



Medical Assurance, Inc.

800/282-6242  
Fax 205/802-4799  
www.MedicalAssurance.com

December 21, 2005

Ref:   
Dep: COMPLIANCE

Date: 12/21/2005  
Wgt: 1.0 LBS

SHIPPING:	8.20
SPECIAL:	1.64
HANDLING:	0.00
TOTAL:	9.84

DV: 0.00

Svcs: \*\* 2DAY \*\*  
TRCK: 7109 3202 8264

Mr. Richard Ford  
Alabama Department of Insurance  
201 Monroe Street, Suite 1700  
Montgomery, Alabama 36104

RE: Form A - ProAssurance/Physicians Insurance Company of Wisconsin, Inc.  
dated December 21, 2005  
**Courtesy Copy**

Dear Mr. Ford:

Please accept the attached courtesy copy of the Form A filing on behalf of The Medical Assurance Company, Inc., Red Mountain Casualty Insurance Company, Inc. and Woodbrood Casualty Insurance, Inc.

The Form A was filed with the Insurance Commissioner of Wisconsin on December 21, 2005.

Please let me know if you have any questions. My direct line is (800) 282-6242, ext. 4422.

Sincerely,

Kathryn A. Neville  
Secretary



**ProNational®**

INSURANCE COMPANY

A ProAssurance Company

**ProNational Insurance Company**

205/877-4400

800/282-6242

Fax 205/802-4799

[www.ProNational.com](http://www.ProNational.com)

December 21, 2005

Ms. Judy Weaver  
Michigan Office of Financial and Insurance Services  
P.O. Box 30220  
Lansing, Michigan 48909

RE: Form A – ProAssurance/Physicians Insurance Company of Wisconsin,  
Inc. dated December 21, 2005  
**Courtesy Copy**

Dear Ms. Weaver:

Please accept the attached courtesy copy of the Form A filing on behalf of ProNational Insurance Company and MEEMIC Insurance Company.

The Form A was filed with the Insurance Commissioner of Wisconsin on December 21, 2005.

Please let me know if you have any questions. My direct line is (800) 282-6242, ext. 4422.

Sincerely,

Kathryn A. Neville  
Secretary  
ProNational Insurance Company



ProAssurance Corporation

205/877-4400  
800/282-6242  
Fax 205/802-4799  
www.ProAssurance.com

Ref:	Date: 12/21/2005	SHIPPING:	9.40
Dep: COMPLIANCE	Wgt: 1.0 LBS	SPECIAL:	1.88
	DV:	HANDLING:	0.00
		TOTAL:	11.28

December 21, 2005

Svcs: \*\* 2DAY \*\*  
TRCK: 7109 3202 8161

Commissioner Linda Watters  
Office of Financial and Insurance Services  
Attn: Office of the Commissioner  
611 West Ottawa Street, 3<sup>rd</sup> Floor  
Lansing, Michigan 48933

RE: Form A – ProAssurance/Physicians Insurance Company of Wisconsin,  
Inc. dated December 21, 2005  
Courtesy Copy

Dear Commissioner:

Please accept the attached courtesy copy of the Form A filing on behalf of Physicians Insurance Company of Wisconsin, Inc.

The Form A was filed with the Insurance Commissioner of Wisconsin on December 21, 2005.

Please let me know if you have any questions. My direct line is (800) 282-6242, ext. 4422.

Sincerely,

Kathryn A. Neville  
ProAssurance Corporation

Enclosure