Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2010.

| (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 | 0 | -15% |
| 5. Glass | | |
| 6. Fidelity | $10,018 | -15% |
| 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):

American Alternative Insurance Corporation (AAIC) is currently affiliated with Insurance Services Office, Inc. (ISO). As such, ISO files advisory loss costs on behalf of AAIC. Our loss cost multiplier is already on file with your department; we are not making any changes to our loss cost multiplier at this time.

Due to administrative and system constraints, AAIC is currently implementing ISO revisions effective four months after the ISO effective date. Therefore, we hereby propose to delay implementation of the changes contained in ISO Reference Filing Number CR-2009-RLA1 (ISO effective date 06/01/2010) on the date shown below.

We propose that this filing apply to all policies effective on or after October 1, 2010.

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

American Alternative Insurance Corporation
Name of Company

Stephen J. Corbett - Vice President
Official - Title

H29219D

Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2010.

| (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 | 2,773,278 | 1.0 |
| 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):

We are filing revisions to the Fidelity Bond and Plastic Card Policy.

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

CUMIS Insurance Society, Inc.
Name of Company

Brenda L. Simpson, Rate and Forms Compliance Analyst
Official - Title

H29219D

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 2,028 | -14.8% |
| 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:
All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

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

Employers Insurance Company of Wausau
Name of Company

Nancy Weiler State Filings Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 114,005 | -24.0% |
| 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:
All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

*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

Nancy Weiler State Filings Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 2,791 | +1.6% |
| 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: All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

*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

Nancy Weiler State Filings Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 5,325 | -39.2% |
| 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: All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

*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

Nancy Weiler State Filings Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 40,177 | -36.4% |
| 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:
All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

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

Wausau Business Insurance Company
Name of Company

Nancy Weiler State Filings Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability Commercial | | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | 24,259 | -31.1% |
| 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:
All territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt ISO loss costs (circular LI-CR-2009-122) and revise Loss Cost Multipliers with an effective date of 11/1/2010.

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

Wausau Underwriters Insurance Company
Name of Company

Nancy Weiler State Filings Analyst
Official - Title