COAL MINE COMPENSATION RATING BUREAU OF PENNSYLVANIA

COMMERCE BUILDING – SUITE 403 300 NORTH SECOND STREET HARRISBURG, PENNSYLVANIA 17101

CHARLES A. ROMBERGER EXECUTIVE DIRECTOR

Date: _____

TELEPHONE/FAX 717-238-5020

March 1, 2013

COMPENSATION CIRCULAR CM-452

To:	All Coal Mine Compensation Insurance Carriers
From:	Charles A. Romberger, Executive Director Challes A Romberger
Net Di of audi of estin	Please report for the calendar year 2012, Pennsylvania Workers' Compensation Insurance rect Written Premiums (prior to reinsurance). This report should be prepared on the basis ited payrolls, if available. If the audits have not been completed, please report on the basis mated payroll and identify your entry on this report by including an "E" after the estimated am figure. The completed report needs to be returned to this office no later than May 16,
the spa	All member companies must submit the report. If "NONE" is appropriate, so indicate in aces provided.
	The Net Direct Written Premiums must be separated as follows:
	Pennsylvania Coal Mine Compensation Classification Codes 1010, 1001, 1012, 1014, 1469, 1015, 1021, 1023, 1025 and 1027
	Pennsylvania Coal Mine Occupational Disease Classification Codes 1011, 1002, 1016, 1013, 1017, 1019, 1022, 1024, 1026 and 1028
	Federal Coal Mine Occupational Disease Classification Codes 0160, 0158, 0153, 0156, 0154, 0157, 0181, 0182, 0183, and 0184
	TOTAL
	"Pennsylvania Workers' Compensation Insurance" includes both <u>assigned</u> and <u>voluntary</u> workers' compensation insurance and employers' liability insurance <u>written</u> in conjunction with workers' compensation insurance on coal mining classifications and operations incidental thereto.
Report	ing Company:
Printed	l Name and Title of Company Officer:
Signati	ure of Company Officer:

Telephone number & e-mail address: