SUMMARY OF SUPPORTING INFORMATION FORM

State of Wisconsin
Office of the Commissioner of Insurance
P.O. Box 7873
Madison, WI 53707-7873
(608) 266-3585

Ref: Section 601.42 (2), Wis. Stat.

Insurer Name	NAIC Number	Date

		INSURER RATE FILING ADOPTION OF RATE SERVICE ORGANIZATION PROSPECTIVE LOSS COSTS SUMMARY OF SUPPORTING INFORMATION FORM		
		CALCULATION OF COMPANY LOSS COST MULTIPLIER		
1.	Lin	ne, Subline, Coverage, Territory, Class, etc., combination to which this page applies:		
2.	Los	Loss Cost Modification:		
	A.	The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:		
		(check one) Without modification. (factor = 1.000)		
		With the following modification(s). (Cite the nature and percent modification, and attach supportationale for the modification.)	rting data and/or	
	B.	Loss Cost Modification Expressed as a Factor:(See examples below.)		
NOT		IF EXPENSE CONSTANTS ARE UTILIZED, ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OT INFORMATION. DO NOT COMPLETE ITEMS 3-7 BELOW.	HER SUPPORTING	
3.	B. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)			
			Selected Provisions	
	A. B. C. D. E.	Total Production Expense General Expense Taxes, Licenses, and Fees Underwriting Profit and Contingencies Other (explain)	<u>%</u> % %	
	F.	TOTAL		
4.	A.	Expected Loss Ratio: ELR = 100% – 3F	%	
	B.	ELR in decimal form		
5.	Со	ompany Formula Loss Cost Multiplier: (2B ÷ 4B)		
6.		plain any differences between 5 and 6:		
7.	Ra	ate level change for the coverages to which this page applies	<u> </u>	

Example 1: Loss Cost modification factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used. Example 2: Loss Cost modification factor: If your company's loss cost modification is +15%, a factor of 1.15 (1.000 + .150) should be used.