Form (RF-3)

SUMMARY SHEET

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

(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		
14. Crop Hail		
15. Other _____ Line of Insurance	66,176	120%

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Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Applies to the entire state of Illinois.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): The goal of this filing is to add two new coverages to the IL First Protector base program to make the product consistent with the First Protector Program approved in all other states. Addition of these two new coverages indicates a 120% increase in the annual premium level.

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

American Reliable Insurance Company
Name of Company

Rohin Bepat - Actuarial Associate
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective **5-1-09**

(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		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other **Businessowners** Line of Insurance	**304,545**	**-2.3%**

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
Applies to all Businessowners Restaurant Program sublines, territories, coverages, classes, etc

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
Revise Company Restaurant Program LCM. Withdrawn and new company exception pages. New additional company classifications and class factors applicable to building and bpp property and liability rates.

* 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

Vicki Jacobs
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 5-1-09 new and 8-1-09 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.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other farmowners	$1,410545	3.9%
	Life 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): file to adopt ISO (advisory organization) state 2009 loss cost - FR-2008-RLA1.

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

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Indemnity Insurance Company of North America c/o Rain and Hail LLC
Name of Company

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

Serff# ACEH-126020231

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FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5-1-09.

	(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 Commercial Umbrella	308,835	-2.0%
	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 premiums

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

Iowa Mutual Insurance Company
Name of Company

Beverly Barber - Compliance
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective [redacted] 7-1-9

(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		
14. Crop Hail		
15. Other Commercial Property (Line of Insurance)	$646,995	-1.2%

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):
Revised loss costs and rule for use during and after the Expiration of the Terrorism Risk Insurance Program

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

Mitsui Sumitomo Insurance Company of America
Name of Company

Judith R. Mitchell, Senior Government Affairs Anaylst
Official - Title

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Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective [redacted] 7-1-9

	(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		
14.	Crop Hail		
15.	Other Commercial Property (Line of Insurance)	$1,656,591	-1.2%

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):
Revised loss costs and rule for use during and after the Expiration of the Terrorism Risk Insurance Program

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

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Mitsui Sumitomo Insurance Company of America
Name of Company

Judith R. Mitchell, Senior Government Affairs Anaylst
Official - Title

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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 4-1-09 New; 5-6-09 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.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Boatowners	$544,790	-0.2%
	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): Eliminate $50 deductible option for property coverage and eliminate $25,000 & $50,000 liability limit options & $500 Medical Payment limit. Add higher deductible options & higher liability and Medical Payment options. Add additional coverages and optional endorsements.

*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

R.M. MCGANN - Director of Pricing & Regulatory Filings, Assistant Secretary
Official – Title