

193R Application Spreadsheet															
Year Plan Will be Applied															
	2011														
INSURANCE COMPANY*	GROUP NAME*	STREET ADDRESS	CITY/TOWN	STATE	ZIP	AUTO (A) or HOME (H)	PROPOSED RATE DEV. (0.0%)	PROPOSED EFFECTIVE DATE	CU, E,M,U GROUP TYPE**	TOTAL NUMBER IN GROUP	ELIGIBLE NUMBER IN GROUP	NUMBER OF CURRENT INSUREDS	ORIGINAL PLAN DATE	AGENCY OR MKT. REP.	EXPERIENCE SUBMITTED YES OR NO
The Premier Insurance Company of Massachusetts	Digital Federal Credit Union	220 Donald Lynch Boulevard	Marlborough	MA	01752	A	4.0	11/1/2011	CU	143,000	76,319	0		DCU Financial Insurance Services, LLC	No
The Premier Insurance Company of Massachusetts	Central One Federal Credit Union	714 Main Street	Shrewsbury	MA	01545	A	4.0	11/1/2011	CU	23,000	21,000	0		Oak Tree Insurance Agency, LLC	No
The Premier Insurance Company of Massachusetts	Morgan Stanley	522 5th Ave, 23rd Floor	New York	NY	10036	A	4.0	11/1/2011	E	46,000	1,040	0		CFN/You Decide	No
The Premier Insurance Company of Massachusetts	Covidien	15 Hampshire St, Bldg 4, Flr 1	Mansfield	MA	02048	A	4.0	11/1/2011	E	17,785	1775	0		CFN/You Decide	No

EXPENSE EXHIBIT FOR ALL AUTO & HOME 193R GROUP MARKETING PLANS					
Year Plan Will be Applied		2011			
Insurers are required to submit the expense ratios underlying their current rates and the expense ratio or average expense per unit associated with the group marketing plan					
		(1)	(2)	(3)	(4)
INSURANCE		Expenses Assumed	Expenses Associated	Reasons for	Requested
COMPANY	GROUPNAME	In Insurer's Rates	With Group Marketing	Expensed	Group Rate
		Currently On File	Plan	Difference	Deviation
The Premier Insurance Company of Massachusetts	Digital Federal Credit Union	28.2	23.2	Reduced Commission	4.0
The Premier Insurance Company of Massachusetts	Central One Federal Credit Union	28.2	23.2	Reduced Commission	4.0
The Premier Insurance Company of Massachusetts	Morgan Stanley	28.2	16.7	Reduced Commission	4.0
The Premier Insurance Company of Massachusetts	Covidien	28.2	16.7	Reduced Commission	4.0