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 12/01/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	4,071	+ 5.00%
2	Automobile Physical Damag Private Passenger		
	Commercial	1,105	+ 5.00%
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 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): Adjust company loss cost deviations to reflect program and market experience

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

Agri General Insurance Company
Name of Company

Steve C. Harms-President & Chairman of the Board
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/10 NB, 3/1/10 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	$8,229	+7.1%
2. Automobile Physical Damage Private Passenger Commercial	$3,138	+3.1%
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 _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No. This filing is applicable to all Commercial Auto business in the State of Illinois.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adjusting base rates, Primary and Secondary, Increased Limit, and Age Factors. We are also revising underlying loss cost for other miscellaneous coverages and are adjusting rates for zone-rated risks to be consistent with the latest ISO changes.

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

AMCO Insurance Company
Name of Company

Duane Hartley - Sr. Filing 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 2/1/10 NB, 3/1/10 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	$5,665,846	+7.1%
2. Automobile Physical Damage Private Passenger Commercial	$2,154,831	+3.1%
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 _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No. This filing is applicable to all Commercial Auto business in the State of Illinois.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adjusting base rates, Primary and Secondary, Increased Limit, and Age Factors. We are also revising underlying loss cost for other miscellaneous coverages and are adjusting rates for zone-rated risks to be consistent with the latest ISO changes.

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

Allied Property & Casualty Insurance Company
Name of Company

Duane Hartley - Sr. Filing 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	221,399	8.8%
2. Automobile Physical Damage Private Passenger Commercial	120,417	4.5%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

Charter Oak Fire Insurance Company
Name of Company

Margaret Salsbury, Sr. Regulatory Analyst
Official – Title

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 01-01-2010 N, 03-01-2010 R.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	1,398,044	-3.71%
2	Automobile Physical Damag Private Passenger	467,608	-8.14%
	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 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): Adopting Loss Cost:

CA-2004-RLC1, CA-2004-RUMLC, CA-2005-RLC01, CA-2006-RZRLC and CA-2009-BRLA1.

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

Church Mutual Insurance Company
Name of Company

Director – Automobile Lines
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective **02/01/2010**

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial	**$186,723**	**3.4%**
3. Liability Other Than Auto	**$623,228**	**4.4%**
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):
Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program.

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

Continental Western Insurance Company
Name of Company

Janel Myers - Research Analyst
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/2010.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial	6,125,042	1.7%
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 _____ Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing revisions to the Credit Union Package Of Protection.
Our File # CPOP BA IL0123602R01

The rate information given on here is Exact.

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

CUMIS Insurance Society, Inc.
Name of Company

Leslie D Svoboda
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 2/1/10 NB, 3/1/10 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	$2,880	+7.1%
2. Automobile Physical Damage Private Passenger Commercial	$1,098	+3.1%
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 _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No. This filing is applicable to all Commercial Auto business in the State of Illinois.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adjusting base rates, Primary and Secondary, Increased Limit, and Age Factors. We are also revising underlying loss cost for other miscellaneous coverages and are adjusting rates for zone-rated risks to be consistent with the latest ISO changes.

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

Depositors Insurance Company
Name of Company

Duane Hartley - Sr. Filing 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 10/15/2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	123,163	25%
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		

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 program subscribes to the rules and rates found in the ISO Commercial Lines Manual-Division I-Automobile including any ISO filed state exception pages. Intent of this filing is to proposea countrywide rate increase of 25% on Commercial Automobile LIABILITY, to be effected through the Loss Cost Multiplier.*

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

Greenwich Insurance Company
Name of Company

Boyd Adams, Assistant Vice President-State Filings
Digitally signed by Boyd Adams, Assistant Vice President-State Filings
DN: cn=Boyd Adams, Assistant Vice President-State Filings, o, ou, email=Boyd.Adas@sfgroup.com, c=US
Date: 2009.10.01 11:24:36 -04'00'
Official – Title

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 12/01/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	111,402	+ 5.00%
2	Automobile Physical Damag Private Passenger		
	Commercial	41,383	+ 5.00%
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 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): Adjust company loss cost deviations to reflect program and market experience

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

Indemnity Insurance Company of North America
Name of Company

Robert L. Haney - President of Rain and Hail, LLC
Official – Title

RECEIVED

OCT - 5 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective December 1, 2009

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	$130,327	-5.2%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	$40,296	+26%
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 _____ Line of Insurance		

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
To adopt ISO loss costs CA-2009-BRLA1

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

Indiana Lumbermens Mutual Insurance Company
Name of Company

Pamela L. Holliday
Regulatory Compliance Analyst
Official - Title

H29219D

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 March 1, 2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger Commercial	365,163	-.25%
2	Automobile Physical Damag Private Passenger Commercial	108,319	-.25%
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 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): Reduce Minimum Policy Writing Premium from $300 to $200

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

Iowa American Insurance
Name of Company

Beverly Barber - Compliance
Official – Title

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OCT 14 2009

STATE OF ILLINOIS
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 March 1, 2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger Commercial	973,917	-.25%
2	Automobile Physical Damag Private Passenger Commercial	351,982	-.25%
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 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): Reduce Minimum Policy Writing Premium from $300 to $200

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

Iowa Mutual Insurance
Name of Company

Beverly Barber - Compliance
Official – Title

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 10/01/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	2,338,270	-5.2
2	Automobile Physical Damag Private Passenger		
	Commercial	382,128	2.6
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 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): Adoption of revised loss costs contained in ISO Reference Filing Number CA-2009-BRLA1.

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

National American Insurance Company
Name of Company

Jennifer Carr, Rate and Form 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	36,044	11.2%
2. Automobile Physical Damage Private Passenger Commercial	23,580	7.1%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

NIPPONKOA Insurance Company, Ltd. (U.S. Branch)
Name of Company

Margaret Salsbury, Sr. Regulatory 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	73,835	6.9%
2. Automobile Physical Damage Private Passenger Commercial	46,025	4.1%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

Phoenix Insurance Company
Name of Company

Margaret Salsbury, Sr. Regulatory Analyst
Official – Title

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 10/01/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	444,111	-5.2
2	Automobile Physical Damag Private Passenger		
	Commercial	0	2.6
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 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): Adoption of revised loss costs contained in ISO Reference Filing Number CA-2009-BRLA1.

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

State National Insurance Company
Name of Company

Jennifer Carr, Rate and Form 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	251,832	8.1%
2. Automobile Physical Damage Private Passenger Commercial	165,898	5.3%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

Travelers Casualty Company of Connecticut
Name of Company

Margaret Salsbury, Sr. Regulatory 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	287,696	8.0%
2. Automobile Physical Damage Private Passenger Commercial	187,580	4.5%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

Travelers Indemnity Company
Name of Company

Margaret Salsbury, Sr. Regulatory 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	124,877	7.1%
2. Automobile Physical Damage Private Passenger Commercial	85,497	4.3%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

The Travelers Indemnity Company of America
Name of Company

Margaret Salsbury, Sr. Regulatory 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 03/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	432,480	8.1%
2. Automobile Physical Damage Private Passenger Commercial	256,090	4.8%
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 _____ (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): We are adopting new ISO loss costs (LI-CA-2009-082, filing number CA-2009-BRLA1), and adjusting our loss cost multipliers to reflect our current expense level and recent experience.

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

Travelers Property Casualty Company of America
Name of Company

Margaret Salsbury, Sr. Regulatory Analyst
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective -5.50 2/1/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial	$1,736,768	-5.60
2. Automobile Physical Damage		
Private Passenger		
Commercial	$2,833,459	.10
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 _____ 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):
Adopt ISO's Loss Cost Filing - Ref. - CA-2009-BRLA1

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

Vanliner Insurance Company
Name of Company

Chris Carden, Product Manager
Official - Title

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