

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	None
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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	N/A
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	Company Name	Company NAIC Number
3.	A. West American	B. 148-44393

	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. Personal	B. Private Passenger Automobile

5.			FOR LOSS COSTS ONLY				
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
COVERAGE (See Instructions)	Indicated % Rate Level Change	Requested % Rate Level Change	Expected Loss Ratio	Loss Cost Modification Factor	Selected Loss Cost Multiplier	Expense Constant (If Applicable)	Co. Current Loss Cost Multiplier
Bodily Injury	+6.9%	+2.3%					
Property Damage	- 1.2%	+0.9%					
Medical Payments	+1.0%	-11.4%					
Uninsured Motorist	- 5.6%	-10.2%					
Comprehensive	+5.9%	+1.3%					
Collision	-10.9%	-2.0%					
TOTAL OVERALL EFFECT	-1.4%	-1.4%					

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
12/00	2,060	+ 11.4%	7/1/02	2,667	2,462	92.3%	69.1%
12/01	1,439	+ 5.7%	2/15/03	2,363	1,693	71.7%	63.7%
12/02	985	+ 0.4%	9/29/03	1,485	1,004	67.6%	64.9%
12/03	954	+ 3.5%	6/1/04	1,382	623	45.1%	72.8%
12/04	837	+ 1.2%	1/15/05	1,349	709	52.5%	65.4%
12/05	792	+ 0.2%	8/29/05	1,250	640	51.2%	61.7%
12/06	706	- 4.3%	8/29/06	1,126	728	64.6%	62.2%

7.		
	Expense Constants	Selected Provisions
	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)	N/A
	F. TOTAL	N/A

8. N Apply Lost Cost Factors to Future filings? (Y or N)
9. **+ 15.0%** Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): Any
10. **-35.1%** Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): 10