

SOUTHERN CASUALTY INSURANCE COMPANY, IN LIQUIDATION
NOTICE OF LIQUIDATION

TO: All Persons and Entities having an interest in Southern Casualty Insurance Company

FROM: Ralph T. Hudgens, Commissioner of Insurance of the State of Georgia as Liquidator of Southern Casualty Insurance Company

INTRODUCTION

On March 20, 2013, Southern Casualty Insurance Company ("Southern Casualty") was declared insolvent and ordered liquidated pursuant to Order entered by the Honorable Cynthia D. Wright, Chief Judge of the Superior Court of Fulton County, Georgia, in Civil Action File No. 2013CV228788. Ralph T. Hudgens, the Commissioner of Insurance of the State of Georgia, was appointed Liquidator of Southern Casualty. The Liquidator was directed to take possession of the assets of Southern Casualty and to administer them under the supervision of the Liquidation Court. The Liquidator is vested by operation of law with title to all the property, contracts and rights, and all books and records of Southern Casualty, wherever located.

This Notice contains instructions for all persons and entities having an interest in Southern Casualty. This notice is issued pursuant to the Official Code of Georgia Annotated 33-36-8 and 33-37-21 and by Order of the Superior Court of Fulton County, Georgia ("Liquidation Court").

A copy of the liquidation order may be obtained from www.oci.ga.gov or by calling 404-657-9205.

NOTICE OF CANCELLATION

In accordance with O.C.G.A. § 33-37-18, all policies, including bonds and other non-cancelable business, other than life or accident and sickness insurance or annuities, in effect at the time of the issuance of this Order shall remain in force only for the lesser of: 11:59 p.m. April 19, 2013, the expiration of policy coverage, the date when the insured has replaced the insurance coverage with equivalent insurance in another insurer or otherwise terminated the policy, or the date on which the Liquidator effects a transfer of the policy obligation pursuant to O.C.G.A. § 33-37-20(a)(10).

CLAIM PROCEDURES

The Liquidation Court has directed that notice be given to all persons who may have a claim against Southern Casualty. If you have such a claim and wish to be considered in the Liquidation proceedings, ***you must follow the procedure described below or you will be forever barred from asserting a claim.***

The Liquidation Court has established September 17, 2013, as the "bar date" for the filing of claims against Southern Casualty. To have your claim considered in the Southern Casualty liquidation, ***your Proof of Claim form must be properly completed, mailed, and postmarked no later than September 17, 2013.***

1. CLAIMS FOR LOSS UNDER THE POLICY:

If your claim is for **POLICY BENEFITS** and if your claim is already filed with Southern Casualty, you need to complete the Proof of Claim form, but you do not need to submit documentation to support your claim. If additional information is required, you will be contacted. If this is a new claim, please attach documentation to support your claim.

2. RETURN OF UNEARNED PREMIUM OR OTHER PREMIUM REFUNDS:

If your claim is for **RETURN of UNEARNED PREMIUM or OTHER PREMIUM REFUNDS**, please complete the Proof of Claim form and attach the appropriate documentation to support your claim.

3. GENERAL CREDITOR CLAIM:

If your claim is that of a **GENERAL CREDITOR**, please complete the Proof of Claim form and attach copies of all outstanding invoices to support your claim.

4. ALL OTHER CLAIMS:

If you have any other type of claim, describe your claim on the Proof of Claim form, (i.e., stockholder, employee, taxes, license fees, assessments, etc.) and attach copies of information to support your claim.

A Guaranty Association may cover certain claims under a Southern Casualty policy. Guaranty Associations have been created under state laws to protect insureds whose insurance company became insolvent and was ordered liquidated against certain types of policy claims, subject to both various statutory defenses and claim limitations. Claims which may be covered by a Guaranty Association will be forwarded by the Liquidator to the appropriate Guaranty Association for processing. A list of the addresses and phone numbers of the relevant Guaranty Associations in this case is enclosed. **DO NOT FILE A PROOF OF CLAIM WITH A GUARANTY ASSOCIATION. ALL PROOFS OF CLAIM MUST BE FILED WITH THE LIQUIDATOR OF SOUTHERN CASUALTY.**

PROOF OF CLAIM FORM

The Proof of Claim form must be completed in its entirety and all questions must be answered. Should there be questions that do not apply to your situation, simply complete each blank not requiring an answer with "N/A" or "not applicable." Make sure that your form is *signed under oath before a notary public*. Mail it together with all supporting documentation to the address shown below.

SOUTHERN CASUALTY INSURANCE COMPANY, IN LIQUIDATION
3635 Peachtree Industrial Boulevard, Suite 200
Duluth, GA 30096

All claimants must keep the Liquidator advised of any address changes subsequent to the filing of the Proof of Claim form or receipt of this notice. All communications to the Liquidator should identify the claim number to the extent known.

Georgia Insurers Insolvency Pool
2177 Flintstone Drive, Suite R
Tucker Georgia 30084
770-621-9835

Louisiana Insurance Guaranty Association
2142 Quail Run Drive
Baton Rouge, LA 70808
225-757-1688

Mississippi Guaranty Insurance Association
713 South Pear Orchard Road, Suite 200
Ridgeland, MS 39157-4823
601-957-0072

**SOUTHERN CASUALTY INSURANCE COMPANY, IN LIQUIDATION
PROOF OF CLAIM**

READ ALL MATERIALS CAREFULLY BEFORE
COMPLETING THIS FORM – COMPLETE ALL SECTIONS –
FILL IN ALL BLANKS – PLEASE PRINT CAREFULLY OR
TYPE.

LIQUIDATOR USE ONLY

PROOF OF CLAIM NO: _____

DATE RECEIVED: _____

Name of claimant:

E-Mail Address:

Address of claimant:

Phone No.:

If applicable, name of Southern Casualty Insurance Company policyholder and policy number.

Policyholder Name:

Policy Number:

This claim is for:

- Loss under policy (Claim by insured of Southern Casualty for policy benefits)
- Return of premium under a policy
- General Creditor (Attorney fees, adjuster fees, vendors, landlords, lessors consultants, etc.)
- All other (describe)

In the space below give a concise statement of facts giving rise to your claim:

AMOUNT OF CLAIM: \$ _____

ATTACH COPIES OF ANY SUPPORTING DOCUMENTS SUCH AS CORRESPONDENCE, LAWSUITS, JUDGEMENTS, PREMIUM RECEIPTS, CANCELED CHECKS, ETC.

State of _____

County of _____

I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS AND ATTACHED SUPPORTING DOCUMENTS IN THIS CLAIM ARE TRUE AND CORRECT.

X

Claimant's Signature

Date

Notary Public

My Commission Expires: _____

NOTICE: ALL CLAIMS MUST BE POSTMARKED BY THE LIQUIDATOR AT THE FOLLOWING ADDRESS ON OR BEFORE SEPTEMBER 17, 2013 OR BE FOREVER BARRED.

Southern Casualty Insurance Company
3635 Peachtree Industrial Boulevard
Suite 200, Duluth, GA 30096-2806