

SERFF Tracking Number: LDDX-125317195 State: Arkansas
Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
Company Tracking Number: DOEAR0180201F01
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
Product Name: Excess Directors & Officers
Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Filing at a Glance

Company: Old Republic Insurance Company

Product Name: Excess Directors & Officers

TOI: 17.1 Other Liability - Claims Made Only

Sub-TOI: 17.1006 Directors & Officers Liability

Filing Type: Form

SERFF Tr Num: LDDX-125317195

SERFF Status: Closed

Co Tr Num: DOEAR0180201F01

Co Status:

Author: SPI ORChicago

Date Submitted: 10/08/2007

State: Arkansas

State Tr Num: AR-PC-07-026368

State Status:

Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding

Disposition Date: 10/18/2007

Disposition Status: Approved

Effective Date (New):

Effective Date (Renewal):

Effective Date Requested (New): 11/15/2007

Effective Date Requested (Renewal):

General Information

Project Name: Excess Directors & Officers

Project Number: DOEAR0180201F01

Reference Organization:

Reference Title:

Filing Status Changed: 10/18/2007

State Status Changed: 10/09/2007

Corresponding Filing Tracking Number:

Filing Description:

Old Republic Insurance Company submits the following new endorsements for approval. It will be attached to our previously approved Excess Directors & Officers policy, ORUG-87. There is no rate impact.

D7021 (10/2007) - AMEND PENDING OR PRIOR DATE (Split Limits)

(Optional form - Clarifies coverage, no rate impact)

D7037 (10/2007) - AMENDMENT TO SECTION V. B. NOTICES

(Optional form - Clarifies coverage, no rate impact)

This endorsement amends the notice provisions in Section V. B. of the policy to allow the Insured to provide notice via

SERFF Tracking Number: LDDX-125317195 State: Arkansas
 Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
 Company Tracking Number: DOEAR0180201F01
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
 Product Name: Excess Directors & Officers
 Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

regular mail and facsimile in addition to prepaid express courier or certified mail.

We request an effective date of November 15, 2007 or the earliest date possible.

Company and Contact

Filing Contact Information

Johnathan Hagen, State Filings Analyst jhagen@oldrepublic.com
 307 N. Michigan Avenue (312) 346-8100 [Phone]
 Chicago, IL 60601 (312) 762-4950[FAX]

Filing Company Information

Old Republic Insurance Company	CoCode: 24147	State of Domicile: Pennsylvania
307 N. Michigan Avenue	Group Code: 150	Company Type:
Chicago , IL 60601	Group Name:	State ID Number:
(312) 762-4800 ext. [Phone]	FEIN Number: 25-0410420	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Old Republic Insurance Company	\$50.00	10/08/2007	16003634

SERFF Tracking Number: LDDX-125317195 State: Arkansas
Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
Company Tracking Number: DOEAR0180201F01
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
Product Name: Excess Directors & Officers
Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	10/18/2007	10/18/2007

SERFF Tracking Number: LDDX-125317195 *State:* Arkansas
Filing Company: Old Republic Insurance Company *State Tracking Number:* AR-PC-07-026368
Company Tracking Number: DOEAR0180201F01
TOI: 17.1 Other Liability - Claims Made Only *Sub-TOI:* 17.1006 Directors & Officers Liability
Product Name: Excess Directors & Officers
Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Disposition

Disposition Date: 10/18/2007

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: LDDX-125317195 State: Arkansas
 Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
 Company Tracking Number: DOEAR0180201F01
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
 Product Name: Excess Directors & Officers
 Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	AMEND PENDING OR PRIOR DATE (Split Limits)	Approved	Yes
Form	AMENDMENT TO SECTION V. B. NOTICES	Approved	Yes

SERFF Tracking Number: LDDX-125317195 State: Arkansas
 Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
 Company Tracking Number: DOEAR0180201F01
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
 Product Name: Excess Directors & Officers
 Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	AMEND PENDING OR PRIOR DATE (Split Limits)	D7021	(10/2007)	Endorsement/Amendment/Conditions		0.00	D7021.PDF
Approved	AMENDMENT TO SECTION V. B. NOTICES	D7037	(10/2007)	Endorsement/Amendment/Conditions		0.00	D7037.PDF



**AMEND PENDING OR PRIOR DATE
(Split Limits)**

It is understood and agreed that Item 6. of the Declarations is amended to read as follows:

Item 6. Pending or Prior Date:

- (a) As of _____ with respect to the \$ _____ limit of liability excess of \$ _____ limit of liability;
and
- (b) As of _____ with respect to the \$ _____ limit of liability excess of \$ _____ limit of liability.

All other terms and conditions of this policy remain unchanged.

This endorsement is a part of the policy and takes effect on the effective date of the policy, unless another effective date is shown below.

<i>Must be Completed</i>	
ENDT NO.	POLICY NO.

<i>Complete Only When This Endorsement is Not Prepared with the Policy Or Is Not to be Effective with the Policy</i>	
ISSUED TO	EFFECTIVE DATE OF THIS ENDORSEMENT



AMENDMENT TO SECTION V. B. NOTICES

It is understood and agreed that the first sentence of Section V. B. Notices of this policy is amended to read as follows:

All notices under this policy shall be in writing and given by mail, prepaid express courier or facsimile properly addressed to the appropriate party.

All other terms and conditions of this policy remain unchanged.

This endorsement is a part of the policy and takes effect on the effective date of the policy, unless another effective date is shown below.

<i>Must be Completed</i>	
ENDT NO.	POLICY NO.

<i>Complete Only When This Endorsement is Not Prepared with the Policy Or Is Not to be Effective with the Policy</i>	
ISSUED TO	EFFECTIVE DATE OF THIS ENDORSEMENT

SERFF Tracking Number: LDDX-125317195 *State:* Arkansas
Filing Company: Old Republic Insurance Company *State Tracking Number:* AR-PC-07-026368
Company Tracking Number: DOEAR0180201F01
TOI: 17.1 Other Liability - Claims Made Only *Sub-TOI:* 17.1006 Directors & Officers Liability
Product Name: Excess Directors & Officers
Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: LDDX-125317195 State: Arkansas
Filing Company: Old Republic Insurance Company State Tracking Number: AR-PC-07-026368
Company Tracking Number: DOEAR0180201F01
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1006 Directors & Officers Liability
Product Name: Excess Directors & Officers
Project Name/Number: Excess Directors & Officers /DOEAR0180201F01

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status: Approved 10/18/2007

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Property & Casualty Transmittal Document

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:	
New Business	
Renewal Business	
f. State Filing #:	
g. SERFF Filing #:	
h. Subject Codes	

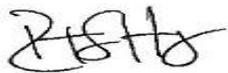
3. Group Name	Group NAIC #
Old Republic Insurance Group	0150

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Old Republic Insurance Company	PA	24147	25-0410420	

5. Company Tracking Number	DOEAR0180201F01
-----------------------------------	-----------------

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Johnathan Hagen 307 N. Michigan Avenue Chicago IL 60601	State Filings Analyst	800-621-0365 Ext. 4534	312-762-4950	jhagen@oldrepublic.com

7.	Signature of authorized filer	
-----------	-------------------------------	--

8.	Please print name of authorized filer	Johnathan Hagen
-----------	---------------------------------------	-----------------

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

9.	Type of Insurance (TOI)	17.1 Other Liability - Claims Made Only
10.	Sub-Type of Insurance (Sub-TOI)	17.1006 Directors & Officers Liability
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Directors & Officers
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 11/15/07 Renewal: 11/15/07
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	10/08/07
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

