

ARKANSAS INSURANCE DEPARTMENT  
RATE FILING ABSTRACT

Form RF-1  
Rev. 4/96

Insurer Name: EMCASCO Insurance Company  
 NAIC Number: 062-21407  
 Name of Advisory Organization Whose Filing You are Referencing \_\_\_\_\_  
 Co. Affiliation to Advisory Organization: Member  Subscriber  Service Purchaser   
 Reference Filing #: \_\_\_\_\_ Proposed Effective Date: 10/1/2008

Contact Person: Stephanie McBride  
 Signature: *Stephanie McBride*  
 Telephone No: 800-247-2128 ext 2684

(1) LINE OF INSURANCE By Coverage	(2) Indicated % Rate Level Change	(3) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(4) Expected Loss Ratio	(5) Loss Cost Modification Factor	(6) Selected Loss Cost Multiplier	(7) Expense Constant (If Applicable)	(8) Co. Current Loss Cost Multiplier
Homeowners	-5.9%	-20.3%	<b>FILED</b>  By Becky Harrington at 1:37 pm, 7/16/08  <b>PROPERTY &amp; CASUALTY</b> <b>ARKANSAS INSURANCE DEPARTMENT</b>				
TOTAL OVERALL EFFECT							

N Apply Lost Cost Factors to Future Filings? (Y or N)  
 28.3% Estimated Maximum Rate Increase for any Arkansas Insured (%)  
 -46.2% Estimated Maximum Rate Decrease for any Arkansas Insured (%) Corresponds to Question 3 on RF-2 or RF-WC

5 Year History

Selected Provisions

Year	Policy Count	Rate Change History		AR Earned Premium (000)	Incurred Losses (000)	Arkansas Loss Ratio	Countrywide Loss Ratio	Selected Provisions	
		%	Eff. Date					A.	B.
2003	1,872	18.8%	01/01/03	1,075,370	997,807	92.8%	65.6%	A. Total Production Expense	24.5%
2004	1,592	19.8%	04/15/04	1,090,251	761,479	69.8%	59.7%	B. General Expense	5.5%
2005	1,184	10.1%	11/01/05	1,037,826	778,569	75.0%	60.7%	C. Taxes, License & Fees	3.2%
2006	970			893,745	336,311	37.6%	51.4%	D. Underwriting Profit & Contingencies	2.2%
2007	872	-6.6%	06/01/07	820,699	102,489	12.5%	37.5%	E. Other (explain)	0.4%
								F. TOTAL	35.8%