

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	PA-AR-08269-61R
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
	Company Name	Company NAIC Number
3.	A. Allmerica Financial Benefit Insurance Company	B. 0088-41840
	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

5.

(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
BI	5.2%	2.5%	N/A	N/A	N/A	N/A	N/A
PD	20.6%	10.0%					
UM / UIM	8.0%	5.0%					
PIP	10.9%	10.0%					
Comp	14.9%	8.0%					
Coil	5.9%	2.0%					
TOTAL OVERALL EFFECT	9.2%	4.3%					

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
2006	89	N/A	N/A	12	5	40.2%	60.6%
2007	3376	-18.9%	05/01/07	1583	1076	68.0%	62.8%
2007		3.0%	11/05/07				

7. Liability Physical Damage

Expense Constants	Selected Provisions	Selected Provisions
A. Total Production Expense	14.0%	14.0%
B. General Expense	9.5%	9.6%
C. Taxes, License & Fees	3.0%	3.0%
D. Underwriting Profit & Contingencies	0.4%	3.8%
E. Other (explain) Residual Market ULAE	0.2% 8.0%	0.2% 9.5%
F. TOTAL	35.1%	40.1%

8. N Apply Lost Cost Factors to Future filings? (Y or N)
9. 25.8% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): 25
10. -2.7% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): 16