

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

10/01/07

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)</u>	(3) <u>Percent Change (+ or -)**</u>
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 (Lltrapack)	\$948,920	0.2%
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

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

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

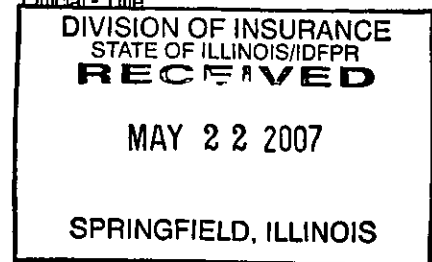
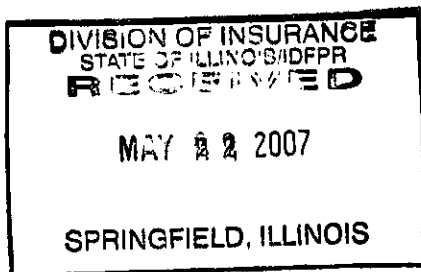
Erie Insurance Exchange

Name of Company

*Ross C. Forticella*

Ross C. Forticella, ACAS, MAAA  
Vice President and Manager

Official - Title



SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homowners		
13. Commercial Multi-Peril	\$729,456	14.0%
14. Crop Hail		
15. Other		
Line of Insurance		

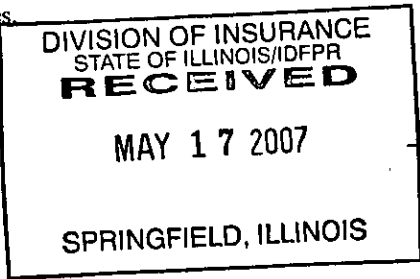
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

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

Rate Change - see cover memo for details

\* Adjusted to reflect all prior rate changes.

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



Farmers Insurance Exchange  
Name of Company

Joshua Taub - Product Manager  
Official - Title

**Illinois Farmers Insurance Exchange  
Farmers Insurance Exchange  
Illinois**

**Line of Business: Commercial Multiple Peril  
Subline: Landlords Protector**

**Summary of Premium Effects**

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

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective \_\_\_\_\_

August 1, 2007

(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	70,327	5.3%
4. Burglary and Theft	-	-
5. Glass	<u>(Included In Fire &amp; Extended Coverage)</u>	-
6. Fidelity	-	-
7. Surety	-	-
8. Boiler and Machinery	-	-
9. Fire	-	-
10. Extended Coverage	-	-
11. Inland Marine	-	-
12. Homeowners	-	-
13. Commercial Multi-Peril	3,047,091	6.1%
14. Crop Hail	-	-
15. Other _____	-	-
Line of Insurance	-	-

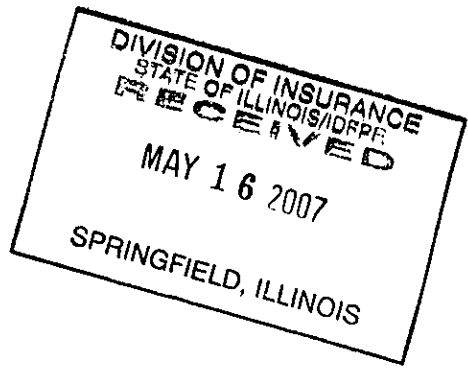
Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_  
 FCCI Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

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

\_\_\_\_\_  
 FCCI Insurance Company  
 Name of Company

\_\_\_\_\_  
 Debra J. Comstock, Regulatory Filing Specialist  
 Official - Title



**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

(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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	4,077,758	3.2%
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

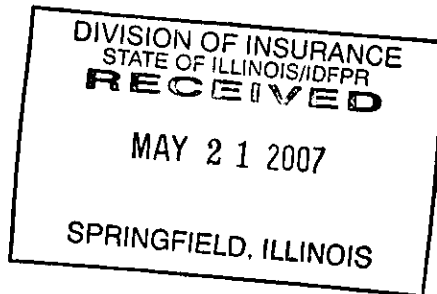
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_  
 FCCI Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

\*Adjusted to reflect all prior rate changes. (Year Earned is 2005)

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

FCCI Insurance Company  
Name of Company

Debra J. Comstock, Regulatory Filing Specialist  
Official - Title



(RF-3)

**SUMMARY SHEET**

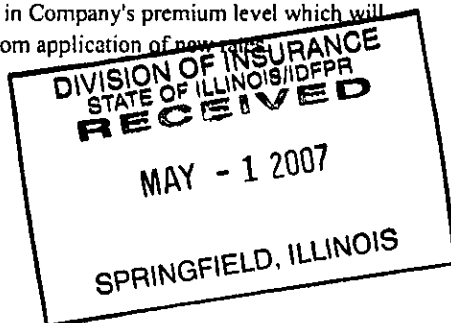
Change in Company's premium or rate level produced by rate revision effective 07-15-2007 for new and renewal

(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. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril*	2,884,531	-0.4%
14. Crop Hall		
15. Other		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revising Businessowner base rates, introducing amount of insurance curve, and modifying transition caps.

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



Grange Mutual Insurance Company  
Name of Company  
Todd F. Witte  
Official - Title  
Todd Witte  
Commercial Pricing Analyst IV

SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	\$11,246,424	14.0%
14. Crop Hail		
15. Other		
Line of Insurance		

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

\_\_\_\_\_

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

Rate Change - see cover memo for details

\_\_\_\_\_

\* Adjusted to reflect all prior rate changes.

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

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR <b>RECEIVED</b>  MAY 17 2007  SPRINGFIELD, ILLINOIS	Illinois Farmers Insurance Company
	_____ Name of Company
	Joshua Taub - Product Manager _____ Official - Title

Illinois Farmers Insurance Exchange  
Farmers Insurance Exchange  
Illinois

Line of Business: Commercial Multiple Peril  
Subline: Landlords Protector

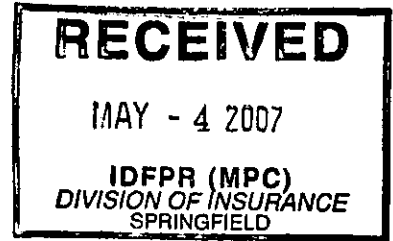
Summary of Premium Effects

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

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

FORM (RF-3)

SUMMARY SHEET



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

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damag Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	360,756	+5.24%
14.	Crop Hail		
15.	Other		
	Life of Insurance		

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

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

\*Adjusted to reflect all prior rate changes.

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

Iowa Mutual Insurance Co.

Name of Company  
Beverly Barber - Compliance

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

(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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	2,491,613	6.3%
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

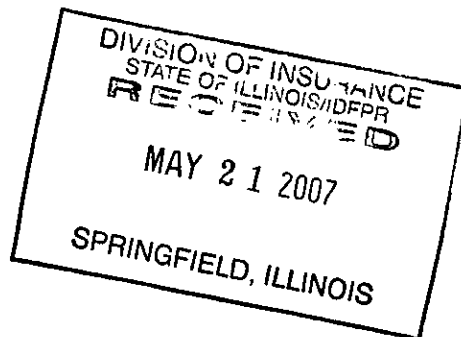
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_  
Monroe Guaranty Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

\*Adjusted to reflect all prior rate changes. (Year Earned is 2005)

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

Monroe Guaranty Insurance Company  
Name of Company

Debra J. Comstock, Regulatory Filing Specialist  
Official - Title



**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective \_\_\_\_\_

August 1, 2007

(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	123,091	6.9%
4. Burglary and Theft	-	
5. Glass	<u>(Included in Fire &amp; Extended Coverage)</u>	
6. Fidelity	-	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	-	
10. Extended Coverage	-	
11. Inland Marine	-	
12. Homeowners	-	
13. Commercial Multi-Peril	1,850,375	8.2%
14. Crop Hail	-	
15. Other _____	-	
Line of Insurance		

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

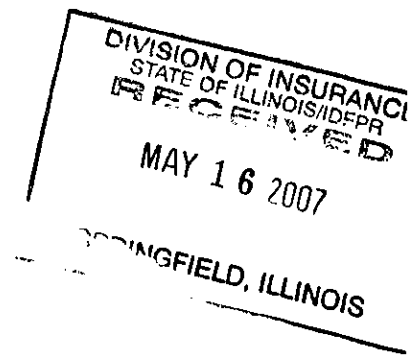
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_  
 Monroe Guaranty Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

\*Adjusted to reflect all prior rate changes. (Year Earned is 2005)

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

\_\_\_\_\_  
 Monroe Guaranty Insurance Company  
 Name of Company

\_\_\_\_\_  
 Debra J. Comstock, Regulatory Filing Specialist  
 Official - Title



**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

(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	6,070	3.0%
4. Burglary and Theft	-	
5. Glass (Included in Fire & Extended Coverage)	-	
6. Fidelity	-	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	-	
10. Extended Coverage	-	
11. Inland Marine	-	
12. Homeowners	-	
13. Commercial Multi-Peril	691,843	8.6%
14. Crop Hail	-	
15. Other _____	-	
Line of Insurance		

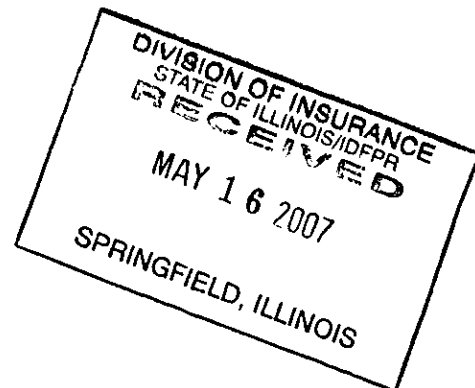
Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_  
 National Trust Insurance Company is adopting approved ISO loss costs (GL-2005-BGL1) and updating their loss cost multipliers.

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

National Trust Insurance Company  
 Name of Company

Debra J. Comstock, Regulatory Filing Specialist  
 Official - Title



**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

(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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	914,498	1.2%
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

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

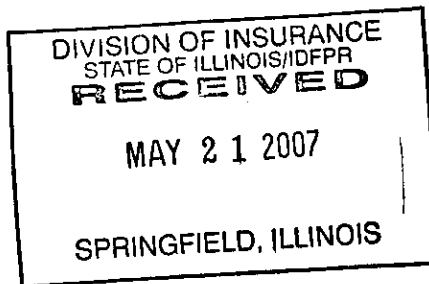
National Trust Insurance Company is adopting approved ISO Package Modification Factors (ML-2006-RLA1).

\*Adjusted to reflect all prior rate changes. (Year Earned is 2005)

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

National Trust Insurance Company  
Name of Company

Debra J. Comstock, Regulatory Filing Specialist  
Official - Title



# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

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

(1) <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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	1,632,884.00	-1.8
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

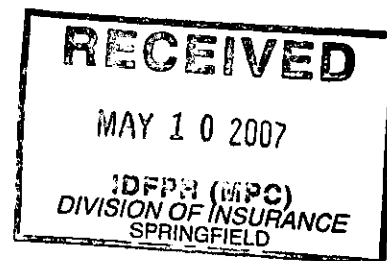
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt revised rates for Businessowners and Business Provider.

\*Adjusted to reflect all prior rate changes.

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

Nationwide Mutual Fire Ins. Co.  
Name of Company

Marie T. Safreed, State Filing Specialist  
Official – Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

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

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	1,383,126.00	-3.0
14. Crop Hail		
15. Other		
Line of Insurance		

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

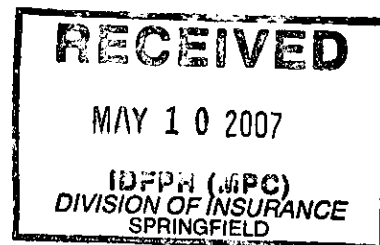
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt revised rates for Businessowners and Business Provider.

\*Adjusted to reflect all prior rate changes.

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

Nationwide Mutual Ins. Co.  
Name of Company

Marie T. Safreed, State Filing Specialist  
Official - Title



# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

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

(1) <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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	4,838,544	0.3
14. Crop Hail	_____	_____
15. Other _____	_____	_____
Line of Insurance		

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

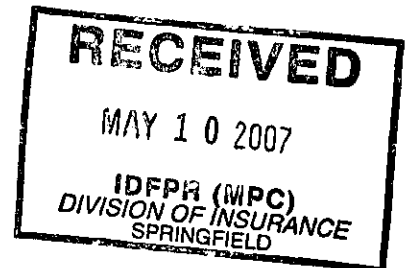
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt revised rates for Businessowners and Business Provider.

\*Adjusted to reflect all prior rate changes.

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

Nationwide Property & Casualty Ins. Co.  
Name of Company

Marie T. Safreed, State Filing Specialist  
Official - Title



**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

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

(1) <u>Coverage</u>	(2) <u>Annual Premi 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. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	\$774,044	0.0%
14. Crop Hail	_____	_____
15. Other	_____	_____
<u>Line of Insurance</u>	_____	_____

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

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

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

Westport Insurance Corporation  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Name of company

Linda Snook, P&RS Specialist  
 \_\_\_\_\_  
 Official-Title

