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9	Attorneys for CONSUMER WATCHDOG	
10		
11	BEFORE THE IN	SURANCE COMMISSIONER
12	OF THE ST	TATE OF CALIFORNIA
13		
14	In the Matter of the Rate Applications of	File Nos.: PA-2024-00011, PA-2024-00012, PA-2024-00013
15	State Farm General Insurance Company,	DECLARATION OF RYAN MELLINO IN
16	Applicant.	SUPPORT OF CONSUMER WATCHDOG'S REPLY IN SUPPORT OF
17		MOTION TO EXCLUDE TESTIMONY
18		REGARDING RBC CALCULATIONS
19		Hearing Date/Time: April 10, 2025 10:00 a.m.
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MELLINO DECLARATION ISO MOTION TO EXCLUDE TESTIMONY REGARDING RBC CALCULATIONS

I, Ryan Mellino, declare as follows:

- 1. I am an active member in good standing of the Bar of the State of California. I am a Staff Attorney with Consumer Watchdog and am one of the counsel for intervenor Consumer Watchdog in the above-captioned matters. I have personal knowledge of the facts set forth herein, and, if called upon, could and would competently testify thereto under oath.
- 2. Attached as **Exhibit A** is a true and correct copy of relevant excerpts of the RBC Instructions obtained from the National Association of Insurance Commissioner's website, available at https://content.naic.org/publications?name=risk-based+capital&field_publication_category_target_id=All, document RBCP-2024 listed in the drop down menu.

I declare under penalty of perjury that the foregoing is true and correct and that this Declaration was executed on April 10, 2025 in Los Angeles, California.

DATED: April 10, 2025

CONSUMER WATCHDOG

/s/ Ryan Mellino

Ryan Mellino (SBN: 342497) ryan@consumerwatchdog.org 6330 San Vicente Blvd., Suite 250 Los Angeles, CA 90048 Tel: (310) 392-0522

Attorneys for Intervenor CONSUMER WATCHDOG



PROPERTY / CASUALTY

2024

RBC

Risk-Based Capital

Forecasting and Instructions





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CAPITAL NOTES BEFORE LIMITATION PR028

	Years to Maturity at the Time of the Statement	(1) Original Principal <u>Amount</u>	Limitation <u>Factor</u>	(2) Limitation on Principal Amount	(3) Current Principal Amount	(4) Credit to Total Adjusted Capital*
	Capital Notes Maturing 15 Years or less from the Year of Issue		_			
(1)	Greater than 0 and less than or equal to 1		0.00	(0	0
(2)	Greater than 1 and less than or equal to 2		0.20	(0	0
(3)	Greater than 2 and less than or equal to 3		0.40	(0	0
(4)	Greater than 3 and less than or equal to 4		0.60	(0	0
(5)	Greater than 4 and less than or equal to 5		0.80	(0	0
(6)	Greater than 5		0 1.00	(0	0
	Capital Notes Maturing more than 15 Years from the Year of Issue		_			
(7)	Greater than 0 and less than or equal to 1		0.00	(0	0
(8)	Greater than 1 and less than or equal to 2		0.10	(0	0
(9)	Greater than 2 and less than or equal to 3		0.20	(0	0
(10)	Greater than 3 and less than or equal to 4		0.30	(0	0
(11)	Greater than 4 and less than or equal to 5		0.40	(0	0
(12)	Greater than 5 and less than or equal to 6		0.50	(0	0
(13)	Greater than 6 and less than or equal to 7		0.60	(0	0
(14)	Greater than 7 and less than or equal to 8		0.70	(0	0
(15)	Greater than 8 and less than or equal to 9		0.80	(0	0
(16)	Greater than 9 and less than or equal to 10		0.90	(0	0
(17)	Greater than 10		1.00	(0	0
(18)	Credit for Capital Notes Before Limitation		0	() 0	0

Column (4) is calculated as the lesser of Column (2) or Column (3). Denotes items that must be manually entered on the filing software.

(sum of lines (1) through (17))

CALCULATION OF TOTAL ADJUSTED CAPITAL PR029

CALCU	LATION OF TOTAL ADJUSTED CATITAL TRUZ		(1)		(2)
		Annual Statement Reference	(1) Statement Value*	Factor	(2) <u>Adjusted Capital</u>
					
(1)	Capital and Surplus	P3 C1 L37	0	1.000	0
(2)	Non-Tabular Discount - Losses	Sch P P1-Sum C32 L12	0	1.000	0
(3)	Non-Tabular Discount - Expense	Sch P P1-Sum C33 L12	0	1.000	0
(4)	Discount on Medical Loss Reserves Reported as Tabular in				
	Schedule P	Company Records	0	1.000	0
(5)	Discount on Medical Expense Reserves Reported as Tabular in				
	Schedule P	Company Records	0	1.000	0
(6)	P&C Subs Non-Tabular Discount - Losses	Subs' Sch P Pt1-Sum C32 L12	0	1.000	0
(7)	P&C Subs Non-Tabular Discount - Expense	Subs' Sch P Pt1-Sum C33 L12	0	1.000	0
(8)	P&C Subs Discount on Medical Loss Reserves Reported as				
	Tabular in Schedule P	Subs' Company Records	0	1.000	0
(9)	P&C Subs Discount on Medical Expense Reserves Reported as	1 7			
()	Tabular in Schedule P	Subs' Company Records	0	1.000	0
(10)	AVR - Life Subs §	Subs P3 C1 L24.01 §	0	1.000	0
(11)	Dividend Liability - Life Subs	Subs P3 C1 L6.1 + L6.2	0	0.500	
(12)	Carrying Value of Non-Admitted Insurance Affiliates	Included in PR003 Column 5 and Column 9	0	1.000	
(12)	Carrying value of Non-Administratice Arminates	included in I Roos Column 5 and Column 5	U	1.000	
(13)	Total Adjusted Capital Before Capital Notes L(1)-L(2)-L(3)-L(4)-L(5)-L(6)-L(7)-L(8)-L(9)+L(10)+L(11)+L(12)-L(12)-L(12)-L(13)-L(13)-L(14)-L(13)-L(14)-L(14)-L(15)-L(16)-L				0
(-)	2(1) 2(2) 2(1) 2(0) 2(1) 2(0) 2(1) 2(1) 2(1)	,			
	Credit for Capital Notes				
(14.1)	Surplus Notes	Page 3 Column 1 Line 33	0		
(14.2)	Limitation on Capital Notes	0.5x[Line(13)-Line(14.1)]-Line 14.1, but not less than zero	0		
(14.3)	Capital Notes Before Limitation	PR028 Column (4) Line (18)	0		
(14.4)	Credit for Capital Notes	Lesser of Column (1) Line (14.2) or Line (14.3)			0
	•				
(15)	Total Adjusted Capital (Post-Deferred Tax)	Line (13) + Line (14.4)			0
	Sensitivity Test:				
(16)	Deferred Tax Assets	Page 2, Column 3, Line 18.2	0	1.000	0
(16.1)	Deferred Tax Liabilities	Page 3, Column 1, Line 7.2	0	1.000	0
(17)	Deferred Tax Assets for Subsidiary	Company Record	0	1.000	0
(17.1)	Deferred Tax Liabilities for Subsidiary	Company Record	0	1.000	0
(18)	Total Adjusted Capital For Sensitivity Test	Line (15) - Line (16)+(16.1)-(17)+(17.1)			0
	Ex DTA ACL RBC Ratio Sensitivity Test				
(19)	Deferred Tax Asset	Page 2 Column 3 Line 18.2	0	1.000	0
(20)	Total Adjusted Capital Less Deferred	Line (15) less Line (19)			0
	Tax Asset				
(21)	Authorized Control Level RBC	PR034 Comparison of Total Adjusted Capital to Risk-Based Capital Line (4)			0
(22)	Ex DTA ACL RBC Ratio	Line (20) / Line (21)			0.000%
. ,					

^{*} Report amounts in this column as whole dollars.

Denotes items that must be manually entered on the filing software.

[§] The portion of the AVR that can be counted as capital is limited to the amount not utilized in asset adequacy testing in support of the Actuarial Opinion for reserves.

Calculation of Total Risk-Based Capital After Covariance PR030 R0-R1

1	1	`	

R0 - Sul	bsidiary Insurance Companies and Misc. Other Amounts	PRBC O&I Reference	RBC Amount
(1)	Directly Owned Property and Casualty Insurance Affiliates	PR004 L(2)C(2)	0
(2)	Indirectly Owned Property and Casualty Insurance Affiliates	PR004 L(5)C(2)	0
(3)	Directly Owned Life Insurance Affiliates	PR004 L(3)C(2)	0
(4)	Indirectly Owned Life Insurance Affiliates	PR004 L(6)C(2)	0
(5)	Directly Owned Health Insurance Companies or Health Entities	PR004 L(1)C(2)	0
(6)	Indirectly Owned Health Insurance Companies or Health Entities	PR004 L(4)C(2)	0
(7)	Directly Owned Alien Insurance Companies or Health Entities	PR004 L(9)+L(10)+L(11)C(2)	0
(8)	Indirectly Owned Alien Insurance Companies or Health Entities	PR004 L(12)+L(13)+L(14)C(2)	0
(9)	Misc Off-Balance Sheet - Non-controlled Assets	PR014 L(15) C(3)	0
(10)	Misc Off-Balance Sheet - Guarantees for Affiliates	PR014 L(16) C(3)	0
(11)	Misc Off-Balance Sheet - Contingent Liabilities	PR014 L(17) C(3)	0
(12)	Misc Off-Balance Sheet - SSAP No.101 Par. 11A DTA	PR014 L(19) C(3)	0
(13)	Misc Off-Balance Sheet - SSAP No.101 Par. 11B DTA	PR014 L(20) C(3)	0
(14)	Total R0	L(1)+L(2)+L(3)+L(4)+L(5)+L(6)+L(7)+L(8)+L(9)+L(10)+L(11)+L(12)+L(13)	0
R1 - Ass	set Risk - Fixed Income		
	Bonds Subject to Size Factor	PR006 L(27)C(5)	0
(16)	Bond Size Factor RBC	PR006 L(30)C(5)	0
(17)	Off-balance Sheet Collateral & Sch DL, PT1 - Total Bonds	PR015 L(27)C(4)	0
(18)	Off-balance Sheet Collateral & Sch DL, PT1 - Cash, & Short-Term Investments and Mort Loans on Real Est.	PR015 L(38)+(39)C(4)	0
(19)	Other Long-Term Assets - Mortgage Loans, LIHTC, & WCFI, & Residual Tranches or Interests	PR008 L(10)+L(13)+L(14)+L(15)+L(16)+L(17)+L(19)+L(21)+L(22)C(2)	0
(20)	Misc Assets - Collateral Loans	PR009 L(13)C(2)	0
(21)	Misc Assets - Cash	PR009 L(3)C(2)	0
(22)	Misc Assets - Cash Equivalents	PR009 L(7)C(2)	0
(23)	Misc Assets - Other Short-Term Investments	PR009 L(10)C(2)	0
(24)	Replication - Synthetic Asset: One Half	PR010 L(9999999)C(7)	0
(25)	Asset Concentration RBC - Fixed Income	PR011 L(21)C(3) Grand Total Page	0
(==)	 		
(26)	Total R1	L(15)+L(16)+L(17)+L(18)+L(19)+L(20)+L(21)+L(22)+L(23)+L(24)+L(25)	0

Calculation of Total Risk-Based Capital After Covariance PR031 R2-R3

|--|

			(-)
R2 - Asse	t Risk - Equity	PRBC O&I Reference	RBC Amount
(27)	Common & Preferred- Affiliate Investment Subsidiary	PR004 L(8)C(2)	
(28)	Common & Preferred- Affiliate Holding Company in excess of Indirect Subs	PR004 L(7)C(2)	
(29)	Common & Preferred- Investment in Parent	PR004 L(15)C(2)	
(30)	Common & Preferred- Aff'd US P&C Not Subj to RBC	PR004 L(17)C(2)	
(31)	Common & Preferred- Affil US Life Not Subj to RBC	PR004 L(18)C(2)	
(32)	Common & Preferred- Affil US Health Insurer Not Subj to RBC	PR004 L(16)C(2)	
(33)	Common & Preferred- Aff'd Non-insurer	PR004 L(19)+L(20)+L(21)C(2)	
(34)	Unaffiliated Preferred Stock	PR007 L(7)C(2)+PR015 L(34)C(4)	
(35)	Total Unaffiliated Common Stock and Fair Value Excess Affiliated Stocks	PR007 L(13)C(2)+PR015 L(35)C(4)	
(36)	Other Long -Term Assets - Real Estate	PR008 L(7)C(2)	
(37)	Other Long -Term Assets - Schedule BA Assets	PR008 L(20)C(2)+PR015 L(36)+L(37)C(4)	
(38)	Misc Assets - Receivable for Securities	PR009 L(1)C(2)	
(39)	Misc Assets - Aggregate Write-ins for Invested Assets	PR009 L(2)C(2)	
(40)	Misc Assets - Derivatives	PR009 L(14)C(2)	
(41)	Replication - Synthetic Asset: One Half	PR010 L(9999999)C(7)	
(42)	Asset Concentration RBC - Equity	PR011 L(33)C(3) Grand Total Page	
		L(27)+L(28)+L(29)+L(30)+L(31)+L(32)+L(33)+L(34)	
(43)	Total R2	+L(35)+L(36)+L(37)+L(38)+L(39)+L(40)+L(41)+L(42)	
R3 - Asse	t Risk - Credit		
(44)	Other Credit RBC	PR012 L(8)-L(1)-L(2)C(2)	
(45)	One half of Rein Recoverables	0.5 x (PR012 L(1)+L(2)C(2))	
(46)	Other half of Rein Recoverables	If R4 L(50)>(R3 L(44) + R3 L(45)), 0, otherwise, R3 L(45)	
(47)	Health Credit Risk	PR013 L(12)C(2)	
(48)	Total R3	L(44) + L(45) + L(46) + L(47)	

Calculation of Total Risk-Based Capital After Covariance PR032 R4-Rcat

	•		(1)
R4 - Und	erwriting Risk - Reserves	PRBC O&I Reference	RBC Amount
(49)	One half of Reinsurance RBC	If R4 L(50)>(R3 L(44) + R3 L(45)), R3 L(45), otherwise, 0	
(50)	Total Adjusted Unpaid Loss/Expense Reserve RBC	PR017 L(15)C(20)	
(51)	Excessive Premium Growth - Loss/Expense Reserve	PR016 L(13) C(8)	
(52)	A&H Claims Reserves Adjusted for LCF	PR024 L(5) C(2) + PR023 L(6) C(4)	
(53)	Total R4	L(49)+L(50)+L(51)+L(52)	
R5 - Und	erwriting Risk - Net Written Premium		
(54)	Total Adjusted NWP RBC	PR018 L(15)C(20)	
(55)	Excessive Premium Growth - Written Premiums Charge	PR016 L(14)C(8)	
(56)	Total Net Health Premium RBC	PR022 L(21)C(2)	
(57)	Health Stabilization Reserves	PR025 L(8)C(2) + PR023 L(3) C(2)	
(58)	Total R5	L(54)+L(55)+L(56)+L(57)	
Rcat - Ca	tastrophe Risk		
(59)	Total Reat	PR027 L(5) C(1)	
(60)	Total RBC After Covariance Before Basic Operational Risk = R0+SQRT(R	1^2+R2^2+R3^2+R4^2+R5^2+Rcat^2)	
(61)	Basic Operational Risk = 0.030 x L(60)		
(62)	C-4a of U.S. Life Insurance Subsidiaries (from Company records)		
(63)			
(64)	Total RBC After Covariance including Basic Operational Risk = $L(60)+L(60)$	53)	
(65)	Authorized Control Level RBC including Basic Operational Risk = .5 x L(6	4)	

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PR032

(1)

(2)

TREND TEST PR033

	Original RBC % Before Applying Trend Test	Annual Statement Source	Amount	Result
(1)	Authorized Control Level Risk-Based Capital Including Basic Operational Risk	PR032, C(1) L(65)	0	
(2)	Total Adjusted Capital	PR029, C(2) L(15)	0	
(3)	RBC %	L(2)C(1) / L(1)C(1)	0.000%	
	Combined Ratio Data			
(4)	Premiums Earned	Pg 4, Col 1, L 1	0	
(5)	Losses Incurred	Pg 4, Col 1, L 2	0	
(6)	Loss Expenses Incurred	Pg 4, Col 1, L 3	0	
(7)	Other Underwriting Expenses Incurred	Pg 4, Col 1, L 4	0	
(8)	Aggregate Write-ins for Underwriting Deductions	Pg 4, Col 1, L 5	0	
(9)	Dividends to Policyholders	Pg 4, Col 1, L 17	0	
(10)	Net Written Premiums	Pg 8, Col 6, L 35	0	
	Combined Ratio Calculation			
(11)	Loss Ratio	[Pg 4, Col 1, L 2 + Pg 4, Col 1, L 3] / Pg 4, Col 1, L 1	0.000%	
(12)	Dividend Ratio	Pg 4, Col 1, L 17 / Pg 4, Col 1, L 1	0.000%	
(13)	Expenses Ratio	[Pg 4, Col 1, L 4 + Pg 4, Col 1, L 5] / Pg 8, Col 6, L 35	0.000%	
(14)	Combined Ratio	L(11) + L(12) + L(13)	0.000%	

If L(3) Between 200% & 300% & L(14) >120%, L(15), YES, Otherwise, NO

†The Trend Test applies only if L(15) = YES

(15) Trend Test Result †

‡If result = YES, the company triggers regulatory attention at the Company Action Level based on the trend test.

COMPARISON OF TOTAL ADJUSTED CAPITAL TO RISK-BASED CAPITAL PR034

Excluding the Trend Test:

		Abbreviation	(1) <u>Amount</u>
(1)	Total Adjusted Capital (Post-Deferred Tax: PR029 Line 15)		0
(2)	Company Action Level=200% of Authorized Control Level	CAL	0
(3)	Regulatory Action Level=150% of Authorized Control Level	RAL	0
(4)	Authorized Control Level=100% of Authorized Control Level	ACL	0
(5)	Mandatory Control Level=70% of Authorized Control Level	MCL	0
(6)	Level of Action, if Any (excluding the trend test)		NONE
Including	g the Trend Test:		
(7)	Level of Action, if Any (including the trend test)		NONE

THE FOLLOWING NUMBERS MUST BE REPORTED IN THE FIVE YEAR HISTORY EXHIBIT ON THE INDICATED LINE

Total Adjusted Surplus to Policyholders	Five Yr Hist C1 L28	L(1)C(1)	0
Authorized Control Level Risk-Based Capital	Five Yr Hist C1 L29	L(4)C(1)	0

PROOF OF SERVICE BY OVERNIGHT OR U.S. MAIL, FAX TRANSMISSION, EMAIL TRANSMISSION AND/OR PERSONAL SERVICE

State of California, City of Los Angeles, County of Los Angeles

I am employed in the City and County of Los Angeles, State of California. I am over the age of 18 years and not a party to the within action. My business address is 6330 South San Vicente Boulevard, Suite 250, Los Angeles, California 90048, and I am employed in the city and county where this service is occurring.

On April 10, 2025, I caused service of true and correct copies of the document entitled

DECLARATION OF RYAN MELLINO IN SUPPORT OF CONSUMER WATCHDOG'S REPLY IN SUPPORT OF MOTION TO EXCLUDE TESTIMONY REGARDING RBC CALCULATIONS

upon the persons named in the attached service list, in the following manner:

- 1. If marked FAX SERVICE, by facsimile transmission this date to the FAX number stated to the person(s) named.
- 2. If marked EMAIL, by electronic mail transmission this date to the email address stated.
- 3. If marked U.S. MAIL or OVERNIGHT or HAND DELIVERED, by placing this date for collection for regular or overnight mailing true copies of the within document in sealed envelopes, addressed to each of the persons so listed. I am readily familiar with the regular practice of collection and processing of correspondence for mailing of U.S. Mail and for sending of Overnight mail. If mailed by U.S. Mail, these envelopes would be deposited this day in the ordinary course of business with the U.S. Postal Service. If mailed Overnight, these envelopes would be deposited this day in a box or other facility regularly maintained by the express service carrier, or delivered this day to an authorized courier or driver authorized by the express service carrier to receive documents, in the ordinary course of business, fully prepaid.

I declare under penalty of perjury that the foregoing is true and correct. Executed on April 10, 2025 at Los Angeles, California.

Kaitlyn Gentile

Service List 1 2 Hon. Karl Fredric J. Seligman FAX Administrative Law Judge U.S. MAIL 3 Administrative Hearing Bureau **OVERNIGHT MAIL California Department of Insurance** HAND DELIVERED 4 1901 Harrison Street, 3rd Floor M EMAIL 5 Oakland, CA 94612 Tel.: (415) 538-4243 6 Fax: (510) 238-7828 Florinda.Cristobal@insurance.ca.gov 7 Camille.Johnson@insurance.ca.gov 8 Vanessa Wells FAX 9 Victoria Brown U.S. MAIL **Hogan Lovells US LLP OVERNIGHT MAIL** 10 855 Main Street, Suite 200 HAND DELIVERED 11 Redwood City, CA 94063 **EMAIL** Tel.: (650) 463-4000 12 Fax: (650) 463-4199 Vanessa. Wells@hoganlovells.com 13 Victoria.Brown@hoganloverlls.com 14 Attorneys for Applicant 15 Katherine Wellington FAX 16 **Hogan Lovells US LLP** U.S. MAIL 17 125 High Street, Suite 2010 **OVERNIGHT MAIL** Boston, MA 02110 HAND DELIVERED 18 Tel.: (617) 371-1000 \boxtimes EMAIL Fax: (617) 371-1037 19 Katherine.Wellington@hoganlovells.com 20 Attorneys for Applicant 21 22 Jordan D. Teti FAX **Hogan Lovells US LLP** U.S. MAIL 23 1999 Avenue of the Stars, Suite 1400 OVERNIGHT MAIL Los Angeles, CA 90067 HAND DELIVERED 24 Tel.: (310) 785-4600 ⊠ EMAIL 25 Fax: (310) 785-4601 Jordan.Teti@hoganlovells.com 26 Attorneys for Applicant 27 28 2

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	PRO	OOF OF SERVICE	