

# RECEIVED

AUG 12 2009

Form (RF-3)

SUMMARY SHEET **STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD**

Change in Company's premium or rate level produced by rate revision effective 12/1/2009

(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 Medical Malpractice - Optometrists	204,054	-4.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
There are two territories in IL. Rate change is the same for both territories. The amount of the rate change varies by class of Optometrist.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Base rate only change by class for our Optometrists Professional Liability Program.  
For more info please see the actuarial memorandum

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

*Chicago Ins. Co.*

Fireman's Fund Insurance  
Companies

Name of Company

Vice President, Compliance  
Official - Title

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

AUG 21 2009

FORM (RF-3)

**STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD**

**SUMMARY SHEET**

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

	(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		
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 <u>Medical Malpractice</u>	17,999,254	+2.3%
	<b>Life of Insurance</b>		

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

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

business. physician, surgeon, podiatrist and allied health professionals This filing is a 2.3% rate increase to the physician and surgeon book of

\*Adjusted to reflect all prior rate changes.

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

ProAssurance Casualty Company

Name of Company

LaQuita B. Goodwin, Compliance Specialist

Official - Title