

SERFF Tracking Number: HRMN-125318740 State: Arkansas
First Filing Company: Horace Mann Insurance Company, ... State Tracking Number: AR-PC-07-026428
Company Tracking Number:
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: ISO Symbol Updates thru 10-12-2007
Project Name/Number: /

Filing at a Glance

Companies: Horace Mann Insurance Company, Horace Mann Property and Casualty Insurance Company, Teachers Insurance Company

Product Name: ISO Symbol Updates thru 10-12-2007 SERFF Tr Num: HRMN-125318740 State: Arkansas

TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: AR-PC-07-026428
Sub-TOI: 19.0001 Private Passenger Auto (PPA) Co Tr Num: State Status:
Filing Type: Rate Co Status: Reviewer(s): Alexa Grissom, Betty

Author: Jeremy Learned Disposition Date: 10/22/2007

Date Submitted: 10/12/2007 Disposition Status: Filed

Effective Date Requested (New): 11/06/2007

Effective Date (New): 11/06/2007

Effective Date Requested (Renewal): 11/06/2007

Effective Date (Renewal):

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 10/22/2007

State Status Changed: 10/15/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

October 12, 2007

Arkansas Insurance Department

1200 West Third

Little Rock, AR 72201

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Attention: Alexa Grissom
Sr. Rate and Form Analyst

Subject: Horace Mann Insurance Company NAIC # 300-22578
Teachers Insurance Company NAIC #300-22683
Horace Mann Property and Casualty Insurance Company NAIC# 300-22756
Private Passenger Auto Rate Filing
Updated ISO Vehicle Symbols

Dear Ms. Grissom,

The Horace Mann Insurance Company, Teachers Insurance Company and Horace Mann Property and Casualty Insurance Company submit updated ISO vehicle symbols for your approval. We continue to lower, by one to four symbols, 2000 through 2008 model year vehicles. We propose Upon Approval, as the effective date of the symbols. Please return a stamped copy of this letter for our records. If I can be of further assistance or if additional information is needed, please call me at 217-789-2500, extension 5429, fax me at 217-788-5161 or e-mail me at learnej1@mail.horacemann.com

Jeremy Learned
Implementation Analyst
Property and Casualty Division
The Horace Mann Companies

Company and Contact

Filing Contact Information

Jeremy Learned, Actuarial Technician
1 Horace Mann Plaza
Springfield, IL 62715
learnej1@mail.horacemann.com
(217) 789-2500 [Phone]
(217) 788-5161[FAX]

Filing Company Information

Horace Mann Insurance Company
1 Horace Mann Plaza
CoCode: 22578
Group Code: 300
State of Domicile: Illinois
Company Type: Insurance

SERFF Tracking Number: HRMN-125318740 State: Arkansas
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Company

Springfield, IL 62715
(217) 789-2500 ext. [Phone]

Group Name:
FEIN Number: 59-1027412

State ID Number:

Horace Mann Property and Casualty Insurance CoCode: 22756
Company

State of Domicile: California

1 Horace Mann Plaza

Group Code: 300

Company Type: Insurance
Company

Springfield, IL 62715
(217) 789-2500 ext. [Phone]

Group Name:
FEIN Number: 95-2413390

State ID Number:

Teachers Insurance Company
1 Horace Mann Plaza

CoCode: 22683
Group Code: 300

State of Domicile: Illinois
Company Type: Insurance
Company

Springfield, IL 62715
(217) 789-2500 ext. [Phone]

Group Name:
FEIN Number: 23-1742051

State ID Number:

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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Horace Mann Insurance Company	\$0.00	10/12/2007	
Teachers Insurance Company	\$0.00	10/12/2007	
Horace Mann Property and Casualty Insurance Company	\$0.00	10/12/2007	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
7700189394	\$50.00	10/12/2007

SERFF Tracking Number: HRMN-125318740

State: Arkansas

First Filing Company: Horace Mann Insurance Company, ...

State Tracking Number: AR-PC-07-026428

Company Tracking Number:

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: ISO Symbol Updates thru 10-12-2007

Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	10/22/2007	10/22/2007

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Project Name/Number: /

Disposition

Disposition Date: 10/22/2007
Effective Date (New): 11/06/2007
Effective Date (Renewal):
Status: Filed
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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 Product Name: ISO Symbol Updates thru 10-12-2007
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Rate	ISO Symbol Updates thru 10-12-2007	Filed	Yes
Rate	ISO Symbol Updates thru 10-12-2007	Filed	Yes

SERFF Tracking Number: *HRMN-125318740*

State: *Arkansas*

First Filing Company: *Horace Mann Insurance Company, ...*

State Tracking Number: *AR-PC-07-026428*

Company Tracking Number:

TOI: *19.0 Personal Auto*

Sub-TOI: *19.0001 Private Passenger Auto (PPA)*

Product Name: *ISO Symbol Updates thru 10-12-2007*

Project Name/Number: */*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: HRMN-125318740 State: Arkansas
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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	ISO Symbol Updates thru 10-12-2007		Replacement	2006 Modified Symbol Changes 10-12-07.pdf
Filed	ISO Symbol Updates thru 10-12-2007		New	2008 Modified Symbol Changes 10-12-07.pdf

MODIFIED SYMBOL CHANGES/ADDITIONS
AS OF 10/12/2007

MOD YR	VEHICLE NAME	BODY STYLE	ISO VIN NUMBER	SYM	P/A RES	PERF	MOD YR	VEHICLE NAME	BODY STYLE	ISO VIN NUMBER	SYM	P/A RES	PERF
2006	HOND ACCORD LX	SEDAN 4D	JHMCM554&6	E	1								
2006	HOND ACCORD LX	SEDAN 4D	JHMCM564&6	E	1								
2006	HOND ACCORD LX	SEDAN 4D	JHMCM663&6	G	1								

MODIFIED SYMBOL CHANGES/ADDITIONS
AS OF 10/12/2007

MOD YR	VEHICLE NAME	BODY STYLE	ISO VIN NUMBER	SYM	P/A RES	PERF	MOD YR	VEHICLE NAME	BODY STYLE	ISO VIN NUMBER	SYM	P/A RES	PERF
2008	BMW M5	SEDAN 4D	WBSNB935&8	Y	1		2008	ROVR LR2 SE AWD	UTL4X44D	SALFS24N&8	N	1	
2008	BMW 528I	SEDAN 4D	WBANU535&8	N	1								
2008	BMW 528XI AWD	SEDAN 4D	WBANV135&8	P	1								
2008	BMW 535I	SEDAN 4D	WBANW135&8	P	1								
2008	BMW 535XI AWD	SEDAN 4D	WBANV935&8	R	1								
2008	BMW 535XI AWD	WAG 4D	WBAPT735&8	R	1								
2008	BMW 550I	SEDAN 4D	WBANW535&8	R	1								
2008	CHRY SEBRING	CONV 2D	1C3LC45K&8	L	1								
2008	CHRY SEBRING LI	CONV 2D	1C3LC65M&8	P	1								
2008	CHRY SEBRING TO	CONV 2D	1C3LC55R&8	N	1								
2008	DODG AVENGER R/	SEDAN 4D	1B3LC76M&8	J	1								
2008	DODG AVENGER R/	SEDAN 4D	1B3LD76M&8	K	1								
2008	DODG AVENGER SE	SEDAN 4D	1B3LC46K&8	F	1								
2008	DODG AVENGER SE	SEDAN 4D	1B3LC46R&8	H	1								
2008	DODG AVENGER SX	SEDAN 4D	1B3LC56K&8	G	1								
2008	DODG AVENGER SX	SEDAN 4D	1B3LC56R&8	H	1								
2008	FORD ESCAPE HYB	UTL4X24D	1FM&U49H&8	G	1								
2008	FORD ESCAPE HYB	UTL4X44D	1FM&U59H&8	H	1								
2008	FORD ESCAPE LIM	UTL4X24D	1FM&U041&8	8	1								
2008	FORD ESCAPE LIM	UTL4X44D	1FM&U941&8	A	1								
2008	FORD ESCAPE XLS	UTL4X24D	1FM&U02Z&8	5	1								
2008	FORD ESCAPE XLS	UTL4X44D	1FM&U92Z&8	7	1								
2008	FORD ESCAPE XLT	UTL4X24D	1FM&U03Z&8	7	1								
2008	FORD ESCAPE XLT	UTL4X24D	1FM&U031&8	7	1								
2008	FORD ESCAPE XLT	UTL4X44D	1FM&U93Z&8	8	1								
2008	FORD ESCAPE XLT	UTL4X44D	1FM&U931&8	8	1								
2008	MAZD TRIBUTE I	UTL4X24D	4F2&Z02Z&8	6	1								
2008	MAZD TRIBUTE I	UTL4X44D	4F2&Z92Z&8	8	1								
2008	MAZD TRIBUTE S	UTL4X24D	4F2&Z061&8	7	1								
2008	MAZD TRIBUTE S	UTL4X44D	4F2&Z961&8	8	1								
2008	MERC MARINER	UTL4X24D	4M2&U81Z&8	7	1								
2008	MERC MARINER	UTL4X24D	4M2&U811&8	7	1								
2008	MERC MARINER	UTL4X24D	4M2&U871&8	8	1								
2008	MERC MARINER	UTL4X44D	4M2&U91Z&8	8	1								
2008	MERC MARINER	UTL4X44D	4M2&U911&8	8	1								
2008	MERC MARINER	UTL4X44D	4M2&U971&8	A	1								
2008	MERC MARINER HY	UTL4X24D	4M2&U29H&8	G	1								
2008	MERC MARINER HY	UTL4X44D	4M2&U39H&8	H	1								
2008	ROVR LR2 SE AWD	UTL4X44D	SALFP24N&8	M	1								

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Filed 10/22/2007

Comments:

Attachments:

AR Rate and Rule Filing Schedule - New.pdf
AR Transmittal Document - New.pdf

Bypassed -Name: NAIC Loss Cost Filing Document
for OTHER than Workers' Comp **Review Status:** Filed 10/22/2007

Bypass Reason: n/a

Comments:

Bypassed -Name: NAIC loss cost data entry document **Review Status:** Filed 10/22/2007

Bypass Reason: n/a

Comments:

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing.)

1.	This filing transmittal is part of Company Tracking #	10122007
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Overall percentage rate impact for this filing	N/A
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4.	Effect of Rate Filing – Written premium change for this program	N/A
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5.	Effect of Rate Filing – Number of policyholders	N/A
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6.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File and Use
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7.	Rate Change by Company		
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Company Name	Percentage Change For this program	# of policyholders for this program	Written premium for this program
Horace Mann Ins. Co.	N/A	N/A	N/A
Teachers Ins. Co.	N/A	N/A	N/A
HM Prop & Cas Ins. Co.	N/A	N/A	N/A

8.	Overall percentage of last rate revision	N/A
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9.	Effective Date of last rate revision	N/A
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10.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	N/A
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11.	Exhibit Name/Description /Synopsis	Rule # or Page #	Replacement or Withdrawn?	Previous state filing number, if required by state
01	ISO Symbol Updates	2006-1, 2008-1	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
03			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
04			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
05			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	

To be complete, a rate/rule filing must include the following:

1. A completed Rate/Rule Filing Transmittal document (PC RRFS-1) (Do not refer to the body of the filing for the component/exhibit listing.) and,
2. A completed Property & Casualty Transmittal Document (PC TD-1) and,
3. One copy of all rate/rule components/exhibits submitted with the filing, and
4. The appropriate state review requirements, if required, and
5. The appropriate filing fees, if required, and
6. A postage-paid, self-addressed envelope large enough to accommodate the return
7. You should refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM UT Property & Casualty Transmittal Document (Revised 1/1/06)

1. Reserved for Insurance Dept. Use Only

2. Insurance Department Use only
a. Date the filing is received:
b. Analyst:
c. Disposition:
d. Date of disposition of the filing:
e. Effective date of filing:
f. State Filing #:
g. SERFF Filing #:
h. Subject Codes

3. Group Name	Group NAIC #
Horace Mann Insurance Company	300

4. Company Name(s)	Domicile	NAIC #	FEIN #
Horace Mann Insurance Company	IL	22578	59-1027412
Teachers Insurance Company	IL	22683	23-1742051
Horace Mann Property & Casualty Insurance Company	CA	22756	95-2413390

5. Company Tracking Number	10122007
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Jeremy Learned	Implementation Analyst	217-789-2500 ext. 5429	217-788-5161	Learnej1@mail.horacemann.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Jeremy Learned

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	19.000 Personal Auto
10. Sub-Type of Insurance (Sub-TOI)	19.0001 Private Passenger Auto
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Symbols
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input checked="" type="checkbox"/> Other
14. Effective Date(s) Requested	New: Upon Approval Renewal: Upon Approval
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	10/12/2007
19. Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # 10122007

21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]

Horace Mann Insurance Company, Teachers Insurance Company, and Horace Mann Property & Casualty Insurance Company submit updated ISO vehicle symbols for your approval. We continue to lower, by one to four symbols, 2000 through 2008 model year vehicles.

We propose Your Approval as the effective date of the symbols.

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: 7700189394

Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)