**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 02/11/2010.

| | (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 | 2,042,434 | 0 |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Life of Insurance | | |

RECEIVED
JAN 05 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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 description of the Profession Discount Factor has been revised to include an employee affiliated with an ACUITY agency.

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

ACUITY, A Mutual Insurance Company
Name of Company

Diane Udovich - ACUITY, A Mutual Insurance Co
Official – Title

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE
## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 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 | $657,270 | 8.40% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ (Line of Insurance) | | |

RECEIVED
JAN 06 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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 reducing the frequency that we order Insurance Scores. We are increasing our Base Rates in all three programs. We are adding additional premium charges for Swimming Pools w/Diving Boards and Slides, Flat/Low Slope Roof and Trampolines. We are adding Protective Device Credits for Burglar and Fire Alarms and Sprinklers.

*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

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## 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 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 | 640,299 | +7.9% |
| 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: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates by territory for Owners forms.

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

American Fire & Casualty Company
Name of Company

Brad Rowe - Actuary
Official – Title

RECEIVED
JAN 08 2010
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 03-01-2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or −)** |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 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 | 4,302,499 | +7.57% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ Line of Insurance | | |

RECEIVED
JAN 13 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
Statewide rate increase +7.57%

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

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

Badger Mutual Insurance Company
Name of Company

Terry Falls - Workers Compensation Coordinator
Official — Title

Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/28/09.

| (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 | 2,127,746 | 0.0 |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Dwelling Fire (Line of Insurance) | 32,766 | 0.0 |

RECEIVED
JAN 15 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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): Please reference the attached filing documentation which outlines a proposed rate neutral change to the Encompass Home and Auto Insurance Company Other Than Automobile Program in Illinois. This filing includes revisions to the Dwelling Base Rates, Age of Dwelling, Amount of Insurance, Rating Tier, Package Discount, Townclass and Dwelling Fire Occupancy factors. The Claim-Free Discount has also been modified. In addition to the changes mentioned above, territorial relativities have been updated, and some territories have been redefined.

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

Encompass Home and Auto Insurance Company
Name of Company

Paul Calcagno-Assistant State Manager
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 | | |
| 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 | $ 25,142,809 | 9.0% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other _____ Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? No

If so, Specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Homeowners rate change.
Includes changes to base rates, rating zone definitions, tier factors, and Sewer or Drain Backup Coverage Endorsement zone groups.

* 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 Fonticella, ACAS
Actuarial

RECEIVED

JAN 11 2010

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 1-18-10 New; 2-22-10 Renewal.

| | (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 | $28,986,475 | +12.20% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

RECEIVED
DEC 23 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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): Revision of protection class factors, water & sewer back-up rates, base rate increases, auto/home discount change, and renovated home discount changes.

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

THE FARMERS AUTOMOBILE INSURANCE ASSOCIATION - VIP Program
Name of Company

Edward A. Mulvey, Vice President of Underwriting
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 1-18-10 New; 2-22-10 Renewal.

| | (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 | $242,400 | -13% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Life of Insurance | | |

RECEIVED
JAN 08 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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): Withdrawl of The Farmers Automobile Insurance Association Standard Plan.

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

THE FARMERS AUTOMOBILE INSURANCE ASSOCIATION
Name of Company

Edward A. Mulvey, Vice President of Underwriting
Official – Title

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2010 NB, 4/1/2010 RB

| (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 | $11,499,035 | +13.4% |
| 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: This filing applies to all territories for owner forms only

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates by territory for Owners forms only. We are also proposing to change the constant factor (impacts new business only) and the capping criteria in our Personal IQ SmartRiskTM manual

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

Indiana Insurance Company
Name of Company

Brad Rowe - Actuary, FCAS
Official – Title

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## 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 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 | 248,965 | +9.2% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ (Line of Insurance) | | |

RECEIVED
JAN 08 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates by territory for Owners forms.

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

Ohio Casualty Insurance Company
Name of Company

Brad Rowe - Actuary
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 1-18-10 New & 2-22-10 Renewal.

| | (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 | $13,171,533 | +0.07% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Life of Insurance | | |

RECEIVED
DEC 23 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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): Revision of protection class factors, water & sewer back-up rates, base rate increases, auto/home discount change, and renovated home discount changes.

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

PEKIN INSURANCE COMPANY
Name of Company

Edward A. Mulvey, Vice President of Underwriting
Official – Title

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/15/10

| | (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 | 982,369 | +15.2% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other _____ Line of Insurance | | |

RECEIVED
DEC 16 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No. This filing applies to all territories and classes for owners' forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Changes to base rates, age of dwelling, heating/cooling age, roof age, construction type, territory factors, coverage A amount of insurance, and minimum coverage A amount.

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

Selective Insurance Company of South Carolina
Name of Company

David Fleck
Official - Title

H29219D

Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective 12-4-09

| (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 | $1,184,402 | +12.12% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ (Line of Insurance) | | |

RECEIVED
JAN 11 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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 changing base rates, territory factors, water backup and sump discharge or overflow factors, minimum premium rule, and other tier factors with a rate impact of +12.12%.

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

Travelers Commercial Insurance Company
Name of Company

Vice President
Official - Title

OK

Form (RF-3)

# SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective 12-4-09

| (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 | $28,157,639 | +11.01% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ (Line of Insurance) | | |

RECEIVED
JAN 11 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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 changing base rates, territory factors, water backup and sump discharge or overflow factors, minimum premium rule, and other tier factors with a rate impact of +11.01%.

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

The Travelers Home and Marine Insurance Company
Name of Company

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 3/1/2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 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 | $63,687 | 8.40% |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ (Line of Insurance) | | |

RECEIVED
JAN 06 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

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 reducing the frequency that we order Insurance Scores. We are increasing our Base Rates in all three programs. We are adding additional premium charges for Swimming Pools w/Diving Boards and Slides, Flat/Low Slope Roof and Trampolines. We are adding Protective Device Credits for Burglar and Fire Alarms and Sprinklers.

*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

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE

## 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 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 | 5,972,642 | +8.1% |
| 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: This filing applies to all territories for Owners forms.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are proposing to modify base rates by territory for Owners forms.

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

West American Insurance Company
Name of Company

Brad Rowe - Actuary
Official – Title

RECEIVED

JAN 08 2010

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 3/1/2010

| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|---|---|
| 1. | Automobile Liability | | |
| | Private Passenger | 13,792,623 | 7.30% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 8,772,284 | 0.00% |
| | Commercial | | |
| 3. | Liability Other Than Auto | 1,083,118 | 0.00% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | 1,048,436 | 0.10% |
| 12. | Homeowners | 10,443,831 | 2.20% |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Worker's Compensation | | |
| 16. | Other Dwelling Fire (Line of Insurance) | 719,386 | 0.10% |

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

Brief description of filing. (If filing follows rates of an advisory organization, specify organization:
In H+H's Personal Auto the BI premiums for all territories were increased by an average +7.5%, PD by +4.0%, Med Pay by +10.0%, UIM by +25.0% and UM were reduced by -1.7%. Motorcycle premiums (within Personal Auto) were increased by an average +5.1%. This resulted in an average Personal Auto rate change for all territories of +4.2%. In H+H's Homeowners section HO 03 premiums were increased by an average of +2.0%, HO 06 premiums by +0.1% and HO 04 rates were reduced by -0.9%. Water Backup coverage was increased by +5.0% for an average Homeowner rate change for all territories of +2.1%. Inland Marine rates (within HO) were increased by an average of +0.1%. Dwelling Property rates were also increased by an average of +0.1%. All H+H rate changes in total result in an overall average H+H rate change of approximately +3.3%.

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

West Bend Mutual Insurance Company
Name of Company

Gary Jones CPCU AU AMIM - Compliance Manager
1/28/2010 Official - Title