Insurance Company
Name of Company

Luann Benetti — Senior State Filings 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 08/01/2009

| (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 | 1,125,113 | +1.3 |
| 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 _____ 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): Submission to adopt ISOs Increased Limit Factors.

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

LM Insurance Corporation
Name of Company

Luann Benetti — Senior State Filings Analyst
Official – Title

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2009

| | (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 | $444,762 | +11.9% |
| 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 _____ Line of Insurance | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
ISO Loss Cost Adoption of GL-2008-BGL1 and GL-2008-IALL1
Circular reference LI-GL-2008-178 and LI-GL-2008-204

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

Markel American Insurance Company
Name of Company

Deidre I. Balbuena,
VP Product & Regulatory Services
Official - Title

H29219D

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2009

| | (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 | $1,594,153 | +11.9% |
| 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 _____ Line of Insurance | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
ISO Loss Cost Adoption of GL-2008-BGL1 and GL-2008-IALL1
Circular reference LI-GL-2008-178 and LI-GL-2008-204

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

Markel Insurance Company
Name of Company

Deidre I. Balbuena,
VP Product & Regulatory Services
Official - Title

H29219D

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2009

| (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 | $4,112 | +2.2% |
| 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 _____ Line of Insurance | | |

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):
National Interstate Insurance Company's Commercial For Hire Transportation PG program adoption of Illinois General Liability Loss Costs as referenced in ISO Reference Document GL-2008-BGL1.

* 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
RECEIVED
MAR 13 2009
SPRINGFIELD, ILLINOIS

National Interstate Insurance Company
Name of Company

Kathy Juhasz, Regulatory Compliance 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 08-01-2009

| (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 | 53 (exact) | +3.0 |
| 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 _____ (Line of Insurance) | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the factors in the Rule 45. portion of our liquor liability manual. Our previously approved liquor rating manual (NWCM-125541309) have been amended to display the ISO factors. These factors are shaded in our revised manual.

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

Nationwide Mutual Fire Insurance Company
Name of Company

Janis A La Barre, Filing Specialist
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 05 2009
SPRINGFIELD, ILLINOIS

Serff # NWCM-126054856

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08-01-2009

| (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 | 6380(exact) | +3.0 |
| 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 _____ (Line of Insurance) | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the factors in the Rule 45. portion of our liquor liability manual. Our previously approved liquor rating manual (NWCM-125541309) have been amended to display the ISO factors. These factors are shaded in our revised manual.

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

Nationwide Mutual Insurance Company
Name of Company

Janis A La Barre, Filing Specialist
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 05 2009
SPRINGFIELD, ILLINOIS

serff# NWCM - 126054856

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08-01-2009

| (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 | 1882 (exact) | +3.0 |
| 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 _____ (Line of Insurance) | | |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the factors in the Rule 45. portion of our liquor liability manual. Our previously approved liquor rating manual (NWCM-125541309) have been amended to display the ISO factors. These factors are shaded in our revised manual.

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

Nationwide Property & Casualty Insurance Company
Name of Company

Janis A La Barre, Filing Specialist
Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 05 2009
SPRINGFIELD, ILLINOIS

Serff # NWCM- 126054856

## 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 05/01/2009.

| | (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 | 168536 | 9.2% |
| 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 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 ISO LC Filing GL-2008-BGL1

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

Nova Casualty Company
Name of Company

Brenda Eldridge, Sr, Compliance 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 05/01/2009.

| | (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 | 93,578 | +7.5% |
| 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 Life of Insurance | | |

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): Adoption of ISO General Liability Loss Cost Revision under filing designation # GL-2008-BGL1 to be implemented for all programs, for all policies effective 5/1/09 and after.

*Adjusted to reflect all prior rate changes.

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

Praetorian Insurance Company
Name of Company

Pamela Alt VP Compliance
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 February 23, 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 | $407,872 | +6.2% |
| 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 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): Essential Program - base rate revision.
Select Program - revised base rate, Increased Limit Factors, AOP Factors, and Representative Expense
Premier Program - revised base rate and AOP Factors

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

Professionals Direct Insurance Company
Name of Company

Kathleen Cunningham - VP, Lead Actuary
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 30,164 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Property and Casualty Ins. Co. of Hartford**
Name of Company

**Aaron Mills, AVP**
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 05/01/2009.

| | (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 | 12,434 | +7.5% |
| 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 Life of Insurance | | |

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): Adoption of ISO General Liability Loss Cost Revision under filing designation # GL-2008-BGL1 to be implemented for all programs, for all policies effective 5/1/09 and after.

*Adjusted to reflect all prior rate changes.

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

Redland Insurance Company
Name of Company

Pamela Alt VP Compliance
Official – Title

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 | 6,117,414 | 2.9% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | 1,735,704 | 2.4% |
| 3. | Liability Other Than Auto | 9,114,262 | 2.9% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 5,743,969 | 1.6% |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 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:
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Revise our package modification factors for Commercial Auto, Commercial Property and General Liability lines Of business written under SICSC.

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

Selective Insurance Company of South Carolina (SICSC)
Name of Company

Judy Symons – State Filings Specialist
Official - Title

H29219D

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 | 1,058,564 | 2.8% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | 318,646 | 2.6% |
| 3. | Liability Other Than Auto | 1,342,056 | 5.7% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 528,395 | 6.4% |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 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:
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Revise our package modification factors for Commercial Auto, Commercial Property and General Liability lines
Of business written under SICSE.

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

Selective Insurance Company of the Southeast (SICSE)
Name of Company

Judy Symons – State Filings Specialist
Official - Title

H29219D

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5-01-2009

| | (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 | 308,278 | +10.3% |
| 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 _____ 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):
Implementing ISO Revision Designation Number GL-2008-BGL1 and GL-2008-IALL1

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

Shelter Mutual Insurance Company
Name of Company

Brian Marcks, Coord Ins Dept Affairs
Official - Title

H29219D

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009

| | (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 | $(126,689) | 7.5% |
| 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 _____ Line of Insurance | | |

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):
Adoption of Illinois GL Advisory Prospective Loss Costs.

* 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
RECEIVED
MAR 09 2009
SPRINGFIELD, ILLINOIS

Sompo Japan Insurance Company of America
Name of Company

Mary Lynn Teel, State Filings Analyst
Official - Title

H29219D

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 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 | $320,612 | +1.3% |
| 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 _____ Line of Insurance | | |

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):
Rating Organization: Insurance Services Office, Inc. (ISO)
Adoption of ISO reference filing GL-2008-IALL1

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

Stonington Insurance Company
Name of Company

Senior Counsel – Compliance Manager
Official - Title

H29219D

Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 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 | $143,667 | 12.7% |
| 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 _____ Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: General Liability - See Exhibit A for list of classes & territories for which this change is applicable.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs and ISO Increased Limit Factors.

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

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.
Name of Company

Compliance Support Analyst
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2009

| | | (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 | 986,777 | 3% |
| 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 _____ 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):
ISO's General Liability Loss Cost GL 2008-BGL1 and ISO's General Liability Increased Limit Factors
ISO Revision Designation Number GL-2008-IALL1

**Twin City Fire Insurance Company**
Name of Company

**Aaron Mills, AVP**
Official - Title

Form ( RF-3 )

# ILLINOIS DEPARTMENT OF INSURANCE
## SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effecti 9/1/2009

| (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 | $2,347,499 | 5.4% |
| 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 _____ Line of Insurance | | |

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

Brief description of filing . ( If filing follows rates of an advisory organization, specify organization ):
Increasing base rate with several other miscellaneous rule changes for Professionals Premier for Lawyers program.

*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

Patrick Cobb, Regulatory & Actuarial Services Leader
Official-Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED
MAR 10 2009
SPRINGFIELD, ILLINOIS

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