Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/07

(1) Coverane	(2) Annual Premium Volume (Illinois)	(3) Percent Channe (+ or -)**
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 **(Liltrapack)**	$948,920	0.2%
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Yes, applicable only to classes eligible for each Enhancement Endorsement that are changing.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Change to coverages and rates for the following Enhancement Endorsements: Printers, Funeral, Florists, Retailers, Offices, General Wholesale, and Hair and Nail Salons.

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

Erie Insurance Exchange
Name of Company

Ross C. Forticella, ACAS, MAAA
Vice President and Manager
Official - Title

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SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/16/2007

	(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	$729,456	14.0%
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):
Rate Change - see cover memo for details

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

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Farmers Insurance Exchange
Name of Company

Joshua Taub - Product Manager
Official - Title

H29219D

Illinois Farmers Insurance Exchange
Farmers Insurance Exhange
Illinois

Line of Business: Commercial Multiple Peril
Subline: Landlords Protector

Summary of Premium Effects

Type of Change	Premium Effect
Earthquake Rate Changes	0.1%
Deductible Factor Changes	7.6%
Modified Replacement Cost Factor Changes	0.8%
Base Rate Changes	5.0%
Total Change	14.0%
Projected Premium at Current Level $	11,145,823
Annual Dollar Effect $	1,560,415
Indication	15.0%

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	70,327	5.3%
4. Burglary and Theft	-	
5. Glass	(Included In Fire & Extended Coverage)	
6. Fidelity	-	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	-	
10. Extended Coverage	-	
11. Inland Marine	-	
12. Homeowners	-	
13. Commercial Multi-Peril	3,047,091	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):
FCCI Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

FCCI Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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STATE OF ILLINOIS/IDRPR
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ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	4,077,758	3.2%
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):
FCCI Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

FCCI Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07-15-2007 for new and 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*	2,884,531	-0.4%
14. Crop Hall		
15. Other		

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): Revising Businessower base rates, introducing amount of insurance curve, and modifying transition caps.

* Adjusted to reflect all prior rate changes.

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

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Grange Mutual Insurance Company
Name of Company

Todd F. Witte
Official - Title
Todd Witte
Commercial Pricing Analyst IV

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/16/2007

	(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	$11,246,424	14.0%
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):
Rate Change - see cover memo for details

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

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Illinois Farmers Insurance Company
Name of Company

Joshua Taub - Product Manager
Official - Title

H29219D

Illinois Farmers Insurance Exchange
Farmers Insurance Exchange
Illinois

Line of Business: Commercial Multiple Peril
Subline: Landlords Protector

Summary of Premium Effects

Type of Change	Premium Effect
Earthquake Rate Changes	0.1%
Deductible Factor Changes	7.6%
Modified Replacement Cost Factor Changes	0.8%
Base Rate Changes	5.0%
Total Change	14.0%
Projected Premium at Current Level $	11,145,823
Annual Dollar Effect $	1,560,415
Indication	15.0%

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

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FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007.

	(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	360,756	+5.24%
14.	Crop Hail		
15.	Other Life of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Rate changes by class are 4.0% except Restaurants which are 8.0%

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

Iowa Mutual Insurance Co.
Name of Company

Beverly Barber - Compliance
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	2,491,613	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):
Monroe Guaranty Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

Monroe Guaranty Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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STATE OF ILLINOIS/IDFPR
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ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	123,091	6.9%
4. Burglary and Theft	-	
5. Glass	(Included in Fire & Extended Coverage)	
6. Fidelity	-	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	-	
10. Extended Coverage	-	
11. Inland Marine	-	
12. Homeowners	-	
13. Commercial Multi-Peril	1,850,375	8.2%
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):
Monroe Guaranty Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

Monroe Guaranty Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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STATE OF ILLINOIS/IDFPR
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ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	6,070	3.0%
4. Burglary and Theft	-	
5. Glass	(Included in Fire & Extended Coverage)	
6. Fidelity	-	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	-	
10. Extended Coverage	-	
11. Inland Marine	-	
12. Homeowners	-	
13. Commercial Multi-Peril	691,843	8.6%
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):
National Trust Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

National Trust Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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STATE OF ILLINOIS/IDFPR
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ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2007

(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	914,498	1.2%
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):
National Trust Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

*Adjusted to reflect all prior rate changes. **(Year Earned is 2005)**
**Change in Company's premium level which will result from application of new rates.

National Trust Insurance Company
Name of Company

Debra J. Comstock, Regulatory Filing Specialist
Official – Title

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STATE OF ILLINOIS/IDFPR
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Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6-15-07 nb, 7-15-7 ren

(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	1,632,884.00	-1.8
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): We are filing to adopt revised rates for Businessowners and Business Provider.

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

Nationwide Mutual Fire Ins. Co.
Name of Company

Marie T. Safreed, State Filing Specialist
Official – Title

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ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6-15-07 nb, 7-15-7 ren

(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	1,383,126.00	-3.0
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): We are filing to adopt revised rates for Businessowners and Business Provider.

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

Nationwide Mutual Ins. Co.
Name of Company

Marie T. Safreed, State Filing Specialist
Official – Title

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ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6-15-07 nb, 7-15-7 ren

(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	4,838,544	0.3
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): We are filing to adopt revised rates for Businessowners and Business Provider.

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

Nationwide Property & Casualty Ins. Co.
Name of Company

Marie T. Safreed, State Filing Specialist
Official – Title

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ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effective 6/1/2007

(1) Coverage	(2) Annual Premiu 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	$774,044	0.0%
14. Crop Hail		
15. Other _____ Line of Insurance		

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

Brief description of filing . (If filing follows rates of an advisory organization, specify organization):
We are filing to adopt ISO filing designation number CL-2007-RLIQ1.

*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, P&RS Specialist
Official-Title

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