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 4/1/2010.

	(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 Medical Malpractice - Podiary	5,756,888	+6%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: This filing applies to all territories in Illinois for our Podiatry line.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): This is a revised rate filing requesting a 6% rate increase.

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

Podiatry Ins. Company of America
Name of Company

Latasha Knox-Campbell, Product Compliance Analyst
Official – Title

RECEIVED
DEC 21 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FILING # IL-1440-P