

**ARKANSAS INSURANCE DEPARTMENT  
RATE FILING ABSTRACT**

Insurer Name: State Automobile Mutual Insurance Company  
 NAIC Number: 25135  
 Name of Advisory Organization Whose Filing You Are Referencing \_\_\_\_\_  
 Co. Affiliation to Advisory Organization: Member  Subscriber  Service Purchaser   
 Reference Filing #: \_\_\_\_\_ Proposed Effective Date: 11/15/08

Contact Person: Bryan Pack  
 Signature: \_\_\_\_\_  
 Telephone No: 800-444-9950 (ext. 5608)

(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
CustomFit Auto Program Combined Single Limit Bodily Injury Property Damage Medical Payments UM/UIM Liability Total	N/A	-0.8% 4.9% 4.6% -0.7% 2.1% 3.5%					
CustomFit Auto Program Other Than Collision Collision Physical Damage Total		2.8% 2.9% 2.8%					
<b>TOTAL OVERALL EFFECT</b>		3.2%					

N/A Apply Loss Cost Factors to Future Filings (Y or N)  
8% Estimated Maximum Rate Increase for any Arkansas Insured (%)  
-26% 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 % Eff. Date	AR Earned Premium (000)	Incurred Losses (000)	Arkansas Loss Ratio	Countrywide Loss Ratio	A.	Total Production Expense	
2002	N/A	N/A N/A	N/A	N/A	--	62.9%	B.	General Expense	
2003	N/A	N/A N/A	N/A	N/A	--	62.0%	C.	Taxes, License & Fees	
2004	N/A	N/A N/A	N/A	N/A	--	50.0%	D.	Underwriting Profit & Contingences	
2005	N/A	N/A N/A	N/A	N/A	--	53.4%	E.	Other (explain)	
2006	363	0 11/15/2006	35	25	71.4%	50.7%	F.	TOTAL	
2007	2,478	-8.9 11/15/2007	2257	1533	67.9%	47.0%			