

SERFF Tracking Number: GECC-125668413 State: Arkansas
First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
Company Tracking Number: 2008-207
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: 207-Auto-Form
Project Name/Number: 207-Auto-Form/2008-207

Filing at a Glance

Companies: GEICO Indemnity Company, GEICO Casualty Company, GEICO General Insurance Company, Government Employees Insurance Company

Product Name: 207-Auto-Form SERFF Tr Num: GECC-125668413 State: Arkansas
TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: 2008-207 State Status: Fees verified and received (PPA)
Filing Type: Form Co Status: Reviewer(s): Alexa Grissom, Betty Montesi
Author: Maria Papagjika Disposition Date: 05/29/2008
Date Submitted: 05/28/2008 Disposition Status: Accepted For Informational Purposes
Effective Date Requested (New): On Approval Effective Date (New): 05/29/2008
Effective Date Requested (Renewal): On Approval Effective Date (Renewal):
State Filing Description:

General Information

Project Name: 207-Auto-Form Status of Filing in Domicile:
Project Number: 2008-207 Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 05/29/2008 Deemer Date:
State Status Changed: 05/29/2008
Corresponding Filing Tracking Number:
Filing Description:
Specifically, we propose to place on file the following new forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134NHV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134GRV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)

SERFF Tracking Number: GECC-125668413 State: Arkansas
 First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
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 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: 207-Auto-Form
 Project Name/Number: 207-Auto-Form/2008-207

M-134MVR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)
 M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)

Additionally, we are withdrawing the following forms:

M-134-CR (08-02)
 M-134-DH (4-99)

Copies of the new forms are attached for your convenience.

Company and Contact

Filing Contact Information

Maria Papagjika, Analyst, State Filings mpapagjika@geico.com
 One GEICO Plaza (301) 986-3792 [Phone]
 Washington, DC 20076 (301) 986-3922[FAX]

Filing Company Information

GEICO Indemnity Company	CoCode: 22055	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 52-0794134	

GEICO Casualty Company	CoCode: 41491	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 52-1264413	

GEICO General Insurance Company	CoCode: 35882	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 75-1588101	

Government Employees Insurance Company	CoCode: 22063	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:

SERFF Tracking Number: GECC-125668413

State: Arkansas

First Filing Company: GEICO Indemnity Company, ...

State Tracking Number: EFT \$50

Company Tracking Number: 2008-207

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: 207-Auto-Form

Project Name/Number: 207-Auto-Form/2008-207

Chevy Chase, MD 20815
(800) 824-5404 ext. [Phone]

Group Name:
FEIN Number: 53-0075853

State ID Number:

SERFF Tracking Number: *GECC-125668413* *State:* *Arkansas*
First Filing Company: *GEICO Indemnity Company, ...* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *2008-207*
TOI: *19.0 Personal Auto* *Sub-TOI:* *19.0001 Private Passenger Auto (PPA)*
Product Name: *207-Auto-Form*
Project Name/Number: *207-Auto-Form/2008-207*

Filing Fees

Fee Required? *Yes*
Fee Amount: *\$50.00*
Retaliatory? *No*
Fee Explanation: *\$50 per filing x 1 filing = \$50.00*
Per Company: *No*

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
GEICO Indemnity Company	\$0.00	05/28/2008	
GEICO Casualty Company	\$0.00	05/28/2008	
GEICO General Insurance Company	\$0.00	05/28/2008	
Government Employees Insurance Company	\$50.00	05/28/2008	20542041

SERFF Tracking Number: GECC-125668413

State: Arkansas

First Filing Company: GEICO Indemnity Company, ...

State Tracking Number: EFT \$50

Company Tracking Number: 2008-207

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: 207-Auto-Form

Project Name/Number: 207-Auto-Form/2008-207

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Alexa Grissom Informational Purposes		05/29/2008	05/29/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Uniform Transmittal Document-Property & Casualty	Supporting Document	Maria Papagjika	05/29/2008	05/29/2008
Cover Letter	Supporting Document	Maria Papagjika	05/29/2008	05/29/2008
Change Sheet	Supporting Document	Maria Papagjika	05/29/2008	05/29/2008

SERFF Tracking Number: GECC-125668413 State: Arkansas
First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
Company Tracking Number: 2008-207
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: 207-Auto-Form
Project Name/Number: 207-Auto-Form/2008-207

Disposition

Disposition Date: 05/29/2008
Effective Date (New): 05/29/2008
Effective Date (Renewal):
Status: Accepted For Informational Purposes
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

SERFF Tracking Number: GECC-125668413 State: Arkansas
 First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
 Company Tracking Number: 2008-207
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: 207-Auto-Form
 Project Name/Number: 207-Auto-Form/2008-207

Item Type	Item Name	Item Status	Public Access
Supporting Document (revised)	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
Supporting Document (revised)	Cover Letter	Accepted for Informational Purposes	Yes
Supporting Document	Cover Letter	Accepted for Informational Purposes	Yes
Supporting Document (revised)	Change Sheet	Accepted for Informational Purposes	Yes
Supporting Document	Change Sheet	Accepted for Informational Purposes	Yes
Form	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	Accepted for Informational Purposes	Yes
Form	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	Accepted for Informational Purposes	Yes
Form	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	Accepted for Informational Purposes	Yes
Form	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	Accepted for Informational Purposes	Yes
Form	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	Accepted for Informational Purposes	Yes

SERFF Tracking Number: GECC-125668413 State: Arkansas
First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
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TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: 207-Auto-Form
Project Name/Number: 207-Auto-Form/2008-207

Amendment Letter

Amendment Date:
Submitted Date: 05/29/2008

Comments:

Dear Ms. Grissom,

Please note that we had inadvertently proposed to withdraw the following forms for the above-referenced filing:

M-134-CR (08-02)
M-134-DH (4-99)

Please see revised copies of our Cover Letter, P&C Transmittal Document, and Change Sheets displaying the correct information. We apologize for any inconvenience this may have caused.

Sincerely,

Gina Pak
Analyst, State Filings
(800) 824-5404 Ext. 7533
GPak@geico.com

Changed Items:

Supporting Document Schedule Item Changes:

Satisfied -Name: Uniform Transmittal Document-Property & Casualty

Comment:
AR-Auto Trans Document.pdf

User Added -Name: Cover Letter

Comment:
AR-Auto Cover Letter.pdf

User Added -Name: Change Sheet

Comment:
AR-Auto Change Sheets.pdf

SERFF Tracking Number: GECC-125668413 State: Arkansas
 First Filing Company: GEICO Indemnity Company, ... State Tracking Number: EFT \$50
 Company Tracking Number: 2008-207
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: 207-Auto-Form
 Project Name/Number: 207-Auto-Form/2008-207

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Accepted for Information Act Disclosure al Purposes	Federal Fair Credit Reporting Notice (Credit)	M134RQV	(02-08)	Disclosure/ New Notice			M134RQV.pdf
Accepted for Information Act Disclosure al Purposes	Federal Fair Credit Reporting Notice (Credit)	M134NHV	(02-08)	Disclosure/ New Notice			M134NHV.pdf
Accepted for Information Act Disclosure al Purposes	Federal Fair Credit Reporting Notice (Credit)	M134GRV	(02-08)	Disclosure/ New Notice			M134GRV.pdf
Accepted for Information Act Disclosure al Purposes	Federal Fair Credit Reporting Notice (MVR/CLUE)	M-134MVR	(02-08)	Disclosure/ New Notice			M134MVR.pdf
Accepted for Information Act Disclosure al Purposes	Federal Fair Credit Reporting Notice (MVR/CLUE)	M134GR	(02-08)	Disclosure/ New Notice			M134GR.pdf

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

FEDERAL FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE

Name
Address
City, State Zip Code

Thank you for contacting GEICO for a rate quote. *{Thank you for purchasing a policy from GEICO.}* The price we are quoting you is based in part on information provided to us by the consumer reporting agency listed below.

We are sending you this notice, as required by the Fair Credit Reporting Act, because you received a higher price based on your credit information.

The consumer reporting agency provided the following description of the credit factors that had the most influence on the price we quoted you:

[reason messages]

Please note that the consumer reporting agency did not participate in our adverse decision. They are unable to provide you with specific reasons for our decision.

You have the right to obtain a free copy of your credit report from the consumer reporting agency, whose address is listed below, if your request is made within 60 days of receiving this notice. You also have the right to dispute the accuracy or completeness of any information in the report by contacting the consumer reporting agency at the address below. If we receive notice that inaccurate or missing information in your credit report has been corrected, we will re-rate your policy.

(Name of consumer reporting agency)
Address
Toll free telephone number

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

FEDERAL FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE

Name
Address
City, State Zip Code

Thank you for contacting GEICO for a rate quote. *{Thank you for purchasing a policy from GEICO.}* As a result of your request for a rate quote, we asked the consumer reporting agency listed below to provide us with your credit information. This information is used in combination with other factors to determine the rate we offer. The price we quoted you may have been lower if the consumer reporting agency had been able to access your credit record.

The reason that the consumer reporting agency could not access your credit record was that there was no matching information at the credit bureau given the name, address, social security number and or date of birth that we have on file. Your credit record may be accessible by the use of more detailed information than was available to GEICO.

Please note that the consumer reporting agency did not participate in our decision. They are unable to provide you with specific reasons for our decision.

If you have questions concerning the unavailability of your credit record or would like to obtain a free copy of your credit report, you may contact the consumer reporting agency whose address is listed below within 60 days of receiving this notice. You also may dispute the accuracy or completeness of any information provided by the consumer reporting agency by contacting them directly at the address below.

(Name of Consumer Reporting Agency)
Address
Toll free telephone number

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

FEDERAL FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE

NAME
ADDRESS
CITY, STATE, ZIP CODE

Thank you for contacting GEICO for a rate quote. As a result of your request for a rate quote, we asked the consumer reporting agency listed below to provide us with your credit information. This information was used in combination with other factors to determine that GEICO is unable to offer you a rate quote at this time.

The consumer reporting agency listed below provided the following description of the credit factors that had the most influence on our decision:

{reason messages}

Please note that the consumer reporting agency did not participate in our adverse action decision. They are unable to provide you with specific reasons for our decision.

You have the right to obtain a free copy of your credit report from the consumer reporting agency whose address is listed below, if your request is made within 60 days of receiving this notice. You also have the right to dispute the accuracy or completeness of any information in the report by contacting the consumer reporting agency at the address below.

(Name of consumer reporting agency)
Address
Toll free telephone number

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

FEDERAL FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE

Name
Address
City, State Zip Code

**{Thank you for contacting GEICO for a rate quote}.*
**{Thank you for purchasing a policy from GEICO.}*
**{Thank you for allowing GEICO to provide a renewal quote}.*
**{Thank you for your recent policy change request}.* The price we are quoting is based in part on information provided to us by the consumer reporting agency listed below.

We are sending you this notice as required by the Fair Credit Reporting Act, because you received a higher price based on the claims loss history or driving record report.

The consumer reporting agency listed below provided the following report(s) on which we based our decision.

- Claims loss history
- Driving record

Please note that the consumer reporting agency did not participate in our adverse decision. They are unable to provide you with specific reasons for our decision.

You have the right to obtain a free copy of the consumer report (s) from the consumer reporting agency, whose address is listed below, if your request is made within 60 days of receiving this notice. You also have the right to dispute the accuracy or completeness of any information in the report(s) by contacting the consumer reporting agency at the address below. If we receive notice that inaccurate or missing information in your consumer report has been corrected, we will re-rate your policy.

For a free copy of the report(s) contact:

Claim Loss History:
(Name of consumer reporting agency
agency Toll Free telephone number)
number)

Driving Record
(Name of consumer reporting
Toll free telephone

To dispute the accuracy or completeness of the report(s) see the name and telephone number on the reverse side of this letter.

(continued on reverse side)

To dispute information contact:

Claims Loss History:
(Name of consumer reporting agency
Toll free telephone number)

Driving record:
(Name & address of DMV
Toll free Telephone number)

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

FEDERAL FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE

NAME
 ADDRESS
 CITY, STATE, ZIP CODE

Thank you for contacting GEICO for a rate quote. As a result of your request for a rate quote, we asked the consumer reporting agency (ies) listed below to provide us with copies of your claims history and driving record of all operators. This information was used in combination with other factors to determine that GEICO is unable to offer you a rate quote at this time.

The consumer reporting agency listed below provided the following report(s) on which we based our decision:

- _ History of previous claims
- _ Copy of driving record(s)

Please note that the consumer reporting agency did not participate in our adverse decision. They are unable to provide you with specific reasons for our decision.

You have the right to obtain a free copy of the consumer report(s) from the consumer reporting agency whose address is listed below, if your request is made within 60 days of receiving this notice. You also have the right to dispute the accuracy or completeness of any information in the report by contacting the consumer reporting agency at the address below.

For a free copy of the report(s) contact:

Claim History:

Driving Record:

(Name of Consumer Reporting Agency
 Toll free telephone number)

(Name of Consumer reporting Agency
 Toll free telephone number)

To dispute the accuracy or completeness of the report(s) see the reverse side of this letter.

reverse side)

(Continued on

To dispute information contact:

Claims History:

(Name of consumer reporting agency
Toll free telephone number)

Driving record:

(Name & address of DMV
toll free telephone number)

<i>SERFF Tracking Number:</i>	<i>GECC-125668413</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>2008-207</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>207-Auto-Form</i>		
<i>Project Name/Number:</i>	<i>207-Auto-Form/2008-207</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: GECC-125668413

State: Arkansas

First Filing Company: GEICO Indemnity Company, ...

State Tracking Number: EFT \$50

Company Tracking Number: 2008-207

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: 207-Auto-Form

Project Name/Number: 207-Auto-Form/2008-207

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status:

Accepted for Informational 05/29/2008
Purposes

Comments:

Attachment:

AR-Auto Trans Document.pdf

Satisfied -Name: Cover Letter

Review Status:

Accepted for Informational 05/29/2008
Purposes

Comments:

Attachment:

AR-Auto Cover Letter.pdf

Satisfied -Name: Change Sheet

Review Status:

Accepted for Informational 05/29/2008
Purposes

Comments:

Attachment:

AR-Auto Change Sheets.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: 60%; 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 #
GEICO	0031

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Government Employees Insurance Company	MD	22063	53-0075853	
GEICO General Insurance Company	MD	35882	75-1588101	
GEICO Indemnity Company	MD	22055	52-0794134	
GEICO Casualty Company	MD	41491	52-1264413	

5. Company Tracking Number	2008-207
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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
	Gina Pak 4608 Willard Avenue Chevy Chase, MD 20815	Analyst, State Filings	800-824-5404, x7533	301-986-3922	GPak@geico.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Gina Pak

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

9. Type of Insurance (TOI)	Private Passenger Automobile
10. Sub-Type of Insurance (Sub-TOI)	19.0001
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Automobile Casualty Forms Manual Revision
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: 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	May 28, 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 #	2008-207
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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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Specifically, we propose to place on file the following new forms:

- M134RQV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M134NHV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M134GRV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M-134MVR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)
- M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)

Copies of the new forms are attached for your convenience.

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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Check #: N/A – SERFF EFT
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.)**

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 #	2008-207			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A			
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	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134RQV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134NHV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134GRV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	M-134MVR (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	M134GR (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1



- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

ONE GEICO PLAZA ■ Washington, D.C. 20076-0001

May 28, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

RE: Government Employees Insurance Company NAIC# 22063
GEICO General Insurance Company NAIC# 35882
GEICO Indemnity Company NAIC# 22055
GEICO Casualty Company NAIC# 41491
Automobile Casualty Forms Manual
File No.: **2008-207**

Dear Commissioner Bowman:

For your review and approval, the above-referenced companies herewith submit a revision to their Automobile Casualty Forms Manual currently on file with your department.

Specifically, we propose to place on file the following new forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134NHV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134GRV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M-134MVR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)
M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)

Copies of the new forms are attached for your convenience.

Once you have had an opportunity to review the enclosed, please provide us with your stamped approval for our records.

Sincerely,

Gina Pak
Analyst, State Filings
Phone: (800) 824-5404 Ext 7533
Fax: (301) 986-3922
Email: gpak@geico.com

Enclosures

GOVERNMENT EMPLOYEES INSURANCE COMPANY
GEICO GENERAL INSURANCE COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

GEICO INDEMNITY COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

GEICO CASUALTY COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

<i>SERFF Tracking Number:</i>	<i>GECC-125668413</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>2008-207</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>207-Auto-Form</i>		
<i>Project Name/Number:</i>	<i>207-Auto-Form/2008-207</i>		

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Supporting Document	Uniform Transmittal Document-Property & Casualty	05/28/2008	AR-Auto Trans Document.pdf
No original date	Supporting Document	Cover Letter	05/28/2008	AR-Auto Cover Letter.pdf
No original date	Supporting Document	Change Sheet	05/28/2008	AR-Auto Change Sheets.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: 60%; 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 #
GEICO	0031

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Government Employees Insurance Company	MD	22063	53-0075853	
GEICO General Insurance Company	MD	35882	75-1588101	
GEICO Indemnity Company	MD	22055	52-0794134	
GEICO Casualty Company	MD	41491	52-1264413	

5. Company Tracking Number	2008-207
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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
	Gina Pak 4608 Willard Avenue Chevy Chase, MD 20815	Analyst, State Filings	800-824-5404, x7533	301-986-3922	GPak@geico.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Gina Pak

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

9. Type of Insurance (TOI)	Private Passenger Automobile
10. Sub-Type of Insurance (Sub-TOI)	19.0001
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Automobile Casualty Forms Manual Revision
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: 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	May 28, 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 #	2008-207
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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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Specifically, we propose to place on file the following new forms:

- M134RQV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M134NHV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M134GRV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
- M-134MVR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)
- M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)

Additionally, we are withdrawing the following forms:

- M-134-CR (08-02)
- M-134-DH (4-99)

Copies of the new forms are attached for your convenience.

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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Check #: N/A – SERFF EFT
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.)**

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 #	2008-207
2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>	N/A

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	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134RQV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134NHV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	Federal Fair Credit Reporting Act Disclosure Notice (Credit)	M134GRV (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	M-134MVR (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05	Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)	M134GR (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06	Notice Regarding Fair Credit Reporting Act	M-134-CR (08-02)	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn		
07	Fair Credit Act Letter	M-134-DH (4-99)	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

ONE GEICO PLAZA ■ Washington, D.C. 20076-0001

May 28, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

RE: Government Employees Insurance Company NAIC# 22063
GEICO General Insurance Company NAIC# 35882
GEICO Indemnity Company NAIC# 22055
GEICO Casualty Company NAIC# 41491
Automobile Casualty Forms Manual
File No.: **2008-207**

Dear Commissioner Bowman:

For your review and approval, the above-referenced companies herewith submit a revision to their Automobile Casualty Forms Manual currently on file with your department.

Specifically, we propose to place on file the following new forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134NHV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M134GRV (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (Credit)
M-134MVR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)
M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure Notice (MVR/CLUE)

Additionally, we are withdrawing the following forms:

M-134-CR (08-02)
M-134-DH (4-99)

Copies of the new forms are attached for your convenience.

Once you have had an opportunity to review the enclosed, please provide us with your stamped approval for our records.

Sincerely,

Gina Pak
Analyst, State Filings
Phone: (800) 824-5404 Ext 7533
Fax: (301) 986-3922
Email: gpak@geico.com

Enclosures

GOVERNMENT EMPLOYEES INSURANCE COMPANY
GEICO GENERAL INSURANCE COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

Withdrawn Forms:

M-134-CR (08-02)

M-134-DH (4-99)

GEICO INDEMNITY COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

Withdrawn Forms:

M-134-CR (08-02)

M-134-DH (4-99)

GEICO CASUALTY COMPANY

AUTOMOBILE

ARKANSAS – CHANGE SHEET

POLICY SECTION

The following new forms are to be placed on file:

New Forms:

M134RQV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134NHV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M134GRV (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (Credit)

M-134MVR (02-08) – Federal Fair Credit Reporting Act
Disclosure Notice (MVR/CLUE)

M134GR (02-08) – Federal Fair Credit Reporting Act Disclosure
Notice (MVR/CLUE)

Withdrawn Forms:

M-134-CR (08-02)

M-134-DH (4-99)