

SERFF Tracking Number: AAAM-125701885 State: Arkansas  
Filing Company: Automobile Club Inter-Insurance Exchange State Tracking Number: #0 \$0  
Company Tracking Number: INFORMATIONAL ONLY  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0021 Personal Umbrella and Excess  
Product Name: Personal Catastrophe and Excess Liability  
Project Name/Number: /

## Filing at a Glance

Company: Automobile Club Inter-Insurance Exchange

Product Name: Personal Catastrophe and Excess Liability SERFF Tr Num: AAAM-125701885 State: Arkansas

TOI: 17.0 Other Liability - Claims Made/Occurrence SERFF Status: Closed State Tr Num: #0 \$0

Sub-TOI: 17.0021 Personal Umbrella and Excess Co Tr Num: INFORMATIONAL ONLY State Status: Fees verified and received

Filing Type: Form Co Status: Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding

Authors: Katina Arras, Mary Ellen Schiffer, Dan Wightman Disposition Date: 06/20/2008

Date Submitted: 06/19/2008 Disposition Status: Accepted For Informational Purposes

Effective Date Requested (New): 07/01/2008 Effective Date (New): 07/01/2008

Effective Date Requested (Renewal): 07/01/2008 Effective Date (Renewal): 07/01/2008

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile: Pending

Project Number: Domicile Status Comments:

Reference Organization: Reference Number:

Reference Title: Advisory Org. Circular:

Filing Status Changed: 06/20/2008

State Status Changed: 06/20/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Signature change

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## Company and Contact

### Filing Contact Information

Katina Arras, kaaras@aaamissouri.com  
12901 North Forty Drive (314) 523-7350 [Phone]  
St. Louis, MO 63141 (314) 523-6940[FAX]

### Filing Company Information

Automobile Club Inter-Insurance Exchange CoCode: 15512 State of Domicile: Missouri  
12901 North Forty Drive Group Code: Company Type:  
St. Louis, MO 63141 Group Name: State ID Number:  
(314) 523-7350 ext. 5233[Phone] FEIN Number: 43-6029277  
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## Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:  
Per Company: No

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Becky Harrington Informational Purposes		06/20/2008	06/20/2008

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## **Disposition**

Disposition Date: 06/20/2008

Effective Date (New): 07/01/2008

Effective Date (Renewal): 07/01/2008

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
<b>Supporting Document</b>	Explanatory Memorandum	Accepted for Informational Purposes	Yes

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## Supporting Document Schedules

**Satisfied -Name:** Explanatory Memorandum

**Review Status:**

Accepted for Informational 06/20/2008  
Purposes

**Comments:**

**Attachment:**

Explanatory Memorandum-Excess.pdf

**AUTOMOBILE CLUB INTER-INSURANCE EXCHANGE  
FILING # AAAM-125701885  
EXPLANATORY MEMORANDUM**

In conformity with Arkansas Insurance Department Rule and Regulation 23, Section 6A, the Automobile Club Inter-Insurance Exchange, 12901 North Forty Drive, St. Louis, Missouri 63141, is herewith notifying the Department of the following revision to our forms.

Effective July 1, 2008, Gail C. Louis' signature will replace William Erdman's signature as Secretary for all policy forms that currently contain the signature of the Secretary. Enclosed is a sample form that displays Gail C. Louis' signature.

Should you have questions regarding this notification, please contact me. Thank you for your consideration in this matter.

SAMPLE



***Personal  
Catastrophe  
And Excess  
Liability Policy***

**Automobile Club  
Inter-Insurance Exchange  
12901 North Forty Drive  
St. Louis, Missouri 63141  
(314) 523-7350**

6. Termination.

Nonrenewal. If we decide not to renew this policy, we will mail or deliver written notice of nonrenewal, stating the reasons for nonrenewal, to the first named insured at least 30 days prior to the expiration of the policy.

Any notice of nonrenewal will be mailed or delivered to the first named insured's last mailing address known to us. If notice is mailed, proof of mailing will be sufficient proof of notice.

*Gard C. Lowery*

Secretary

*Arthur W. Johns*

President