

SERFF Tracking Number: CMIC-125460779 State: Arkansas
Filing Company: Cameron Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 15725/08/0006
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Filing at a Glance

Company: Cameron Mutual Insurance Company

Product Name: Multi-Line Terrorism Filing SERFF Tr Num: CMIC-125460779 State: Arkansas
TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: 15725/08/0006 State Status: Fees verified and received
Filing Type: Form Co Status: Submitted & Pending Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Author: Sheila Andrew Disposition Date: 02/11/2008
Date Submitted: 01/28/2008 Disposition Status: Approved
Effective Date Requested (New): 03/31/2008 Effective Date (New): 03/31/2008
Effective Date Requested (Renewal): 03/31/2008 Effective Date (Renewal): 03/31/2008

State Filing Description:

General Information

Project Name: N/A Status of Filing in Domicile: Pending
Project Number: N/A Domicile Status Comments: N/A
Reference Organization: N/A Reference Number: N/A
Reference Title: N/A Advisory Org. Circular: N/A
Filing Status Changed: 02/11/2008
State Status Changed: 02/08/2008 Deemer Date:
Corresponding Filing Tracking Number: N/A

Filing Description:

In response to the recently approved Terrorism Risk Insurance Program Reauthorization Act of 2007 (TRIPRA) we wish to file for adoption of a revised endorsement. We have also enclosed an informational copy of the required disclosure notice. These forms will be applicable to the Commercial lines of insurance as defined under the Terrorism Risk Insurance Act and in accordance with the requirements of the Missouri Department of Insurance. There will be no rate/rule revisions associated with these forms changes.

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Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

We have requested that these forms be effective for new and renewal policies effective March 31, 2008, in order to comply with the deadline set by the U.S. Treasury for implementation. But based on the requirements of TRIPRA and the U.S. Treasury interim guidance, these are to be applied, retroactively, to all policies issued as of the date of the enactment of TRIPRA, December 26, 2007.

We are revising the IL 21 89 form as follows:

- the Schedule entry for disclosure of the federal share of terrorism losses has been removed
- removed references to the federal share of terrorism losses for 2006 and 2007
- added verbiage to address the \$100 billion cap, in compliance with the disclosure requirement
- removed reference to foreign persons or governments in the Missouri Mandatory Notice

We are replacing IL 21 91 with a revised IL 21 92. Revisions to the IL 21 92 form are as follows:

- added a schedule and exception for statutory "fire following" to allow use of one form for all states where we do business
- removed reference to the original enactment of TRIA
- revised the definition of "certified act of terrorism" and "other act of terrorism" as provided for under the extension
- added radioactive materials to the "other act of terrorism" exclusion
- replaced current cap verbiage with more specific verbiage to address the \$100 billion cap

At this time we are also withdrawing the IL 21 85 "conditional" endorsement which will no longer be necessary due to the TRIA extension.

Company and Contact

Filing Contact Information

Sheila Andrew, Research & Compliance sandrew@cameron-insurance.com
Specialist
214 McElwain Drive (800) 326-6511 [Phone]
Cameron, MO 64442-1321 (816) 632-1022[FAX]

Filing Company Information

SERFF Tracking Number: CMIC-125460779 State: Arkansas
Filing Company: Cameron Mutual Insurance Company State Tracking Number: EFT \$50
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Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Cameron Mutual Insurance Company
214 McElwain Drive

CoCode: 15725
Group Code: 532

State of Domicile: Missouri
Company Type: Property &
Casualty

Cameron, MO 64429-1321
(800) 326-6511 ext. [Phone]

Group Name:
FEIN Number: 44-0447850

State ID Number:

SERFF Tracking Number: CMIC-125460779 State: Arkansas
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TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Cameron Mutual Insurance Company	\$50.00	01/28/2008	17705266

SERFF Tracking Number:	CMIC-125460779	State:	Arkansas
Filing Company:	Cameron Mutual Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	15725/08/0006		
TOI:	35.0 Interline Filings	Sub-TOI:	35.0002 Commercial Interline Filings
Product Name:	Multi-Line Terrorism Filing		
Project Name/Number:	N/A/N/A		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	02/11/2008	02/11/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Expedited Filing Transmittal Document For Terrorism Risk Insurance Forms And Pricing	Supporting Document	Sheila Andrew	02/11/2008	02/11/2008

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Expedited TRIA	Note To Filer	Llyweyia Rawlins	02/08/2008	02/08/2008
Expedited TRIA Filing Process	Note To Reviewer	Sheila Andrew	02/06/2008	02/06/2008

SERFF Tracking Number: *CMIC-125460779* *State:* *Arkansas*
Filing Company: *Cameron Mutual Insurance Company* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *15725/08/0006*
TOI: *35.0 Interline Filings* *Sub-TOI:* *35.0002 Commercial Interline Filings*
Product Name: *Multi-Line Terrorism Filing*
Project Name/Number: *N/A/N/A*

Disposition

Disposition Date: 02/11/2008

Effective Date (New): 03/31/2008

Effective Date (Renewal): 03/31/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CMIC-125460779 State: Arkansas
 Filing Company: Cameron Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: 15725/08/0006
 TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
 Product Name: Multi-Line Terrorism Filing
 Project Name/Number: N/A/N/A

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Expedited Filing Transmittal Document For Terrorism Risk Insurance Forms And Pricing	Approved	Yes
Form	Disclosure Pursuant To Terrorism Risk Insurance Schedule	Approved	Yes
Form	Exclusion Of Other Acts Of Terrorism; Cap On Losses From Certified Acts Of Terrorism	Approved	Yes
Form	Commercial Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act	Approved	Yes

SERFF Tracking Number: CMIC-125460779 State: Arkansas
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TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
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Project Name/Number: N/A/N/A

Amendment Letter

Amendment Date:

Submitted Date: 02/11/2008

Comments:

Subject:

Expedited TRIA Filing Process

Comments:

I see in the AID bulletin dated 02-01-08, AID has allowed for the use of an expedited filing process for TRIA materials. I had already submitted this filing prior to the bulletin being released, but now wish to amend it to include the Expedited Filing Transmittal Document For Terrorism Risk Insurance Forms And Pricing.

Thanks.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Expedited Filing Transmittal Document For Terrorism Risk Insurance Forms And Pricing

Comment:

AR Expedited Filing Transmittal Document for Terrorism Risk Insurance Forms & Pricing.pdf

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TOI: 35.0 Interline Filings *Sub-TOI:* 35.0002 Commercial Interline Filings
Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Note To Filer

Created By:

Llyweyia Rawlins on 02/08/2008 02:32 PM

Subject:

Expedited TRIA

Comments:

Please go ahead and complete the Filing Transmittal on the TRIA. When I receive the transmittal I will finish up the review of this filing.

Thank You

Llyweyia Rawlins

SERFF Tracking Number: CMIC-125460779 *State:* Arkansas
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Company Tracking Number: 15725/08/0006
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0002 Commercial Interline Filings
Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Note To Reviewer

Created By:

Sheila Andrew on 02/06/2008 10:12 AM

Subject:

Expedited TRIA Filing Process

Comments:

I see in the AID bulletin 02-01-08 has allowed for the use of an expedited filing process for TRIA materials. I had submitted this filing last week. It is forms only. Would it help any for me to complete the expedited filing transmittal and attach to the filing at this point as a Supporting Document?

Thanks.

Sheila Andrew

SERFF Tracking Number: CMIC-125460779 State: Arkansas
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 Product Name: Multi-Line Terrorism Filing
 Project Name/Number: N/A/N/A

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Disclosure Pursuant To Terrorism Risk Insurance Schedule	IL 21 89	01 08	Disclosure/ Replaced Notice	Replaced Form #:0.00 IL 21 89 01 07 Previous Filing #:		Final Print Copy - IL 21 89 01 08.pdf
Approved	Exclusion Of Other Acts Of Terrorism; Cap On Losses From Certified Acts Of Terrorism	IL 21 92	01 08	Endorseme Replaced nt/Amendm ent/Condi ons	Replaced Form #:0.00 IL 21 91 02 03 Previous Filing #:		Final Print Copy - IL 21 92 01 08.pdf
Approved	Commercial Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act	IL 21 85	01 07	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00 IL 21 85 01 07 Previous Filing #:		

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**EXCLUSION OF OTHER ACTS OF TERRORISM;
CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM**

SCHEDULE

The **Exception Covering Certain Fire Losses** (under section A.) applies to property located in the following state(s): **Iowa, Missouri**

A. We will not pay for loss or damage caused directly or indirectly by an "other act of terrorism". Such loss or damage is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss. Notwithstanding any provision of the policy, it is hereby agreed that this policy shall not apply to:

1. liability loss(es) arising out of an "other act of terrorism"; or
2. property loss(es) arising out of an "other act of terrorism"; or
3. loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in hindering, defending against, controlling, preventing, suppressing or in any way relating to any actual or expected "other act of terrorism".

Exception Covering Certain Fire Losses - This exception to the exclusion in paragraph A.2. above, applies only if indicated and as indicated in the Schedule of this endorsement.

If an "other act of terrorism" results in fire and fire is a covered peril under the terms of the policy, we will pay for the loss or damage caused by that fire. This exception for fire applies only to direct loss or damage by fire to Covered Property.

B. The following definitions are added:

1. "Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State and the Attorney General of the United States, to be an act of terrorism pursuant to the federal Terrorism Risk Insurance Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:
 - a. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
 - b. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

No act may be a "certified act of terrorism" if the act is committed as part of the course of a war declared by Congress (except for workers' compensation).

2. "Other act of terrorism" means a violent act or an act that is dangerous to human life, property or infrastructure that is committed by an individual or individuals and that appears to be part of an effort to coerce a civilian population or to influence the policy or affect the conduct of any government by coercion, and that is not a "certified act of terrorism". Multiple incidents of an "other act of terrorism" which occur within a seventy-two hour period and appear to be carried out in concert or to have a related purpose or common leadership shall be considered to be one incident.
- C. With respect to an "other act of terrorism" as defined above, this exclusion only applies if one or more of the following are attributable to such an act:
1. The total of insured damage to all types of property in the United States, its territories and possessions, Puerto Rico and Canada exceeds \$25,000,000. In determining whether the \$25,000,000 is exceeded, we will include all insured damage sustained by property of all persons and entities affected by the terrorism and business interruption losses sustained by owners or occupants of the damaged property. For the purpose of this provision, insured damage means damage that is covered by any insurance plus damage that would be covered by any insurance but for the application of any terrorism exclusions; or

2. Fifty or more persons sustain death or serious physical injury. For the purposes of this provision, serious physical injury means:
 - a. Physical injury that involves a substantial risk of death; or
 - b. Protracted and obvious physical disfigurement; or
 - c. Protracted loss of or impairment of the function of a bodily member or organ; or
3. The terrorism is carried out by means of the dispersal or application of radioactive material or through the use of a nuclear weapon or device that involves or produces a nuclear reaction or radiation or radioactive contamination; or
4. Radioactive material is released, and it appears that one purpose of the terrorism was to release such material; or
5. The terrorism is carried out by means of the dispersal or application of pathogenic or poisonous biological or chemical materials; or
6. Pathogenic or poisonous biological or chemical materials are released, and it appears that one purpose of the terrorism was to release such materials.

With respect to this exclusion, paragraphs C.1. and C.2. describe the thresholds used to measure the magnitude of an incident of an "other act of terrorism" and the circumstances in which the threshold will apply for the purpose of determining whether this exclusion will apply to that incident. When this exclusion applies to an incident of an "other act of terrorism", such exclusion applies without regard to any Nuclear Hazard Exclusion provided under this Coverage Form or Policy or attached to this coverage form by endorsement.

- D. If aggregate insured losses attributable to "certified acts of terrorism" exceed \$100 billion in a Program Year (January 1 through December 31) and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.
- E. In the event of any incident of an "other act of terrorism" that is not subject to this exclusion, coverage does not apply to any loss or damage that is otherwise excluded under this Coverage Form or Policy or attached to this Coverage Form by endorsement. The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for any loss which would otherwise be excluded under this Coverage Form or Policy or attached to this Coverage Form by endorsement.

All other provisions of this policy apply.

<i>SERFF Tracking Number:</i>	<i>CMIC-125460779</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Cameron Mutual Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>15725/08/0006</i>		
<i>TOI:</i>	<i>35.0 Interline Filings</i>	<i>Sub-TOI:</i>	<i>35.0002 Commercial Interline Filings</i>
<i>Product Name:</i>	<i>Multi-Line Terrorism Filing</i>		
<i>Project Name/Number:</i>	<i>N/A/N/A</i>		

Rate Information

Rate data does NOT apply to filing.

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TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Multi-Line Terrorism Filing
Project Name/Number: N/A/N/A

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 02/11/2008

Comments:

Attachment:

TRIA Extension 15725-08-0006.pdf

Satisfied -Name: Expedited Filing Transmittal
Document For Terrorism Risk
Insurance Forms And Pricing **Review Status:** Approved 02/11/2008

Comments:

Attachment:

AR Expedited Filing Transmittal Document for Terrorism Risk Insurance Forms & Pricing.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: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3.	Group Name	Group NAIC #			
		0532			
4.	Company Name(s)	Domicile	NAIC #	FEIN #	State #
	Cameron Mutual Insurance Company	MO	15725	44 0447850	

5.	Company Tracking Number	15725/08/0006
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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
	Sheila P. Andrew 214 McElwain Drive Cameron, MO 64429	Research & Compliance Specialist	800-326-6511 x371	816-632-1022	sandrew@cameron-insurance.com
7.	Signature of authorized filer		<i>Sheila P Andrew</i>		
8.	Please print name of authorized filer		Sheila P. Andrew		

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

9.	Type of Insurance (TOI)	35.0 Interline Filings			
10.	Sub-Type of Insurance (Sub-TOI)	35.0002 Commercial Interline Filings			
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A			
12.	Company Program Title (Marketing title)	Multi-Line Terrorism Filing			
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:	March 31, 2008	Renewal:	March 31, 2008
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	January 28, 2008			
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	15725/08/0006
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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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- added radioactive materials to the "other act of terrorism" exclusion
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At this time we are also withdrawing the IL 21 85 "conditional" endorsement which will no longer be necessary due to the TRIA extension.

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]
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SERFF EFT
Amount: \$50

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.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	15725/08/0006
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2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>	N/A
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3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Disclosure Pursuant To Terrorism Risk Insurance Schedule	IL 21 89 01 08	[] New [X] Replacement [] Withdrawn	IL 21 89 01 07	
02	Exclusion Of Other Acts Of Terrorism; Cap On Losses From Certified Acts Of Terrorism	IL 21 92 01 08	[] New [X] Replacement [] Withdrawn	IL 21 91 02 03	
03	Commercial Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act)	IL 21 85 01 07	[] New [] Replacement [X] Withdrawn		
04			[] New [] Replacement [] Withdrawn		
05			[] New [] Replacement [] Withdrawn		
06			[] New [] Replacement [] Withdrawn		
07			[] New [] Replacement [] Withdrawn		
08			[] New [] Replacement [] Withdrawn		
09			[] New [] Replacement [] Withdrawn		
10			[] New [] Replacement [] Withdrawn		

**EXPEDITED FILING TRANSMITTAL DOCUMENT
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

This page applies to the following state(s) ARKANSAS

Indicate Type of Filing
<input type="checkbox"/> Filing Related to <i>Certified Losses</i>
<input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i>
<input checked="" type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
Cameron Mutual Insurance Company	MO	0532-15725	44 0447850

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Sheila P. Andrew Research & Compliance Specialist 214 McElwain Drive Cameron, MO 64429	(800) 326-6511 x371	(816) 632-1022	sandrew@cameron- insurance.com

Filing information

Line of Insurance (TOI)	Interline Filings 35.0
Line of Insurance (Sub-TOI)	Commercial Interline Filings 35.0005
Company Program Title (Marketing title) (if applicable)	Multi-Line Terrorism Filing
Filing Type ** see note below	Forms
This application is used with:	IL 21 92 01 08 and IL 21 89 01 08
Effective Date Requested	March 31, 2008
Filing date	January 28, 2008
Company Tracking Number	15725/08/0006 (SERFF Filing CMIC-125460779)
Date filing approved in domiciliary state, if applicable	February 01, 2008

	Component/Form Name /Description/Synopsis	Form # or Rate Page Include edition date	Replacement Or withdrawn?	If replacement, give form # or rate page(s) it replaces	Previous State Filing Number, if required by state
01	Disclosure Pursuant To Terrorism Risk Insurance Schedule	IL 21 89 01 08	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	IL 21 89 01 07	
02	Exclusion of Other Acts of Terrorism; Cap On Losses From Certified Acts of Terrorism	IL 21 92 01 08	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	IL 21 91 02 03	
03	Commercial Conditional Exclusion of Terrorism (Relating to Disposition Of Federal Terrorism Risk Insurance Act	IL 21 85 01 07	<input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

- Is in compliance with the terms of the Terrorism Risk Insurance Act of 2002 and the laws of this state; and
- Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.


Signature

Sheila P. Andrew
Print Name:

Research & Compliance Specialist
Title: