

SERFF Tracking Number: FDLY-125803126 State: Arkansas  
Filing Company: Fidelity National Property and Casualty Insurance Company State Tracking Number: EFT \$25  
Company Tracking Number: FNAUREF08  
TOI: 01.0 Property Sub-TOI: 01.0002 Personal Property (Fire and Allied Lines)  
Product Name: AR Dwelling Fire Reference Filing  
Project Name/Number: AR Dwelling Fire Reference Filing/FNAUREF08

## Filing at a Glance

Company: Fidelity National Property and Casualty Insurance Company

Product Name: AR Dwelling Fire Reference SERFF Tr Num: FDLY-125803126 State: Arkansas

Filing

TOI: 01.0 Property

SERFF Status: Closed

State Tr Num: EFT \$25

Sub-TOI: 01.0002 Personal Property (Fire and Allied Lines)

Co Tr Num: FNAUREF08

State Status: Fees verified and received

Filing Type: Rate

Co Status:

Reviewer(s): Becky Harrington, Betty Montesi

Author: Barb Rosemann

Disposition Date: 09/05/2008

Date Submitted: 09/04/2008

Disposition Status: Filed

Effective Date Requested (New): 01/01/2009

Effective Date (New): 01/01/2009

Effective Date Requested (Renewal): 01/01/2009

Effective Date (Renewal):

01/01/2009

State Filing Description:

## General Information

Project Name: AR Dwelling Fire Reference Filing

Status of Filing in Domicile: Not Filed

Project Number: FNAUREF08

Domicile Status Comments:

Reference Organization: Insurance Services Office (ISO)

Reference Number: DP-2008-RLA1

Reference Title: Arkansas Dwelling Revised Advisory Prospective Loss

Advisory Org. Circular: LI-DP-2008-120

Costs Submitted and Available For Use

Filing Status Changed: 09/05/2008

State Status Changed: 09/05/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Enclosed, as an independent filing for Fidelity National Property and Casualty Insurance Company (FNPAC), is a revision to the Dwelling Fire Program. FNPAC has received notice that the Insurance Services Office (ISO) has received approval for the above referenced filing. FNPAC will be adopting this revision effective January 1, 2009 New

SERFF Tracking Number: FDLY-125803126 State: Arkansas  
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Product Name: AR Dwelling Fire Reference Filing  
Project Name/Number: AR Dwelling Fire Reference Filing/FNAUREF08

and Renewal Business.

To the best of our knowledge, the enclosed material conforms to all departmental requirements. If you have any questions concerning this filing, please contact me toll-free at 1-800-849-6140, ext. 8316 or e-mail at the address below.

Sincerely,

Barb Rosemann  
Sr. Product Analyst  
Pricing Department  
barb.rosemann@fnf.com

## Company and Contact

### Filing Contact Information

Barb Rosemann, Sr. Product Analyst      barb.rosemann@fnf.com  
2201 Farnam Street      (402) 599-8316 [Phone]  
Omaha, NE 68102      (402) 346-0716[FAX]

### Filing Company Information

Fidelity National Property and Casualty      CoCode: 16578      State of Domicile: New York  
Insurance Company  
P.O. Box 45126      Group Code: 670      Company Type:  
Jacksonville, FL 32232-5126      Group Name:      State ID Number:  
(402) 599-8315 ext. [Phone]      FEIN Number: 16-0986300  
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## Filing Fees

Fee Required?      Yes  
Fee Amount:      \$25.00

*SERFF Tracking Number:* FDLY-125803126                      *State:* Arkansas  
*Filing Company:* Fidelity National Property and Casualty                      *State Tracking Number:* EFT \$25  
*Insurance Company*  
*Company Tracking Number:* FNAUREF08  
*TOI:* 01.0 Property                      *Sub-TOI:* 01.0002 Personal Property (Fire and Allied  
Lines)  
*Product Name:* AR Dwelling Fire Reference Filing  
*Project Name/Number:* AR Dwelling Fire Reference Filing/FNAUREF08  
Retaliatory? No  
Fee Explanation:  
Per Company: No

SERFF Tracking Number: FDLY-125803126 State: Arkansas  
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Insurance Company  
Company Tracking Number: FNAUREF08  
TOI: 01.0 Property Sub-TOI: 01.0002 Personal Property (Fire and Allied  
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Product Name: AR Dwelling Fire Reference Filing  
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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Fidelity National Property and Casualty Insurance Company	\$25.00	09/04/2008	22283131

SERFF Tracking Number: FDLY-125803126 State: Arkansas  
Filing Company: Fidelity National Property and Casualty Insurance Company State Tracking Number: EFT \$25  
Company Tracking Number: FNAUREF08  
TOI: 01.0 Property Sub-TOI: 01.0002 Personal Property (Fire and Allied Lines)  
Product Name: AR Dwelling Fire Reference Filing  
Project Name/Number: AR Dwelling Fire Reference Filing/FNAUREF08

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	09/05/2008	09/05/2008

*SERFF Tracking Number:* FDLY-125803126      *State:* Arkansas  
*Filing Company:* Fidelity National Property and Casualty      *State Tracking Number:* EFT \$25  
*Insurance Company*  
*Company Tracking Number:* FNAUREF08  
*TOI:* 01.0 Property      *Sub-TOI:* 01.0002 Personal Property (Fire and Allied  
Lines)  
*Product Name:* AR Dwelling Fire Reference Filing  
*Project Name/Number:* AR Dwelling Fire Reference Filing/FNAUREF08

## **Disposition**

Disposition Date: 09/05/2008

Effective Date (New): 01/01/2009

Effective Date (Renewal): 01/01/2009

Status: Filed

Comment: ISO filing was -6.3%

Rate data does NOT apply to filing.

SERFF Tracking Number: *FDLY-125803126* State: *Arkansas*  
 Filing Company: *Fidelity National Property and Casualty Insurance Company* State Tracking Number: *EFT \$25*  
 Company Tracking Number: *FNAUREF08*  
 TOI: *01.0 Property* Sub-TOI: *01.0002 Personal Property (Fire and Allied Lines)*  
 Product Name: *AR Dwelling Fire Reference Filing*  
 Project Name/Number: *AR Dwelling Fire Reference Filing/FNAUREF08*

<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Form RF-1 NAIC Loss Cost Data Entry Document--All P&C Lines		Yes
<b>Supporting Document</b>	HPCS-Homeowners Premium Comparison Survey		Yes
<b>Supporting Document</b>	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Filed	Yes

SERFF Tracking Number: *FDLY-125803126* State: *Arkansas*  
 Filing Company: *Fidelity National Property and Casualty Insurance Company* State Tracking Number: *EFT \$25*  
 Company Tracking Number: *FNAUREF08*  
 TOI: *01.0 Property* Sub-TOI: *01.0002 Personal Property (Fire and Allied Lines)*  
 Product Name: *AR Dwelling Fire Reference Filing*  
 Project Name/Number: *AR Dwelling Fire Reference Filing/FNAUREF08*

## Supporting Document Schedules

**Review Status:**  
**Bypassed -Name:** Form RF-1 NAIC Loss Cost Data Entry Document--All P&C Lines 09/04/2008  
**Bypass Reason:** Not Applicable  
**Comments:**

**Review Status:**  
**Bypassed -Name:** HPCS-Homeowners Premium Comparison Survey 09/04/2008  
**Bypass Reason:** Not Applicable  
**Comments:**

**Review Status:**  
**Satisfied -Name:** NAIC Loss Cost Filing Document for OTHER than Workers' Comp Filed 09/05/2008  
**Comments:**  
**Attachment:**  
 Form RF2.pdf

**Review Status:**  
**Satisfied -Name:** Uniform Transmittal Document-Property & Casualty Filed 09/05/2008  
**Comments:**  
**Attachment:**  
 Transmittal.pdf

**INSURER RATE FILING  
ADOPTION OF ADVISORY ORGANIZATION  
PROSPECTIVE LOSS COSTS REFERENCE  
FILING ADOPTION FORM**

Page 1 of 3

1. Insurer Name Fidelity National Property and Casualty Insurance Company  
 Address 10301 Deerwood Park Blvd  
Jacksonville FL 32256

Person Responsible for Filing Linda Ritter

Title Sr. Product Analyst Telephone No. 800-849-6140 ext. 8315

2. Insurer NAIC No. 16578 Group No. 670

3. Line of Insurance Dwelling Fire and Personal Liability

4. Advisory Organization ISO

5. Advisory Organization Reference Filing No. DP-2002-RLC1 and DL-2002-RLC1

6. The above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.

7. Proposed Rate Level Change \_\_\_\_\_ n/a % Effective Date \_\_\_\_\_

8. Prior Rate Level Change \_\_\_\_\_ n/a % Effective Date \_\_\_\_\_

9. Attach "Summary of Supporting Information Form"  
(Use a separate Summary for each insurer-selected loss cost multiplier.)

10. Check one of the following:
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and, if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.
  - The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

AID/P&C DEC 22 '04

Insurer Name: Fidelity National Property and Casualty Insurance Company Date: 10/04/04  
 NAIC No. 16578 Group No. 670

INSURER RATE FILING  
 ADOPTION OF ADVISORY ORGANIZATION PROSPECTIVE LOSS COSTS  
 SUMMARY OF SUPPORTING INFORMATION FORM  
 CALCULATION OF COMPANY LOSS COST MULTIPLIER

1. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: Dwelling Fire (owner-occupied) and Personal Liability
2. Loss Cost Modification:  
 A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:  
 (Check One)  
 Without Modification (factor = 1.000)  
 With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) \_\_\_\_\_  
 B. Loss Cost Modification Expressed as a Factor: (See Examples Below)

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED, ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 3-7 BELOW.**

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

	Selected Provisions	
A. Total Production Expense	25.0	%
B. General Expense	4.0	%
C. Taxes, Licenses & Fees	2.5	%
D. Underwriting Profit & Contingencies*	5.0	%
E. Other (explain)	0	%
F. TOTAL	44.5	%

\* Explain how investment income is taken into account.

4. A. Expected Loss Ratio:  $ELR=100\%-3F=A$ . 63.5% %  
 B. ELR in Decimal Form = .635 %

5. Company Formula Loss Cost Multiplier: (2B divided by 4B) = 1.575 %

6. Company Selected Loss Cost Multiplier = 1.575 %  
 Explain any differences between 5 and 6:  
 \_\_\_\_\_  
 \_\_\_\_\_

7. Rate level change for the coverages to which this page applies: \_\_\_\_\_ %

Example 1: Loss Cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss Cost Modification Factor: If your company's loss cost modification is +15%, a factor of 1.15 (1.000 + .150) should be used.

Insurer Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 NAIC No. \_\_\_\_\_ Group No. \_\_\_\_\_

**EXPENSE CONSTANT SUPPLEMENT**  
**CALCULATION OF COMPANY LOSS COST MULTIPLIER**  
**WITH EXPENSE CONSTANTS**

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

	Selected Provisions		
	Overall	Variable	Fixed
A. Total Production Expense	_____	_____	%
B. General Expense	_____	_____	%
C. Taxes, Licenses & Fees	_____	_____	%
D. Underwriting Profit & Contingencies*	_____	_____	%
E. Other (explain)	_____	_____	%
F. TOTAL	_____	_____	%

\* Explain how investment income is taken into account.

4. A. Expected Loss Ratio:  $ELR = 100\% - \text{Overall } 3F =$  \_\_\_\_\_ %  
 B. ELR in Decimal Form = \_\_\_\_\_ %  
 C. Variable Expected Loss Ratio:  $VELR = 100\% - \text{Variable } 3F =$  \_\_\_\_\_ %  
 D.  $VELR$  in Decimal Form = B.  $ELR$  in Decimal Form = \_\_\_\_\_ %

5. Formula Expense Constant:  
 $[(1.00 \text{ divided by } 4B) - (1.00 \text{ divided by } 4D)]$   
 $\times$  Average Underlying Loss Cost = \_\_\_\_\_  
 Formula Variable Loss Cost Multiplier:  
 $(2B \text{ divided by } 4D) =$  \_\_\_\_\_

6. Selected Expense Constant = \_\_\_\_\_  
 Selected Variable Loss Cost Multiplier = \_\_\_\_\_

7. Explain any differences between 5 and 6:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Rate level change for the coverages to which this page applies: \_\_\_\_\_ %

**INSURER RATE FILING  
ADOPTION OF ADVISORY ORGANIZATION  
PROSPECTIVE LOSS COSTS REFERENCE  
FILING ADOPTION FORM**

Page 1 of 3

1. Insurer Name Fidelity National Property and Casualty Insurance Company  
 Address 10301 Deerwood Park Blvd  
Jacksonville FL 32256

Person Responsible for Filing Linda Ritter  
 Title Sr. Product Analyst Telephone No. 800-849-6140 ext. 8315

2. Insurer NAIC No. 16578 Group No. 670

3. Line of Insurance Dwelling Fire and Personal Liability

4. Advisory Organization ISO

5. Advisory Organization Reference Filing No. DP-2002-RLC1 and DL-2002-RLC1

6. The above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.

7. Proposed Rate Level Change \_\_\_\_\_ n/a % Effective Date \_\_\_\_\_

8. Prior Rate Level Change \_\_\_\_\_ n/a % Effective Date \_\_\_\_\_

9. Attach "Summary of Supporting Information Form"  
 (Use a separate Summary for each insurer-selected loss cost multiplier.)

10. Check one of the following:

- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and, if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

Insurer Name: Fidelity National Property and Casualty Insurance Company Date: 10/04/04  
 NAIC No. 16578 Group No. 670

INSURER RATE FILING  
 ADOPTION OF ADVISORY ORGANIZATION PROSPECTIVE LOSS COSTS  
 SUMMARY OF SUPPORTING INFORMATION FORM  
 CALCULATION OF COMPANY LOSS COST MULTIPLIER

1. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: Dwelling Fire (non owner-occupied)
2. Loss Cost Modification:  
 A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:  
 (Check One)  
 Without Modification (factor = 1.000)  
 With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) 150%  
 B. Loss Cost Modification Expressed as a Factor: (See Examples Below)

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED, ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 3-7 BELOW.**

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

		Selected Provisions
A. Total Production Expense	25.0	%
B. General Expense	4.0	%
C. Taxes, Licenses & Fees	2.5	%
D. Underwriting Profit & Contingencies*	5.0	%
E. Other (explain)	0	%
F. TOTAL	44.5	%

\* Explain how investment income is taken into account.

4. A. Expected Loss Ratio:  $ELR = 100\% - 3F = A$ . 63.5% %  
 B. ELR in Decimal Form = .635 %

5. Company Formula Loss Cost Multiplier: (2B divided by 4B) = 2.362 %

6. Company Selected Loss Cost Multiplier = 2.362 %  
 Explain any differences between 5 and 6:

\_\_\_\_\_

\_\_\_\_\_

7. Rate level change for the coverages to which this page applies: \_\_\_\_\_ %

Example 1: Loss Cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss Cost Modification Factor: If your company's loss cost modification is +15%, a factor of 1.15 (1.000 + .150) should be used.

Insurer Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 NAIC No. \_\_\_\_\_ Group No. \_\_\_\_\_

**EXPENSE CONSTANT SUPPLEMENT**  
**CALCULATION OF COMPANY LOSS COST MULTIPLIER**  
**WITH EXPENSE CONSTANTS**

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

	Selected Provisions		
	Overall	Variable	Fixed
A. Total Production Expense			%
B. General Expense			%
C. Taxes, Licenses & Fees			%
D. Underwriting Profit & Contingencies*			%
E. Other (explain)			%
F. TOTAL			%

\* Explain how investment income is taken into account.

4. A. Expected Loss Ratio:  $ELR = 100\% - \text{Overall } 3F =$  \_\_\_\_\_ %  
 B. ELR in Decimal Form = \_\_\_\_\_ %  
 C. Variable Expected Loss Ratio:  $VELR = 100\% - \text{Variable } 3F =$  \_\_\_\_\_ %  
 D.  $VELR$  in Decimal Form = B.  $ELR$  in Decimal Form = \_\_\_\_\_ %

5. Formula Expense Constant:  
 $[(1.00 \text{ divided by } 4B) - (1.00 \text{ divided by } 4D)]$   
 $\times$  Average Underlying Loss Cost = \_\_\_\_\_  
 Formula Variable Loss Cost Multiplier:  
 $(2B \text{ divided by } 4D) =$  \_\_\_\_\_

6. Selected Expense Constant = \_\_\_\_\_  
 Selected Variable Loss Cost Multiplier = \_\_\_\_\_

7. Explain any differences between 5 and 6:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Rate level change for the coverages to which this page applies: \_\_\_\_\_ %

## Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b> a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

<b>3. Group Name</b>	<b>Group NAIC #</b>
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4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Fidelity National Property & Casualty Ins. Co.	NY	670-16578	16-0986300	

<b>5. Company Tracking Number</b>	<b>FNAUREF08</b>
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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
	Barb Rosemann	Sr. Product Analyst	800-849-6140 ext. 8316	402-346-0716	barb.rosemann@fnf.com
	2201 Farnam St, Suite 200, Omaha, NE 68102				

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Barb Rosemann

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

9.	Type of Insurance (TOI)	Dwelling Fire
10.	Sub-Type of Insurance (Sub-TOI)	
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	Dwelling Fire
13.	Filing Type File & Use	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input checked="" type="checkbox"/> Other (give description) Reference Filing
14.	Effective Date(s) Requested	New: 01/01/2009    Renewal: 01/01/2009

## Property & Casualty Transmittal Document---

<b>15.</b>	<b>Reference Filing?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>16.</b>	<b>Reference Organization</b> (if applicable)	Insurance Services Office (ISO)
<b>17.</b>	<b>Reference Organization # &amp; Title</b>	DP-2008-RLA1
<b>18.</b>	<b>Company's Date of Filing</b>	09/04/2008
<b>19.</b>	<b>Status of filing in domicile</b>	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	FNAUREF08
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<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Enclosed, as an independent filing for Fidelity National Property and Casualty Insurance Company (FNPAC), is a revision to the Dwelling Fire Program. FNPAC has received notice that the Insurance Services Office (ISO) has received approval for the above referenced filing. FNPAC will be adopting this revision effective January 1, 2009 New and Renewal Business.

To the best of our knowledge, the enclosed material conforms to all departmental requirements. If you have any questions concerning this filing, please contact me toll-free at 1-800-849-6140, ext. 8316 or e-mail at the address below.

Sincerely,

Barb Rosemann  
 Sr. Product Analyst  
 Pricing Department  
 barb.rosemann@fnf.com

<b>22.</b>	<b>Filing Fees</b> (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]
<p><b>Check #:</b> N/A  <b>Amount:</b> \$25.00</p> <p><b>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</b></p>	

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