Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective April 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	46,822	+0.3%
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:
na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We wish to expand the classes of business for which we offer Liquor Liability. In addition, coverage wil be provided under a facultative agreement and we are contractually obligated to use our reinsurer's rating structure.

* 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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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

All America Insurance Company
Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms 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 May 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	46,822	+1.3%
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:

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopting ISO's 04/2010 ISO's loss costs and revising company multipliers effective May 1, 2010.

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

All America Insurance Company
Name of Company

Mrs. Louise Wittler, Rates & Forms Specialist
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	320,248	-8.9%
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):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

American Casualty Company
Name of Company

Robert Anderson, Actuarial Consulting Director
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 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	$212,012	-5.3%
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): ISO, Inc. Loss Cost Revision adoption with company LCM/ELR changes.

Information from company Page 14.

*Adjusted to reflect all prior rate changes.

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

Amerisure Insurance Company
Name of Company

Karin M. Tremain - Senior Analyst & Compliance Consultant
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 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	$1,091,848	-4.1%
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): ISO, Inc. Loss Cost Revision adoption with company LCM/ELR changes.

Information from company Page 14.

*Adjusted to reflect all prior rate changes.

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

Amerisure Mutual Insurance Company
Name of Company

Karin M. Tremain - Senior Analyst & Compliance Consultant
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective April 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	348,376	+0.3%
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:
na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We wish to expand the classes of business for which we offer Liquor Liability. In addition, coverage wil be provided under a facultative agreement and we are contractually obligated to use our reinsurer's rating structure.

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

Central Mutual Insurance Company
Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms Analyst
Official - Title

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SPRINGFIELD, ILLINOIS

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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 May 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	348,376	+1.3%
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:

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopting ISO's 04/2010 ISO's loss costs and revising company multipliers effective May 1, 2010.

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

Central Mutual Insurance Company
Name of Company

Mrs. Louise Wittler, Rates & Forms Specialist
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	1,026,366	-3.4%
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: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

Continental Casualty Company
Name of Company

Robert Anderson, Actuarial Consulting Director
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	1,460,219	-7.0%
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):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

Continental Insurance Company
Name of Company

Robert Anderson, Actuarial Consulting Director
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 04/01/2010.

	(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	$1,648,440	+5.9%
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: All classes, all territories (including Fire/EMS-Pak Program)

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt ISO Illinois Loss Cost revisions and increased limit factor revisions; revise Company loss cost multipliers

*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

Teresa Wineland - Sr. Research/Statistical 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 0%

(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	450,000	0%
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): Introduction of new coverages for the management liability insureds

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

Darwin National Assurance Company
Name of Company

Mark Green Chief Claims Officer
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/10

(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	1,696,900	-0.6%
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):
BCL Rate Revision Commercial umbrella

*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 C. Fonticella, ACAS, MAAA
Vice President and Manager

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2010

(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	1,100,325	21.60%
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): We are filing to adopt current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

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

FCCI Insurance Company
Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist
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 04-01-10.

	(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	$15,727	-4% (- $ 629)
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): ISO GL LC adoption

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

Gateway Insurance Company
Name of Company

Laura Ellsworth - Compliance Specialist
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/11/2010.

(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	3,662,907	0.3%
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: GL class 99310

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to add a Products/Completed Operations rate to the new Snow Removal (99310) class.
The proposed rate is $15.00 with a payroll basis, to take effect on January 11, 2010.

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

Grinnell Mutual Reinsurance Company
Name of Company

Eric Skouson - Assistant Actuary
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2010

	(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	$266,243	+0.5%
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):
Adoption of ISO Loss Cost Revision GL-2009-BGL1

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

Markel American Insurance Company
Name of Company

Deidre I. Balbuena,
VP Product & Regulatory Services
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/10

	(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	$1,365,264	+0.5%
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):
Adoption of ISO Loss Cost Revision GL-2009-BGL1

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

Markel Insurance Company
Name of Company

Deidre I. Balbuena,
VP Product & Regulatory Services

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 6/1/2010

(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	163,997	16.9%
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): We are filing to adopt current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

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

Monroe Guaranty Insurance Company
Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist
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 05/01/2010.

	(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	72,935 estimated	-4.0 estimated
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 ISO revised commercial general liability loss costs contained in reference filing number GL-2009-BGL1.

*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 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	6,458,480	-7.1%
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):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

National Fire Insurance Company
Name of Company

Robert Anderson, Actuarial Consulting Director
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2010

(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	1,743,750	22.2%
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): We are filing to adopt current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

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

National Trust Insurance Company
Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist
Official – Title

F 540 UNIFORM

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 2-15-10 New & 4-15-10 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	$22,714,300	+4.9%
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): ISO Increased Limits Factor Revision

*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

Section 754

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 02/01/2010 .

(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	$ 1,010,430	14.6%
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		

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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) Professionals Direct is filing for an overall rate change of +14.6%. This includes base rate, increased limit factor and firm size factor changes. See attached actuarial memo.

* Adjusted to reflect all prior rate changes.

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

Professionals Direct Insurance Company
Name of Company

Melissa Glavin-Guillotte Compliance and Regulatory Analyst
Offical - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2010

	(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	10,070,888	1.4%
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):
Please see explanatory memo. Changing LCM's

* 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 (SICSC)
Name of Company

LIBIN GUO – Actuarial Analyst
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2010

	(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	1,174,497	8.5%
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):
Please see explanatory memo. Changing LCM's

* 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 the Southeast (SICSE)
Name of Company

LIBIN GUO – Actuarial Analyst
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 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	1,221,200	-4.00%
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, we are adopting Loss Costs for all General Liability territories. This applies to Riverport Insurance Company.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the ISO General Liability Loss Cost revision GL-2009-BGL1 effective April 1, 2010. Our percentage of change number is based on the overall impact of the ISO rate level change.

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

Riverport Insurance Company
Name of Company

Terri Zachman, Product Development Analyst
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/15/2010.

(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	$5,694,550	-0.4%
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		

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Does filing only apply to certain territory (territories) or certain classes? If so, specify: Biotech classes for Public Companies in Directors & Officers Liability

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This filing is being made for a slight revision in our rates and includes a clean-up of our rule pages.

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

RSUI Indemnity Company
Name of Company

Ron Hardeman-VP, Regulatory Compliance
Official - Title

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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	253,272	-3.9%
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):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

Transportation Insurance Company
Name of Company

Robert Anderson, Actuarial Consulting Director
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	2,592,504	-5.8%
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):
Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

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

Valley Forge Insurance Company
Name of Company

Robert Anderson, Actuarial Consulting Director
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effective 9/1/2010

(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	$288,887	9.0%
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		

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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):
Increase in Base Rates by 9.0% for the Professional Advantage for Lawyers program.

*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

Patrick Cobb, Regulatory & Actuarial Services L
Official-Title