

SERFF Tracking Number: GCCW-125440360 State: Arkansas
First Filing Company: General Casualty Company of Wisconsin, ... State Tracking Number: EFT \$100
Company Tracking Number: 020108 10497F
TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC
Product Name: AR Cabs Billing
Project Name/Number: /

Filing at a Glance

Companies: General Casualty Company of Wisconsin, Regent Insurance Company

Product Name: AR Cabs Billing SERFF Tr Num: GCCW-125440360 State: Arkansas
TOI: 16.0 Workers Compensation SERFF Status: Closed State Tr Num: EFT \$100
Sub-TOI: 16.0004 Standard WC Co Tr Num: 020108 10497F State Status: Fees verified and received
Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding
Author: Katie Fischer Disposition Date: 01/23/2008
Date Submitted: 01/22/2008 Disposition Status: Approved
Effective Date Requested (New): 02/01/2008 Effective Date (New): 02/01/2008
Effective Date Requested (Renewal): 02/01/2008 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed
Project Number: Domicile Status Comments:
Reference Organization: NA Reference Number: NA
Reference Title: NA Advisory Org. Circular: NA
Filing Status Changed: 01/23/2008
State Status Changed: 01/23/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
Re: General Casuatly Company of Wisconsin
FEIN#: 39-0301590; NAIC#: 0796-24414
Regent Insurance Company
FEIN#: 39-6062860; NAIC#: 0796-24449
Customer Account Billing System Filing
Workers Compensation
Filing Effective Date: February 1, 2008

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Dear Commissioner:

We are filing to make a change from our current Billing System (WINS) to our new Billing System (Cabs). Enclosed you will find a chart with currently filed Service Charges, NSF Fee's, and Reinstatement Fee's comparing the new Charges and Fee's with the old. I have also enclosed our Commercial Property and Casualty Manual Billing System pages and a document that explains the Billing Plans.

Please feel free to contact me if you have any questions or need any additional information on this filing. Thank you for your attention and consideration.

Sincerely,

Katie Fischer
System Support Specialist
General Casualty Companies
Home Office Commercial-Standard Lines
Telephone (608) 825-5168
E-mail address: Katie.Fischer@generalcasualty.com

Company and Contact

Filing Contact Information

Katie Fisher, Rate Development Technician katie.fisher@generalcasualty.com
One General Drive (608) 825-5168 [Phone]
Sun Prairie, WI 53596 (608) 825-5100[FAX]

Filing Company Information

General Casualty Company of Wisconsin CoCode: 24414 State of Domicile: Wisconsin

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One General Drive Group Code: 796 Company Type: Property & Casualty

Sun Prairie, WI 53596 Group Name: State ID Number:
(608) 837-4440 ext. [Phone] FEIN Number: 39-0301590

Regent Insurance Company CoCode: 24449 State of Domicile: Wisconsin
One General Drive Group Code: 796 Company Type: Property & Casualty

Sun Prairie, WI 53596 Group Name: State ID Number:
(608) 837-4440 ext. [Phone] FEIN Number: 39-6062860

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Filing Fees

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No
Fee Explanation: Two Companies, \$50 x 2 = \$100
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
General Casualty Company of Wisconsin	\$100.00	01/22/2008	17603870
Regent Insurance Company	\$0.00	01/22/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	01/23/2008	01/23/2008

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Disposition

Disposition Date: 01/23/2008
Effective Date (New): 02/01/2008
Effective Date (Renewal):
Status: Approved
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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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
Supporting Document	NAIC loss cost data entry document	Approved	Yes
Supporting Document	Billing Plans	Approved	Yes
Supporting Document	Fee's	Approved	Yes
Rate	Customer Account Billing System Pages	Approved	Yes

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Rate Information

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Approved	Customer Account Billing System Pages	Pg 1-5	Replacement	Commercial Lines Billing Pages for State Filings.pdf

Customer Account Billing System

Flexible Commercial Insurance Billing

All commercial lines policies are eligible under the Customer Account Billing System (CABS). Policies do not need to have the same terms or effective dates.

Insureds choosing to use CABS will receive billing statements directly from General Casualty. The statements summarize the insured's account status and also serve as a bill when premium is due.

You will receive copies of the statements. You will also receive a list of insureds with past-due premiums and copies of cancellation notices and rescission notices. (See Past-Due List, Cancellations and Reinstatements.)

Please complete a Customer Account Billing System Request Form, Und. 73 (see the "For Our Agents" section of our web site), and attach it to the policy application. We encourage you to add policies to the Customer Account Billing System when they are newly issued or at the time of renewal.

You and your insureds may call us toll free at 1-800-553-4471 with billing questions. Our automated billing information system is available 24 hours a day to answer basic billing questions. Callers may also speak with a billing representative during normal business hours by pressing the '0' key (or say "operator") at any time throughout the call.

Access Number

The 8 digit access number is available for use with our automated billing information system. This number is located on our billing statement, cancellation notice copy, the Past Due List and the agency copy of the statement of account.

Account Level Cash

Cash is applied prorata to all policies within the account based on oldest due first for each policy. (See also Policy Level Cash.)

Amendments

Amendments which do not appear on the insured's current billing statement will appear on the following statement.

Both you and your insured will receive an amended declaration page or policy changes form whenever a policy change occurs.

Amendment premiums are spread across unbilled installments. If the amended policy was already being billed on an installment basis and the insured would like the amendment premium to be billed in full, your underwriter must be notified. If your underwriter is not notified, the amendment premium will be spread.

If no unpaid balance is due on the account, a check is issued after 7 days.

Applications (New Business)

Please submit a completed Customer Account Billing System Request Form, Und. 73, (see the "For Our Agents" section of our web site) with all new policies. Cash may accompany the new application.

First installment = minimum of 16.67% of total premium per new policy.

See Calculation Formula for Minimum Monthly Payments on page 3 & 4.

If a down payment for an amount less than the first installment is submitted with the application, the first billed installment will equal at least 16.67% premium minus the down payment. If the initial billing statement is issued late, the first billed installment will be adjusted according to the number of months that have passed. (See Catch-Up Billing.)

Audit Processing

Return Premium Audits will apply to the CABS account balance. If the account balance is satisfied the return will be refunded in 7 days. This process is consistent with the way return premium amendments and cancellation credits are handled within the Customer Account Bill System in that returns are allowed to apply to other policies within an account. (The only exception to this is in the states of Minnesota and Kansas where cancellation credits are not applied to other policies within an account).

Additional Premium Audits will fall into one of two different billing processes depending on the status of the account.

If all policies within an account are cancelled or expired and an audit is processed, CABS will begin billing for the audit as a premium invoice. If not paid the next invoice will be earned premium (with up to two invoices generated, one every 15 days). If uncollected, the premium will be sent to a third party collection agency.

If inforce policies exist within the account and an audit transaction is processed, the audit premium will be billed in full on the next scheduled installment. If the insured fails to satisfy the "minimum payment due" on the next invoice, the CABS account will continue through the CABS time line and could eventually cancel.

Cancellations

If we do not receive the minimum payment due by the specified cancellation date, all unpaid policies will be cancelled and the insured will be billed for any earned premium.

Cancellation Notices

A cancellation notice may be sent to the insured 25 days after the premium invoice was issued based on the equity. Cancellation notices are combined for all policies. You will receive copies of all cancellation notices. The cancellation notices resemble a customer account bill invoice, but will have the individual policy notices behind the customer account notice of cancellation.

Catch-Up Billing

The initial bill on a commercial policy using a monthly pay plan is for a minimum of 16.67% of the premium. If that bill is issued late, the insured will be billed for as many months' premium as has lapsed since the policy's effective date.

Example

12 month policy term (from 1-1-07 to 1-1-08)

New business policy entered 3-1-07

The initial bill will be for the 16.67% down-payment plus 2 months of premium (the minimum down payment plus premium for the past 2 month policy period).

Commissions

Commissions will be paid up front for prepaid policies and for policies billed on an installment basis.

Credit Card Billing

Premiums may be charged on MasterCard or Visa charge cards. When premiums are charged, the entire balance must be paid in full.

Complete the reverse side of the billing statement stub and return to the company for processing.

Amendments and renewals will be treated like new charges. The insured may then pay the entire account balance with the credit card or a check or may simply start making payments on our regular billing plan.

Credit amendments will generate a return premium to be issued within 7 days.

Earned Premium

Insureds will be billed for any earned premium on cancelled CABS policies.

Please be sure to explain this to your insureds. If an insured decides to cancel a policy during the policy period, the insured must notify you. You then need to send us a Lost Policy Release Form (ACORD 35), a copy of the original policy or proof of insurance placed with another company.

Authorizations for cancellation should be processed through your office rather than coming directly from the insured. If you do not notify us of a policy cancellation, and the policy cancels for non-payment, we will bill the insured for any earned premium.

With CABS, these notices are issued on the next scheduled invoice date.

Electronic Funds Transfer

Premiums may be deducted from an insured's checking or savings account. The amount withdrawn is equal to the minimum payment due on standard CABS billing statements. (See Minimum Payment Due.)

Please submit the following:

1. A completed Customer Account Billing System Request Form, Und. 73 (see the "For Our Agents" section of our web site).
2. A **completed and signed** Automatic Funds Transfer Agreement, Adv. 419 (see the "For Our Agents" section of our web site).

3. A voided check, deposit slip or deposit receipt from the account to be used for premium withdrawal.

General Casualty's Home Office financial department will verify all checking or savings account information with the insured's financial institution.

An Electronic Funds Transfer Notice, indicating the amount and date of withdrawal, will be sent to the insured 20 days prior to the selected due date. The premium amount will be withdrawn from the insured's account about 20 days later. Withdrawal amounts may vary if policy changes occur.

If there is not enough money in the insured's checking or savings account to cover the amount due, the insured will be charged \$25 for insufficient funds. We must then receive a money order or cashier's check for the amount due. If we do not receive this amount within 10 days, those policies with an unpaid balance may be cancelled.

If an insured has insufficient funds more than 3 times in a one year period, their premiums will no longer be withdrawn from their checking or savings account and the insured will be billed directly.

There is no service charge.

Eligible Policies

All commercial lines insurance policies are eligible. When more than one policy is in a Customer Account Billing account, the policies need not have the same terms or effective dates.

Equity

Equity is the amount paid compared to the amount due. It is used when doing a cancellation evaluation.

Insufficient Funds

When checks are returned to us because of insufficient funds, we will send a letter to the insured requesting replacement. In addition, the account will be assessed a \$25.00 penalty charge. If the insured does not send us a money order or cashier's check for the amount due within 10 days, we may begin cancellation procedures.

Minimum Payment Due

The minimum payment due on each billing statement is a total of the minimum amounts due per policy plus or minus any charges or credits.

Note: The first installment for both new and renewal policies with a quarterly or 25% 9 month bill plan will always include a minimum of 4 months' premium.

Misdirected Payments

If insureds send their premium to your agency without the remittance stub, please forward it to:

(For All States):

General Casualty Companies
One General Drive
Sun Prairie, WI 53596

If insureds send their premium to your agency along with the remittance stub, please forward to:

(For all states except New York):

General Casualty Companies
PO Box 3109
Milwaukee, WI 53201-3109

(For NY Only):

General Casualty Companies
PO Box 452
Milwaukee, WI 53278-0452

Past-Due Lists

The past-due list is a list of insureds who have not paid the minimum payment due by the due date indicated on the premium invoice. These lists are available online through our website under "For Our Agents" on the due date. The past-due list displays the insured's name, account number, policies in the account, the account balance, the minimum payment due, any cash in suspense and the access number.

Payment Options

The following payment options are available. Note that the installment options may depend upon premium amount.

Plan Description	Down-payment	Installments
• Prepay	none	1 installment, 100% of premium
• Monthly	16.67% down-payment	then 10 installments, 8.33% each, every 30 days
• Quarterly	none	4 installments, 25% each, every 90 days
• 40/30/30	40% down-payment	then 2 installments, 30% each, every 90 days
• 25/9	25% down-payment	then 9 installments, 8.33% each, every 30 days

Insureds may either pay their premiums in full (prepaid policies) or if their policies meet the requirements, they can make their payments in installments.

The insured may use the prepayment option no matter how many policies are billed under the CABS System.

The CABS System puts all of the insured's policies into one account. Each policy's premium is spread evenly over its policy term. The insured is billed for the minimum payment due on each policy.

You may pay any amount between your "New Balance" and the "Minimum Due". A \$4.00 service charge is included, subject to change without notice. If you wish to pay your account balance in full to avoid service charges, please contact us toll free at 1-800-553-4471. Accounts with total premiums greater than \$50,000 are not eligible for installments. However, the account would be eligible for the prepayment option.

Note: If insureds make advance payments on their accounts and later make changes to their policies, they will be billed for any difference.

Policy Level Cash

Generally, cash can only be directed to a specific policy when we are in the process of canceling another policy in the account. (See Account Level Cash.)

Reinstatements

Contact your underwriter for all reinstatement decisions. You will receive a copy of all reinstatement decs. If your account/policies have cancelled due to non-payment and we agree to a reinstatement of coverage, you will be charged \$25.00 for the reinstatement processing (state exceptions are KS \$0.00, NE \$15.00). The charge will be included on your next invoice. The reinstatement fee is subject to change without notice.

Rescission Notices

If payment received is within \$5.00 of the Notice of Intent to Cancel a rescission notice will be produced.

Return Premium

The handling of return premium is determined by the circumstance as listed below.

If the premium paid on a cancelled policy exceeds earned premium due on the total account, we will send you a check for the unearned balance after 7 days.*

If no unpaid balance is due on the account, a check will be issued 7 days after the amendment has processed.*

***Special state considerations:**

For Minnesota and Nebraska policies, we will send all return premium checks directly to the insured after 7 days.

Service Charges

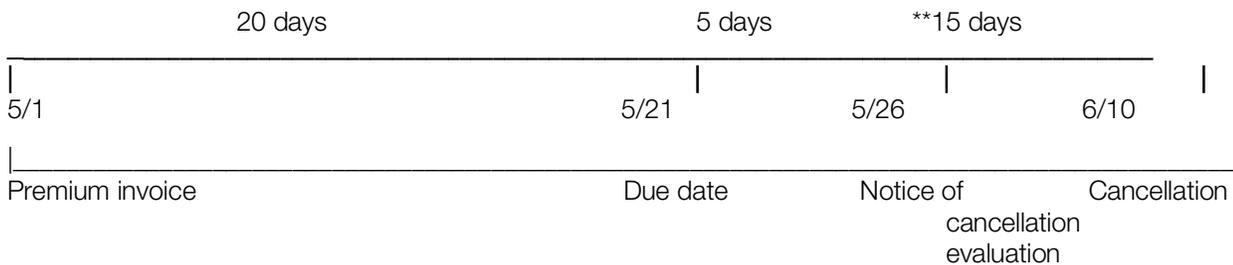
Service charges are only applicable to payments made on an installment basis. The service charge is \$4 per installment. Service charges are subject to change without notice. There is no service charge for electronic funds transfer.

Statement of Account

A statement of account is produced and mailed with each policy declaration. It is not a bill.

Billing Schedule

1. Insureds select a due date when completing their Customer Account Billing System Request Form, Und. 73. (see the "For our Agents" section of our web site). Twenty days prior to the due date a billing statement will be generated stating that their premium is due on the due date the insured selected.
2. If on the 21st day, we have not received the payment, the agents past-due list will be generated.
3. Approximately 5 days later, the notice of cancellation may be issued. Depending on the state in which the policy was issued, we will allow anywhere from 15-35** days before effectively canceling any policy with an unpaid balance.



**The number of days varies by state and line of business as regulated by each state's insurance commissioner.

Billing Statement

**Billing
Information**

Account Number

Agent

Date of Billing

New Balance \$

Minimum Due \$

Please mail your payment by _____ to ensure
we receive it in our office on or before Payment Due Date
of _____

**Account
Detail**

Current Policies	Dates of Coverage	Policy Premium Balance	Policy Minimum Due
		New Balance	Minimum Due
		\$	\$

**For account activity since your last Billing Statement,
please see Account Summary section on reverse side.**

Questions?

Billing questions? Please call us: **1-800-553-4471** Access Number:
 Coverage questions or policy changes? Please call:
 Changes to your policies after _____ will appear on your next Billing Statement.
 To report a claim, call ClaimLine 24, our 24 hour claim reporting service, or your Agent. Call toll free: **1-888-737-8256**

Detach this stub and return with payment in enclosed envelope.

Remittance

Date of Billing

Agency
Insured Name
Account Number

If Paying by credit card: Check box at the left and complete reverse side of stub. Other correspondence should be written on a separate piece of paper with your account number clearly identified.

Please write your account number on your check or money order and make payable to:

**GENERAL CASUALTY INSURANCE COMPANIES
PO BOX 3109
MILWAUKEE WI 53201-3109**



New Balance \$

Minimum Due \$

Amount Enclosed _____

Please mail your payment by _____ to ensure
we receive it in our office on or before Payment Due Date
of _____

Billing Statement (Back)

(For All States)

**Account
Summary**

Activity Date	Description of Activity since last Billing Statement	Amount

**Payment
Options**

You may pay any amount between your "New Balance" and the "Minimum Due." A \$4.00 service charge is included, subject to change without notice. If you wish to pay your account balance in full to avoid service charges, please contact us toll free at 1-800-553-4471.

You may have your payments withdrawn from your checking or savings account and avoid service charges. Call us toll free at 1-800-553-4471 for more information on this option.

You may charge your "New Balance" on your Visa or Mastercard (see "Credit Card Payments" section below).

**Policy
Changes**

Policy changes resulting in additional premium will be applied to any future billings for the changed policy. If your account is paid in full, you will receive an invoice on the next bill day.

Policy changes which result in credits will also be applied to any future billings, reducing these billings. If your account is paid in full, you will receive a refund within approximately 14 days.

**Returned
Checks**

If the check you send us is returned by your bank, you will be charged \$25.00, subject to change without notice. We must then receive a money order or cashier's check for the amount due or your policies may be cancelled. You may also charge your "New Balance" on your Visa or Mastercard (see "Credit Card Payments" section below).

**Reinstatement
Fee**

If your account / policies have cancelled due to non-payment and we agree to a reinstatement of coverage, you will be charged \$25.00 for the reinstatement processing. The charge will be included on your next invoice. The reinstatement fee is subject to change without notice.

**Credit Card
Payments**

This option is available only if you choose to pay your entire "New Balance." Please provide your credit card information in the spaces below.

<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	Card Number	Expiration Date	Signature

Name/Address**Change of**

If you have changed your name or address, please contact your local independent agent whose name and phone number can be found on the reverse side of stub.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty **Review Status:** Approved 01/23/2008

Comments:

Attachment:

P and C Transmittal.pdf

Bypassed -Name: NAIC Loss Cost Filing Document for Workers' Compensation **Review Status:** Approved 01/23/2008

Bypass Reason: NA

Comments:

Bypassed -Name: NAIC loss cost data entry document **Review Status:** Approved 01/23/2008

Bypass Reason: NA

Comments:

Satisfied -Name: Billing Plans **Review Status:** Approved 01/23/2008

Comments:

Attachment:

Billing Pay Plans.pdf

Satisfied -Name: Fee's **Review Status:** Approved 01/23/2008

Comments:

Attachment:

AR Fee's.pdf

17. Reference Organization # & Title	
18. Company's Date of Filing	1/22/2008
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 #	020108 10497F
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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We are filing to make a change from our current Billing System (WINS) to our new Billing System (Cabs). Enclosed you will find a chart with currently filed Service Charges, NSF Fee's, and Reinstatement Fee's comparing the new Charges and Fee's with the old. I have also enclosed our Commercial Property and Casualty Manual Billing System pages and a document that explains the Billing Plans.

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 #: NA
Amount: EFT

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

Effective March 1, 2007

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

Billing Pay Plans

existing compared to new plans available with CABS Billing

Existing pay plans in WINS Billing		Pay plans available in new CABS Billing	
Full payment	full premium amount, single payment	Full payment (same)	no change
Monthly	1st pymt = 2 monthly installs, 10 thereafter	Monthly (same) Formula for 1st install = 16.67% premium (roughly 2 month's worth) + 10 additional installments	no significant change
4 payments	4 payments 25% each, due every 3 months	4 payments (same)	no change

additional pay plan options in CABS	
Semiannual (P/L only)	2 installs per year, every 6 months
40/30/30	40% down then 30% every 90 days
25/9	25% down, then 9 monthly installs

Fees

State	Currently filed service charge	CABS service charge	Currently filed NSF Fee	CABS NSF Fee	Current Reinstatement Fee	CABS Reinstatement Fee *		
Arkansas	\$5.00	\$4.00	\$20.00	\$25.00	none	\$25.00		