

**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 9/15/2011.

	(1)	(2)	(3)
	Coverage	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	52,178.	0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	165,232	0%
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: n/a

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Filed new coverages and discounts/surcharges

\*Adjusted to reflect all prior rate changes.

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

American Modern Home Insurance Co  
Name of Company  
Martha J Crawford State Relations Analyst  
Official – Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 11/1/2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	\$929,863	-6.6%
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): file to adopt ISO loss cost revision filing designation number GL-2010-BGL1 with revised company loss cost multipliers and company exceptions

\*Adjusted to reflect all prior rate changes.

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

General Casualty Company of Wisconsin

Name of Company

Chris V Gates - VP Product Development & Filings

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE**

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 11/1/2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	\$2,651,933	1.8%
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other _____ 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): file to adopt ISO loss cost revision filing designation number GL-2010-BGL1 with revised company loss cost multipliers and company exceptions

\*Adjusted to reflect all prior rate changes.

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

General Casualty Insurance Company

Name of Company

Chris V Gates - VP Product Development & Filings

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2012.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	2,125,606	+0.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory

Introducing additional Increased Limits for Medical Payments coverage and a new Business Activities Class: Taxidermy

- \* 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

Ryan Schave - Actuary  
Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 11/1/2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	\$4,531,451	2.9%
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other _____ Line of Insurance	_____	_____

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): file to adopt ISO loss cost revision filing designation number GL-2010-BGL1 with revised company loss cost multipliers and company exceptions

\*Adjusted to reflect all prior rate changes.

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

Regent Insurance Company

Name of Company

Chris V Gates - VP Product Development & Filings

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8-1-2011

(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	189,330	11.9%
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other	_____	_____
Line of Insurance	_____	_____

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): The purpose of this filing is to revise our Errors and Omissions premium charges.

- \* 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

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9-1-11.

(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	413,629	29.7
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This filing is amending our Auto ERP factor to .336.

- \* 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

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9-1-2011

(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	10,991	30.0
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Sentry Select Insurance Company  
NAIC # 169-21180 FED ID # 36-2674180  
-Dealer Operations Program  
WRITTEN DATE 9-1-2011

We are filing to revise our independent employment practices program rates and premiums.

If you have any questions or concerns please let us know.

\* 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 - Chief Actuary*