Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	$1,172,881	4.40%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: We are revising the list of credited classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI Loss Costs (IL-2010-1). We have changed our deviated Loss Cost Multiplier to 1.746, and our surcharged Loss Cost Multiplier to 2.181. Schedule credits/debits are changed to +/40%.

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

Addison Insurance Company
Name of Company

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

FILED
MAR 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

F 540 UNIFORM

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

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MAY 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	$10,800	+0.4%
	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): NCCI advisory loss costs and rating values.

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

Allied Eastern Indemnity Company
Name of Company

Richard W. Irons - Product Manager
Official – Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or –)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	$299,701	+0.4%
16. Other _____ Line of Insurance		

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JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) This filing proposes to apply the current loss cost multiplier of 1.450 (1.902 for F-classes) to the January 1, 2011 loss costs published by the National Council on Compensation Insurance effective January 1, 2011 for new and renewal policies. The ELFs are calculated using an LCM of 1.846.

* 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

Kathryn Sine, Senior State Filing Analyst
Official — Title

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2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06-01-2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$3,903,732	+2.4%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopting 1-1-11 NCCI-approved loss costs and revising Loss Cost Multiplier.

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

FILED

JUN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

American Economy Insurance Company
Name of Company

Eric B. Ummel

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

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$232,183	-0.2%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are filing to adopt NCCI's January 1, 2011 loss costs adjusted by our current multiplier of 1.473. This will result in an overall decrease of -0.2%.

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

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AUG 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

American Hardware Mutual Ins Co
Name of Company

Evelyn Bachman,
Filing /Manual Coordinator
Official - Title

H29219D

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JAN 20 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06-01-2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$2,125,705	+2.9%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopting 1-1-11 NCCI-approved loss costs and revising Loss Cost Multiplier.

* 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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JUN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

American States Insurance Company
Name of Company

Eric B. Ummel

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

H29219D

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Section 754

IL Department of Insurance
FORM (RF-3)
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$2,056,517	1.4%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2011 voluntary loss costs, for new and renewal policies.

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

Assurance Co. of America
Name of Company

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JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Nancy M. Hoppe, SVP and Chief Pricing A
Official - Title

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

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APR 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers' Compensation	$675,390	NCCI overall + 0.4%
	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): This Filing is to adopt the NCCI January 1, 2011 Loss Costs and Rating Values. Current LCMs of 1.30 standard and 1.10 coal will apply to the NCCI Loss Costs adopted with this filing.

*Adjusted to reflect all prior rate changes.

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

BrickStreet Insurance
Name of Company

Official – Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	12,245,015	-0.4%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.698 to 1.717. The filing maintains the current approved deviation of +10.0%.

* Adjusted to reflect all prior rate changes

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

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JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

The Charter Oak Fire Insurance Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Workers' Compensation** (Line of Insurance)	10,121,899	-2.2%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the 1/1/11 loss costs published by NCCI (NCCI Filing Circular # IL-2010-05)

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

Chubb Indemnity Insurance Company
Name of Company

Assistant Vice President
Official – Title

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers' Compensation	7268508	+ 0.4% ~~loss costs~~ Advisory Rates
	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): filing is to adopt NCCI WC rate filing effective 1/1/2011 circular filing IL-2010-07

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

Dallas National Insurance Compnay
Name of Company

Randy Achter
Official – Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	1,597,469	2.3%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.389 to 1.404. The filing maintains the current approved deviation of -10.0%.

* Adjusted to reflect all prior rate changes

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

Discover Property and Casualty Insurance Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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

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MAY 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	$563	+0.4%
	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): NCCI advisory loss costs and rating values.

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

Eastern Advantage Assurance Company
Name of Company

Richard W. Irons - Product Manager
Official – Title

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

FORM (RF-3)

SUMMARY SHEET

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MAY 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revisions effective 05/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	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		
14.	Crop Hail		
15.	Other Workers Compensation	$250,338	+0.4%
	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): NCCI advisory loss costs and rating values.

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

Eastern Alliance Insurance Company
Name of Company

Richard W. Irons - Product Manager
Official – Title

FILED

MAY 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5-1-11

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$7,686,457	4.70%

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 the advisory loss ocsts approved in NCCI circular IL-2010-10 with a loss cost multiplier of 1.64 with the exception of class 6204 which will have a multiplier of 0.74.

* 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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MAY 0 , 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FILED

MAY 0 , 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

EMCASCO Insurance Company
Name of Company

Don Coughennower
Assistant Vice President
Official - Title

H29219D

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JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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 01/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	14,917,237	0.4%
	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 NCCI loss costs

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

Employers Assurance Company
Name of Company

Steven Koester, Underwriting Business Analyst
Official – Title

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

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JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	3,858,183	32.8%
	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 NCCI loss costs and adjustment of loss cost multiplier from the current 1.3 to 1.72 to make ECIC our high priced carrier.

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

Employers Compensation Insurance Company
Name of Company

Steven Koester, Underwriting Business Analyst
Official – Title

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DEC - 8 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	6,108,421	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

FILED
FEB 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FILED

MAY 01 2011

Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 5-1-11

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$5,421,352	3.80%

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 the advisory loss costs approved in NCCI circular IL-2010-10 with a loss cost multiplier of 1.64 with the exception of class 6204 which will have a multiplier of 0.74.

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

FILED

MAY 0 , 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Employers Mutual Casualty Company
Name of Company

Don Coughennower
Assistant Vice President
Official - Title

H29219D

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

FILED

JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	817,896	0.4%
	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 NCCI loss costs

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

Employers Preferred Insurance Company
Name of Company

Steven Koester, Underwriting Business Analyst
Official – Title

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

FORM (RF-3)

SUMMARY SHEET

FILED
MAY 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 05/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	$37,374	+0.4%
	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): NCCI advisory rates and rating values.

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

Employers Security Insurance Company
Name of Company

Richard W. Irons - Product Manager
Official – Title

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JAN 28 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Autobobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$1,362,998	-2.0 %

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):
This filing is to adopt the approved NCCI Circulars IL-2010-05 & IL-2010-10 effective 1/1/2011.

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

Erie Insurance Company
Name of Company

Ross Fonticella

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

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JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$2,334,117	0.5 %

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
This filing is to adopt the approved NCCI Circulars IL-2010-05 & IL-2010-10 effective 1/1/2011.

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

Erie Insurance Company of New York
Name of Company

Ross Fonticella

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

FILED

JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$6,902,598	1.5 %

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
This filing is to adopt the approved NCCI Circulars IL-2010-05 & IL-2010-10 effective 1/1/2011.

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

Erie Insurance Exchange
Name of Company

Ross Fonticella

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

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JAN 28 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$3,622,292	1.3 %

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):
This filing is to adopt the approved NCCI Circulars IL-2010-05 & IL-2010-10 effective 1/1/2011.

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

Erie Insurance Flagship City
Name of Company

Ross Fonticella

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

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JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$62,779	4.8 %

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
This filing is to adopt the approved NCCI Circulars IL-2010-05 & IL-2010-10 effective 1/1/2011.

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

Erie Insurance Property & Casualty
Name of Company

Ross Fonticella

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

FILED

JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	11,217,881	-0.4%
16. Other _____ Line of Insurance		

FILED
JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 0.925 to 0.935. The filing maintains the current approved deviation of -40.0%.

* Adjusted to reflect all prior rate changes

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

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JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Farmington Casualty Company
Name of Company

Lori O'Keefe
2nd Vice President
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	28,648,091	-0.7%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the 1/1/11 loss costs published by NCCI (NCCI Filing Circular # IL-2010-05)

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

Federal Insurance Company
Name of Company

Assistant Vice President
Official Title

FILED

JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	2,164,361	3.2%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.080 to 1.092. The filing maintains the current approved deviation of -30.0%.

* Adjusted to reflect all prior rate changes

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

Fidelity and Guaranty Insurance Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

RECEIVED
JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	98,743	-1.5%
16. Other _____ Line of Insurance		

FILED
JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.235 to 1.248. The filing maintains the current approved deviation of -20.0%.

* Adjusted to reflect all prior rate changes

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

Fidelity and Guaranty Insurance Underwriters, Inc.
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

RECEIVED
JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	5,525,839	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

FILED
FEB 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06-01-2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$3,028,577	+6.3%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopting 1-1-11 NCCI-approved loss costs and revising Loss Costs Multiplier.

FILED

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

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FILED

JUN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

First National Insurance Company of America
Name of Company

Eric B. Ummel

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

H29219D

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

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JAN 31 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011.

	(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		
14.	Crop Hail		
15.	Other Workers Compensation	$4,271,000	-1.01%
	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): This is to adopt NCCI's 1/1/11 loss costs. We are making no changes to our LCM as a result of the 1/1/11 change.

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

FILED
JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

First Nonprofit Insurance Company
Name of Company

Christopher Fridley, VP Program Mgmt
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06-01-2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$570,909	+2.5

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

FILED
JUN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopting 1-1-11 NCCI-approved loss costs and revising Loss Cost Multiplier.

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

FILED
JUN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

General Insurance Company of America
Name of Company

Eric B. Ummel

Eric B. Ummel
Vice President, Commercial Lines Product Management
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 01/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Workers' Compensation** (Line of Insurance)	1,833,691	-3.4%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the 1/1/11 loss costs published by NCCI (NCCI Filing Circular # IL-2010-05)

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

Great Northern Insurance Company
Name of Company

Assistant Vice President
Official – Title

FILED

JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	10,001,566	4.9%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of NCCI loss costs and rating values per approval circular IL-2010-10 with revised LCM of 1.669 effective May 1, 2011 for new and renewal business.

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

Grinnell Mutual Reinsurance Company
Name of Company

Karen Bethea - Actuary
Official - Title

H29219D

FILED

MAY 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

INS00106

FILED

MAY 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5-1-11

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	$2,839,147	4.40%

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 the advisory loss ocsts approved in NCCI circular IL-2010-10 with a loss cost multiplier of 1.64 with the exception of class 6204 which will have a multiplier of 0.74.

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

Illinois EMCASCO Insurance Company
Name of Company

Don Coughennower
Assistant Vice President
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 February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	22,315,993	+5.8%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

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SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	34,905,930	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
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 February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	5,224,420	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
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 February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	4,041,608	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

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Section 754

IL Department Of Insurance
FORM (RF-3)
SUMMARY SHEET

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Change in Company's premium or rate level produced by rate revision effective January 1, 2011

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$2,379,541	-0.2%

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 adoping the NCCI approval 1/1/2011 voluntary loss costs, for new and renewal policies.

* 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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SPRINGFIELD, ILLINOIS

Maryland Casualty Company
Name of Company

Nancy M. Hoppe, SVP and Chief Pricing A
Official - Title

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SPRINGFIELD

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SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	3,819,856	-1.5%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the National Council on Compensation Insurance, Inc.'s ("NCCI") Illinois Voluntary Market Advisory Loss Costs and Rating Values effective January 1, 2011, MSIG Effective Date February 1, 2011.

* 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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FEB 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Mitsui Sumitomo Insurance Company of America
Name of Company

Scott M. Herbert, Sr. Gov't. Affairs Analyst
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation (Line of Insurance)	1,804,190	-0.8%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the National Council on Compensation Insurance, Inc.'s ("NCCI") Illinois Voluntary Market Advisory Loss Costs and Rating Values effective January 1, 2011, MSIG Effective Date February 1, 2011

* 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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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Mitsui Sumitomo Insurance USA Inc.
Name of Company

Scott M. Herbert, Sr. Gov't. Affairs Analyst
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	2,077,848	-20%

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 modifying our current LCM of 1.495 to 1.20 based on favorable results.

* 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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MAR 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

National Interstate Insurance Company
Name of Company

Rachael Yash – Compliance Specialist
Official - Title

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DEPARTMENT OF INSURANCE
SPRINGFIELD

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 January 1, 2011.

	(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		
14.	Crop Hail		
15.	Other Workers' Compensation	$20,390,000	+5.7%
	Life of Insurance		

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JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Yes: 7380, 8742, 8810, 8824, 8825, 8826, 8829, 8832, 8835, 8842, 8864, 8868, 9015, 9040

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adoption of 01/01/2011 NCCI advisory rates with the exception of NHRMA Mutual class code 9926 rate of $3.59.

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

NHRMA Mutual Insurance Company
Name of Company

Lloyd Wiesemann, VP of Insurance Services
Official – Title

Lloyd Wiesemann

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	310,882	-3.4%
16. Other _____ Line of Insurance		

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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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.543 to 1.560.

* Adjusted to reflect all prior rate changes

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

NIPPONKOA Insurance Company, Limited
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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Section 754

IL Department Of Insurance
FORM (RF-3)
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	$2,377,506	-0.4%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2011 voluntary loss costs, for new and renewal policies.

* 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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JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Northern Ins. Co. of New York
Name of Company

Nancy M. Hoppe, SVP and Chief Pricing A
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Workers' Compensation** (Line of Insurance)	5,631,268	-3.2%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the 1/1/11 loss costs published by NCCI (NCCI Filing Circular # IL-2010-05)

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

Pacific Indemnity Company
Name of Company

Assistant Vice President
Official Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	4,933,353	3.7%
16. Other _____ Line of Insurance		

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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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 2.315 to 2.341. The filing maintains the current approved deviation of +50.0%.

* Adjusted to reflect all prior rate changes

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

The Phoenix Insurance Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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

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SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2011.

	(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		
14.	Crop Hail		
15.	Other Worker's Compensation	9,662,202	+2.2
	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): SECURA is adopting NCCI Advisory Rates and Misc Values per Circular IL-2010-10.

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

SECURA Insurance, A Mutual Company
Name of Company

Daniel P. Ferris - Vice President & General Counsel
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	642,869	9.8%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are adopting the NCCI loss costs that are effective 1/1/10 and revising our current loss cost multipliers.

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

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DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Selective Insurance Company of America
Name of Company

Roni Schwartz
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	16,306,720	4.5%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are adopting the NCCI loss costs that are effective 1/1/10 and revising our current loss cost multipliers.

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

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SPRINGFIELD, ILLINOIS

Selective Insurance Company of South Carolina
Name of Company

Roni Schwartz
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2011

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation (Line of Insurance)	6,783,525	7.0%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are adopting the NCCI loss costs that are effective 1/1/10 and revising our current loss cost multipliers.

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

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Selective Insurance Company of the Southeast
Name of Company

Roni Schwartz
Official - Title

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DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$2,569,669	0.0%

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 filing to adopt NCCI's January 1, 2011 advisory rates for January 1, 2011.

RF-3 contains estimated information.

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

Sentry Casualty Company
Name of Company

William O'Reilly - Vice President General Counsel & Corporate Secretary
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$18,306,913	0.0%

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Classes 4112, 4150, 4561 and 9059 are discontinued.

Classes 4439 and 8869 adjusted. New classes 2797, 2799, 4109, 4110, 4149, 6503 and 8037.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This is an abbreviated rate change in response to NCCI's phraseology Item filings B-1408, B-1409, B-1410, B-1412 and B-1413.

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JAN 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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

Sentry Insurance a Mutual Company
Name of Company

Mike Williams - Vice President - Chief Actuary
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	$3,642,136	0.0%

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Classes 4112, 4150, 4561 and 9059 are discontinued.

Classes 4439 and 8869 adjusted. New classes 2797, 2799, 4109, 4110, 4149, 6503 and 8037.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This is an abbreviated rate change in response to NCCI's phraseology Item filings B-1408, B-1409, B-1410, B-1412 and B-1413.

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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

Sentry Select Insurance Company
Name of Company

Mike Williams - Vice President - Chief Actuary
Official - Title

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Form (RF-3)

SUMMARY SHEET

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effectiv **January 1, 2011**

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Change (**%)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **16.0 - Workers Compensation** Line of Insurance	**$2,750,43**	**0.40%**

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): **Workers Compensation Loss Costs Adoption Filing**

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

SPARTA Insurance Company
Name of Company

Kevin Purcell, Vice President - IRC
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	9,795,226	1.0%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.080 to 1.092. The filing maintains the current approved deviation of -30.0%.

* Adjusted to reflect all prior rate changes

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

The Standard Fire Insurance Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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DEPARTMENT OF INSURANCE
SPRINGFIELD

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

FORM (RF-3)

SUMMARY SHEET

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 03/01/2011.

	(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		
14.	Crop Hail		
15.	Other wc	9,919,050	1.4%
	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): Star Insurance Company (Star) will adopt NCCI's January 1, 2011 advisory rates with new business and renewals effective March 1, 2011.

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

Star Insurance Company
Name of Company

Compliance 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 04/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	28,102,670	-0.3%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI's 1/1/2011 loss costs and miscellaneous rating values.

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

State Farm Fire and Casualty Company
Name of Company

Gregory S. Girard, Actuary & Assistant Secretary-Treasurer
Official – Title

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APR 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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JAN 0 1 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by this revision effective 01/01/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	383,164	+2%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): NCCI

Adoption of NCCI IL WC Voluntary Market-Advisory Rates, Loss Costs, and Rating Values Effective January 1, 2011 in addition to the Adoption of NCCI CW Item Filing B-1420 Revisions to Basic Manual Rule 2-E-1-b-Executive Officers Premium Determination, 2-E-3 Partners and Sole Proprietors, and Creation of Appendix F

* 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

Gloria A. Goldbranson, FLMI - Senior Compliance Business Analyst
Official - Title

H29219D

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	12,299,193	0.3%
16. 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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.235 to 1.248. The filing maintains the current approved deviation of -20.0%.

* Adjusted to reflect all prior rate changes

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

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Travelers Casualty Insurance Company of America
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Illinois

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ILLINOIS SUMMARY SHEET

FORM RF-3

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	4,222,344	-1.6%
16. 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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 2.006 to 2.029. The filing maintains the current approved deviation of + 30.0%.

* Adjusted to reflect all prior rate changes

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

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Travelers Casualty & Surety Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	19,137,738	2.3%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.852 to 1.873. The filing maintains the current approved deviation of +20.0%.

* Adjusted to reflect all prior rate changes

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

The Travelers Indemnity Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	24,941,094	0.9%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.543 to 1.560.

* Adjusted to reflect all prior rate changes

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

The Travelers Indemnity Company of America
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	8,930,731	-0.5%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.543 to 1.560.

* Adjusted to reflect all prior rate changes

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

The Travelers Indemnity Company of Connecticut
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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JAN 18 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	51,226,944	1.3%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.389 to 1.404. The filing maintains the current approved deviation of -10.0%.

* Adjusted to reflect all prior rate changes

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

Travelers Property Casualty Company of America
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation (Line of Insurance)	$7,211,328	0.40%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: We are revising the list of credited classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI Loss Costs (IL-2010-10). We have changed our deviated Loss Cost Multiplier to 1.518, and our surcharged Loss Cost Multiplier to 1.897. Schedule credits/debits are changed to +/40%.

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

United Fire & Casualty
Name of Company

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

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MAR 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	4,033,687	3.6%
16. Other _____ Line of Insurance		

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JAN 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
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) Adoption of NCCI approved Workers Compensation loss costs and rating values per NCCI Circular IL-2010-10. The filing proposes an increase in the current loss cost multiplier from 1.698 to 1.717. The filing maintains the current approved deviation of +10.0%.

* Adjusted to reflect all prior rate changes

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

United States Fidelity and Guaranty Company
Name of Company

Lori O'Keefe 2nd Vice President
Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Workers' Compensation** (Line of Insurance)	2,060,989	-3%

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of the 1/1/11 loss costs published by NCCI (NCCI Filing Circular # IL-2010-05)

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

Vigilant Insurance Company
Name of Company

Assistant Vice President
Official – Title

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JAN 0 1 2011

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DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	24,566,209	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

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FEB 01 2011

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DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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SPRINGFIELD

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	524,911	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

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

Wausau General Insurance Company
Name of Company

Bonnie Roeder State Filings Analyst
Official - Title

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STATE OF ILLINOIS
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SPRINGFIELD, ILLINOIS

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DEPARTMENT OF INSURANCE
SPRINGFIELD

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective February 1, 2011

(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		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation (Line of Insurance)	20,340,062	+5.9%

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 NCCI loss costs (circular IL-2010-10) and revise Loss Cost Multipliers with an effective date of 2/1/2011.

*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

Bonnie Roeder State Filings Analyst
Official - Title

FILED
FEB 01 2011
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS