

FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	PPA-AR-01-05/30/2008-01	
2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number		
Company Name		Company NAIC Number	
3.	A. Auto-Owners Insurance Company	B. 280-18988	
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. Private Passenger Auto	B. Liability & Physical Damage	

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(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
Bodily Injury	n/a	4.2					
Property Damage	n/a	3.6					
Medical Benefits	n/a	3.3					
Income Disability	n/a	0.1					
Accidental Death	n/a	0.0					
Uninsured Motorist	n/a	6.2					
Underinsured Motorist	n/a	2.9					
UMPD	n/a	0.0					
Comprehensive	n/a	-0.7					
Collision	n/a	-0.5					
Road Trouble Service	n/a	18.9					
Additional Expense	n/a	0.1					
TOTAL OVERALL EFFECT	n/a	2.1					

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
2007	1636	-1.0	11/11/07	1852	1523	82.2	86.8
2006	267	-5.0	07/01/06	632	655	103.6	72.2
2005				21	25	117.2	72.2
2004							65.9
2003							76.6

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

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
 9. 9.7% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): 010
 10. -15.2% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): 010