

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

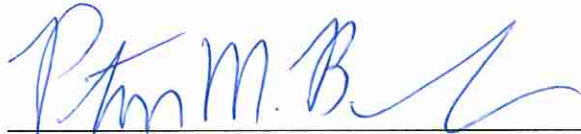
IN RE: Rockwood Insurance Company, :
In Liquidation : No. 1 ROC 1990

PRAECIPE TO SUPPLEMENT EXHIBIT

To the Prothonotary:

Please supplement Exhibit B that was filed with the Liquidator's Application to Approve the Final Determined Amounts of Claims of Guaranty Associations Affected by the Insolvency of Rockwood Insurance Company on February 13, 2017, with the attached information.

Respectfully submitted:



PRESTON M. BUCKMAN (I.D. #57570)
Governor's Office of General Counsel
Pennsylvania Insurance Department
Capitol Associate Building
901 North 7th Street
Harrisburg, PA 17102
(717) 787-6009

Attorney for Teresa D. Miller, Insurance
Commissioner of the Commonwealth of
Pennsylvania, in her official capacity as Statutory
Liquidator of Rockwood Insurance Company

Dated: March 22, 2017

SUPPLEMENT TO EXHIBIT B

IN THE MATTER OF Rockwood Insurance Compa

ALABAMA INSURANCE GUARANTY ASSOCIATION
2020 CANYON ROAD
SUITE 200
BIRMINGHAM, AL 35216

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000384

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 407,928.00.
Comments: ADMIN EXPENSE CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

AC Sentine 12/12/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

ALASKA INSURANCE GUARANTY FUND
C/O NORTHERN ADJUSTERS
1401 RUDAKOF CIRCLE - SUITE 100
ANCHORAGE, AK 99508

DATE: 01/31/2017
PROOF OF CLAIM #: 1000000383

NOTICE OF CLAIM EVALUATION

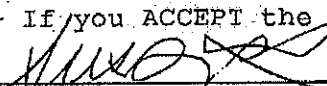
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 12,496.13.
Comments: updated notice of claim evaluation

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature

1/31/2017
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

ARIZONA P & C INSURANCE GUARANTY FUND
2910 N 44TH STREET, SECOND FL
PHOENIX, AZ 85018

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000385

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 9,213.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Michael E. Sengier 12/12/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

ARKANSAS P&C GUARANTY FUND
1023 WEST CAPITOL AVE
SUITE 2
LITTLE ROCK, AR 72201

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000386

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 503,725.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Steve A. Ulynowy 12/8/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000388

COLORADO INS. GUARANTY ASSOCIATION
C/O WESTERN GUARANTY FUND SERVICES
1720 SOUTH BELLAIRE STREET
SUITE 408
DENVER, CO 80222

NOTICE OF CLAIM EVALUATION

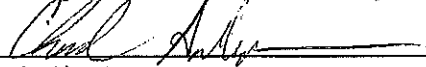
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 49,147.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

 12/8/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DELAWARE INS GUARANTY ASSOC
220 CONTINENTAL DRIVE
SUITE 309
NEWARK, DE 19713

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000389

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 327,098.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

R. Barry R. Miller 12/13/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

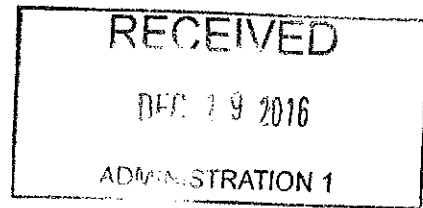
The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

FLORIDA INSURANCE GUARANTY ASSOC
P O BOX 15159
TALLAHASSEE, FL 323175159

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000390



NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 900,239.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Sandra Robinson 12/8/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for Rockwood Insurance Compa (in Liquidation), 901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

GEORGIA INSURERS INSOLVENCY POOL
3700 CRESTWOOD PARKWAY NW
SUITE 400
DULUTH, GA 30096

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000391

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 579,009.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.
Georgia Insurers Insolvency Pool, by:

Michael D. Archman 12/14/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/05/2016

IDAHO INSURANCE GUARANTY ASSOC
C/O WESTERN GUARANTY FUND SERVICES
1720 SOUTH BELLAIRE STREET
SUITE 408
DENVER, CO 80222

PROOF OF CLAIM #: 1000000392

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 304.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Charles Ann 12/21/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for Rockwood Insurance Compa (in Liquidation), 901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/02/2016

INDIANA INSURANCE GUARANTY ASSOC

PROOF OF CLAIM #: 1000000393

3502 WOODVIEW TRACE

SUITE 100

INDIANAPOLIS, IN 46268

RECEIVED

DEC 27 2016

ADMINISTRATION 1

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 29,381.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

James B. Smith - 116A
Claimant's Signature

12-19-16
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for Rockwood Insurance Compa (in Liquidation), 901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

IOWA INSURANCE GUARANTY ASSOC
801 GRAND AVENUE, SUITE 3700
DES MOINES, IA 503098004

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000394

NOTICE OF CLAIM EVALUATION

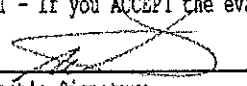
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 144,886.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature

12-8-16
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.



The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

KANSAS INSURANCE GUARANTY ASSOC
C/O WESTERN GUARANTY FUND SERVICES
1720 SOUTH BELLAIRE STREET
SUITE 408
DENVER, CO 80222

NOTICE OF CLAIM EVALUATION

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 7,904.00.
Comments: CLASS A CLAIM



 Claimant's Signature Date

Claimant's Signature _____ Date _____

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

KENTUCKY INSURANCE GUARANTY ASSOC
10605 SHELBYVILLE ROAD, SUITE 101
LOUISVILLE, KY 40223

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000396

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 26,053.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Arthur Scott Webster 12-8-2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/02/2016

LOUISIANA INSURANCE GUARANTY ASSOC

PROOF OF CLAIM #: 1050000397

2142 QUAIL SUN DRIVE

BATON ROUGE, LA 708094126

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 2,225,689.00.

Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Claimant's Signature

Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000398

MARYLAND P&C INSURANCE GUAR CORP
305 WASHINGTON AVE, SUITE 600
TOWSON, MD 212044715

NOTICE OF CLAIM EVALUATION

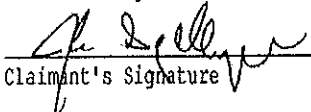
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 3,910,489.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

 12/20/16

Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

MISSISSIPPI INSURANCE GUARANTY ASSOC
713 SOUTH PEAR ORCHARD ROAD
SUITE 200
RIDGELAND, MS 391574823

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000399

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 16,757.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Anthony J. [Signature]
Claimant's Signature

12-8-16
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number: _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/02/2016

MISSOURI P&C INSURANCE GUARANTY ASSOC

PROOF OF CLAIM #: 1000000400

994 DIAMOND RIDGE

SUITE 102

JEFFERSON CITY, MO 65109

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 1,110.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Claimant's Signature

Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for Rockwood Insurance Compa (in Liquidation), 901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

MONTANA INSURANCE GUARANTY ASSOC
1720 SOUTH BELLAIRE STREET
SUITE 408
DENVER, CO 80222

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000401

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 63,095.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Chad A. [Signature] 12/19/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

NEBRASKA P&L INSURANCE GUARANTY ASSOC
C/O WESTERN GUARANTY FUND SERVICES
1720 SOUTH BELLAIRE STREET
SUITE 408
DENVER, CO 80222

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000402

NOTICE OF CLAIM EVALUATION

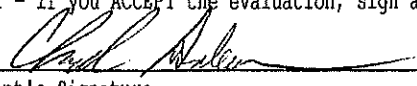
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 274,016.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature

12/19/2016
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

NEVADA INSURANCE GUARANTY ASSOC
3821 WEST CHARLESTON BLVD
SUITE 100
LAS VEGAS, NV 891021859

DATE: 12/02/2016
PROOF OF CLAIM #: 1000000403

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 1,657.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Dennis W. Beltray 12/30/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number (702) 368-0607

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

NEW MEXICO P&C INS GUARANTY ASSOC
C/O INTEGRION GROUP
P O BOX 27815
ALBUQUERQUE, NM 87125

DATE: 12/02/2016

PROOF OF CLAIM #: 401

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 138,623.00.
Comments: class a claim

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ~~ACCEPT~~ the evaluation, sign and return one copy.

Claimant's Signature

Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number

(505) 291-4980

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/05/2016

OHIO INSURANCE GUARANTY ASSOC
1840 MACKENZIE DRIVE
COLUMBUS, OH 43220

PROOF OF CLAIM #: 1000000405

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

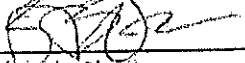
The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 8,101.00.

Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature
12/18/2016
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000406

OKLAHOMA P&C INSURANCE GUAR ASSOC
2601 NORTHWEST EXPRESSWAY
SUITE 330E
OKLAHOMA CITY, OK 73112

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 395,198.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Amanda L. Barker 12/13/2016
Claimant's Signature General Manager Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

PA P&C INSURANCE GUARANTY ASSOC
ONE PENN CENTER, SUITE 1850
1617 JFK BLVD
PHILADELPHIA, PA 19103

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000407

NOTICE OF CLAIM EVALUATION

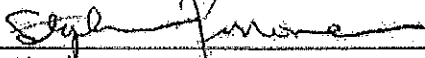
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 513,946.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

 12/12/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number (215) 568-1007

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

PA WORKERS COMP SECURITY FUND
CAPITOL ASSOC BUILDING
901 N. SEVENTH ST
HARRISBURG, PA 17102

DATE: 12/05/2016

PROOF OF CLAIM #: 705

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 18,669,529.00.

Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Michael J. Burgen - Bureau Director 12-8-16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

DATE: 12/05/2016

SOUTH CAROLINA INS GUARANTY ASSOC

PROOF OF CLAIM #: 1000000408

P O BOX 407

COLUMBIA, SC 29202

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 93,044.00.

Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

J. Smith 12/15/16
Claimant's Signature Date

SC PINNACLE &
CASUALTY INS
GTJ ASSOC.

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

SOUTH DAKOTA INS GUARANTY ASSOC.
P O BOX 2790
SOUIX FALLS, SD 571012790

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000409

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 274,418.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

SCS (SDIGA) 12/14/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

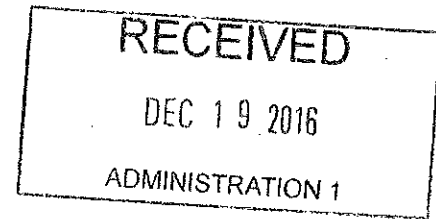
The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

TENNESSEE INS GUARANTY ASSOC
3100 WEST END AVE
SUITE 670
NASHVILLE, TN 372035805

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000410



NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 595,471.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

WDB 12/13/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

TEXAS P & C INS GA
9120 BURNET RD
AUSTIN, TX 78758

DATE: 12/05/2016
PROOF OF CLAIM #: 555

NOTICE OF CLAIM EVALUATION

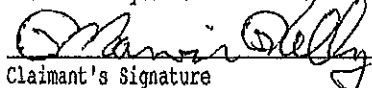
Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 168,664.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

 12/20/16
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

UTAH P&C INS. GUARANTY ASSOC
P O BOX 1608
SANDY, UT 840911608

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000411

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 4,290.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature

12/8/2016
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

VIRGINIA P&C INS GUARANTY ASSOC
C/O GUARANTY FUND MGMT SERVICES
ONE BOWDOIN SQUARE
BOSTON, MA 021142916

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000412

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 6,404,103.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.

Paul G. Miller, Esq. 12/19/2016
Claimant's Signature Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature Date

Telephone Number (617) 227-7020

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

IN THE MATTER OF Rockwood Insurance Compa

WEST VIRGINIA INS GUARANTY ASSOC
1040 MACKENZIE DRIVE
COLUMBUS, OH 43220

DATE: 12/05/2016
PROOF OF CLAIM #: 1000000413

NOTICE OF CLAIM EVALUATION

Section 544 of the Insurance Department Act (40 P.S. Section 221.44) establishes the level of priority to be assigned to claims against the estate of a liquidated company.

The above referenced claim has been assigned priority level (A). The claim has been valued at \$ 205,135.00.
Comments: CLASS A CLAIM

Written objections to the evaluation must be filed within 60 days from the date of the notice with the Commonwealth Court of Pennsylvania or the Statutory Liquidator (40 P.S. Section 221.41). If no objection is received within 60 days from the date of this notice, this evaluation will be considered accepted and binding.

COMPLETE EITHER ITEM 1 OR ITEM 2 BELOW

Item 1 - If you ACCEPT the evaluation, sign and return one copy.


Claimant's Signature

12/8/2016
Date

Item 2 - If you OBJECT to the evaluation, sign below and return one copy with your written documentation in support of your objection. If no objection is received within 60 days, this evaluation will be considered accepted and binding and will be submitted to the Court. Once this evaluation is determined to be accepted, you may not object to the evaluation of your claim, either now or in the future.

Claimant's Signature

Date

Telephone Number _____

If you file an objection which is not resolved, the matter will be heard by the Commonwealth Court or by a Court-appointed referee.

YOU HAVE THE DUTY TO KEEP THE STATUTORY LIQUIDATOR INFORMED OF ANY CHANGE OF ADDRESS (40 P.S. SECTION 221.24 (G)). FAILURE TO INFORM THE STATUTORY LIQUIDATOR OF A CHANGE OF ADDRESS MAY RESULT IN THE LOSS OF ANY DISTRIBUTION TO WHICH YOU ARE ENTITLED.

The address of the Statutory Liquidator is : Statutory Liquidator for
Rockwood Insurance Compa (in Liquidation),
901 N. 7th St., Harrisburg, PA 17102

(See next page for general information)

CERTIFICATE OF SERVICE

I hereby certify that I am this day serving the foregoing document upon the person(s) and in the manner indicated below.

Service by first-class mail, addressed as follows:

Donna J. Pankowski, District Counsel
Internal Revenue Service
1000 Liberty Avenue
Pittsburgh, PA 15222

Kay, Casto & Chaney
P.O. Box 2031
Charleston, WV 25327

Internal Revenue Service
Special Procedures Department
P.O. Box 12051
Philadelphia, PA 19105

Charles V. Contrada, Esq.
Contrada & Associates
6641 Sylvania Avenue, Suite 8
Sylvania, OH 43560

Sharon Williams, Deputy Director
Commercial Litigation Branch
Department of Justice, Civil Division
P.O. Box 875
Ben Franklin Station
Washington, DC 20044

Patrick C. McGinley, Esq.
737 South Hills Drive
Morgantown, WV 26505-6243

Internal Revenue Service
Taxpayer Services
600 Arch Street
Philadelphia, PA 19105

James W. Graves, Esq.
Graves & Graves
3500 Rue De Lac Street
Shreveport, LA 71107-7662

Pennsylvania Department of Revenue
ATTN: Marianne I. Rempe, Esquire
Office of Chief Counsel
Department 281061
Harrisburg, PA 17128-1061

Debora Fajer-Smith, Esq.
6404 Ivy Lane, Suite 400
Greenbelt, MD 20770-1417

Lawrence G. McMichael, Esq.
Dilworth Paxson, LLP
1500 Market Street, 3500E
Philadelphia, PA 19102

Don J. Mros, Esq.
Chadbourn & Parke
1200 New Hampshire Avenue, N.W.
Washington, DC 20036

Carole H. Haynes, President
Architectural Contractors, Inc.
P.O. Box 9043
Albuquerque, NM 87119-6622

Francisco Velasquez, Esq.
510 Slate Avenue, N.W.
Albuquerque, NM 87102-2157

Philip S. Kift, Jr., Esq.
John Yediny, President
Rockwood Casualty Insurance Company
654 Main Street
Rockwood, PA 15557-1029

James R. Snyder, Esq.
Jackson & Kelly
500 Lee Street, Suite 1600
P.O. Box 553
Charleston, WV 25322

Nelson, Mullens, Riley & Scarborough, LLP
Meridian, 17th Floor
1320 Main Street
Columbia, SC 29201

Louis C. Long, Esq.
Pietragallo Gordon Alfano Bosick
and Raspanti, LLC
The Thirty-Eighth Floor
One Oxford Centre
Pittsburgh, PA 15219

Bogin, Munns & Munns, P.A.
P.O. Box 2807
Orlando, FL 32802-2807

John J. Sarchio, Esq.
Chadbourn & Parke
30 Rockefeller Plaza
New York, NY 10120

Edward F. Mannino, Esq.
Mannino Law Firm
1614 Kings Mill Road
P.O. Box 387
Plymouth Meeting, PA 19437

Marilyn E. Zilli, Esq.
Fetterhoff & Zilli
218 Pine Street
Harrisburg, PA 17101-1350

The Calwell Practice, PLLC
Law and Arts Center, West
500 Randolph Street
P.O. Box 113
Charleston, WV 25302

R.E. Thompson, Esq.
Modrall Sperling Roehl Harris & Sisk
500 4th Street, N.W., Suite 1000
P.O. Box 2168
Albuquerque, NM 87103

S. Ault Hootsell, III, Esq.
Phelps Dunbar, LLP
Suite 2000, Canal Place
365 Canal Street
New Orleans, LA 70130-6534

Cohen Abate & Cohen
114 High St
Morgantown, WV 26505

Andrea Lentine, Executive Director
Alabama Insurance Guaranty Association
2020 Canyon Road, Suite 200
Birmingham, AL 35216

Dane Havard, Fund Administrator
Alaska Insurance Guaranty Association
c/o Northern Adjusters, Inc.
1401 Rudakof Circle, Suite 100
Anchorage, AK 99508

Michael E. Surguine, Executive Director
Arizona P&C Insurance Guaranty Fund
2910 North 44th Street, Second Floor
Phoenix, AZ 85005

Steve A. Uhrynawycz, Administrator
Arkansas Property & Casualty
Guaranty Fund
1023 West Capitol Avenue, Suite 2
Little Rock, AR 72201

Chad Anderson, President
Western Guaranty Fund Services
1720 South Bellaire Street, Suite 408
Denver, CO 80222

Barry Miller, Executive Director
Delaware Insurance Guaranty Association
220 Continental Drive, Suite 309
Newark, DE 19713

Sandra J. Robinson, President
Florida Workers' Compensation Insurance
Guaranty Association
P.O. Box 15159
Tallahassee, FL 32317-5159

Michael C. Marchman, Executive Director
Georgia Insurers Insolvency Pool
Gwinnett Commerce Center
3700 Crestwood Parkway, Suite 400
Duluth, GA 30096

Rick Vasil, CPCU, AIC, Manager
Indiana Insurance Guaranty Association
3502 Woodview Trace, Suite 100
Indianapolis, IN 46268

Steven M. Augspurger, General Counsel
Iowa Insurance Guaranty Association
801 Grand Avenue, Suite 3700
Des Moines, IA 50309-8004

A. Scott Webster, Executive Director
Kentucky Insurance Guaranty Association
10605 Shelbyville Road, Suite 101
Louisville, KY 40223

John Wells, Director of Operations
And Logistics
Louisiana Insurance Guaranty Association
2142 Quail Run Drive
Baton Rouge, LA 70808-4126

John R. Spielberger, President
Maryland P&C Insurance
Guaranty Association
305 Washington Avenue, Suite 600
Towson, MD 21204-4715

Arthur Russell, Executive Director
Mississippi Insurance Guaranty Association
713 South Pear Orchard Road, Suite 200
Ridgeland, MS 39157-4823

Charles F. Renn, Executive Director
Missouri P&C Insurance Guaranty
Association
994 Diamond Ridge, Suite 102
Jefferson City, MO 65109

Bruce W. Gilbert, Executive Director
Nevada Insurance Guaranty Association
3821 West Charleston Boulevard, Suite 100
Las Vegas, NV 89102-1859

Steven Vanetsky, Interim Fund
Administrator
New Mexico Insurance Guaranty
Association
Integrion Group
P.O. Box 27815
Albuquerque, NM 87125

Steve Durish, President
Ohio/West Virginia Guaranty Funds
1840 Mackenzie Drive
Columbus, OH 43220

Amanda Barbera, General Manager
Oklahoma P&C Insurance Guaranty
Association
2601 Northwest Expressway, Suite 330E
Oklahoma City, OK 73112

Stephen F. Perrone, Executive Director
Pennsylvania P&C Insurance Guaranty
Association
1617 John F. Kennedy Blvd., Suite 1850
Philadelphia, PA 19103

Sue Pease, Claims Manager
Pennsylvania Workers' Compensation
Security Fund
901 North 7th Street, Suite 201
Harrisburg, PA 17102

J. Smith Harrison, Executive Director
South Carolina P&C Insurance Guaranty
Association
P.O. Box 407
Columbia, SC 29202

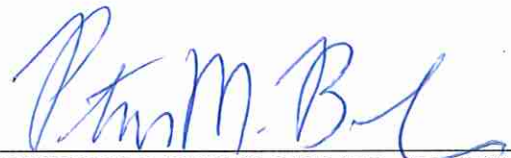
Edwin E. Evans, Managing Secretary
South Dakota P&C Insurance Guaranty
Association
P.O. Box 2790
Sioux Falls, SD 57101-2790

David Broemel, Executive Secretary
Tennessee Insurance Guaranty Association
3100 West End Avenue, Suite 670
Nashville, TN 37203-5805

Marvin Kelly, Executive Director
Texas P&C Insurance Guaranty
Association
9120 Burnet Road
Austin, TX 78758

Allen Muhlestein, Executive Director
Utah P&C Insurance Guaranty
Association
P.O. Box 1608
Sandy, UT 84091-1608

Paul M. Gulko, President
Guaranty Fund Management Services
One Bowdoin Square
Boston, MA 02114-2916



PRESTON M. BUCKMAN (I.D. #57570)
Governor's Office of General Counsel
Pennsylvania Insurance Department
Office of Chief Counsel
Capital Associates Building
901 North 7th Street
Harrisburg, PA 17102
(717) 787-6009

Counsel for Teresa D. Miller, Insurance
Commissioner of the Commonwealth of
Pennsylvania, in her official capacity as
Statutory Liquidator of Rockwood Insurance
Company (In Liquidation)

DATED: 3/22/17



GOVERNOR'S OFFICE OF GENERAL COUNSEL

March 22, 2017

Michael F. Krimmel, Chief Clerk
Commonwealth Court of Pennsylvania
601 Commonwealth Avenue, Suite 2100
P.O. Box 69185
Harrisburg, PA 17120-9185

***Re: In re: Rockwood Insurance Company (In Liquidation)
No. 1 ROC 1990***

Dear Mr. Krimmel:

Attached for filing please find a Praecipe to Supplement Exhibit with regard to the above-referenced liquidation.

Thank you for your assistance in this matter.

Very truly yours,

Preston M. Buckman
Insurance Department Counsel

PMB:drh

Enclosure