

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

1.	This filing transmittal is part of Company Tracking #	AR-AR-08
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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. Electric Insurance Company	B.	057-21261

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

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	FOR LOSS COSTS ONLY			
				(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
n/a							
TOTAL OVERALL EFFECT							

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
2005	97	5.7	10/15/05	111	39	35.14%	55.84%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	6.6%
B. General Expense	10.6%
C. Taxes, Licenses & Fees	6.1%
D. Underwriting Profit & Contingencies	5.0
E. Other (explain)	0.1
F. TOTAL	28.4

- 8.** N Apply Loss Cost Factors to Future filings? (Y or N)
- 9.** Estimated Maximum Rate Increase for any Insured (%) Territory (if applicable): 21.6%
- 10.** Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): -5.8%