

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	AR069209
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2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	
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Company Name		Company NAIC Number		
3.	A.	USAA Casualty Insurance Company	B.	200-25968

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)		
4.	A.	19.0 Personal Auto	B.	19.0001 Private Passenger Auto (PPA)

5.			FOR LOSS COSTS ONLY				
(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Residual Bodily Injury	n/a	0.0%					
Uninsured Motorists	n/a	0.0%					
Medical Payments	n/a	0.0%					
Property Damage	n/a	0.0%					
Comprehensive	n/a	0.0%					
Collision	n/a	0.0%					
TOTAL OVERALL EFFECT	n/a	0.0%					

6.		5 Year History	Rate Change History					
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio	
2004	7,058	-5.1	02/06/04	8,615	6,453	74.9	n/a	
2004	7,244	-5.0	10/31/04	9,382	6,118	65.2	n/a	
2005	7,621	0.2	07/03/05	10,614	6,956	65.5	n/a	
2005	8,025	0.0	07/04/05	11,193	5,823	52.0	n/a	
2006	8,618	-2.5	02/01/06	11,334	6,957	61.4	n/a	

7.	
Expense Constants	Selected Provisions (Liab/PhyDam)
A. Total Production Expense	n/a
B. General Expense	n/a
C. Taxes, License & Fees	n/a
D. Underwriting Profit & Contingencies	n/a
E. Other (explain)	
F. TOTAL	n/a

8. n/a Apply Lost Cost Factors to Future filings? (Y or N)
9. n/a Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): N/A
10. n/a Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): N/A