

ProAssurance Companies  
100 Brookwood Place  
Birmingham, AL 35209

P.O. Box 590009  
Birmingham, AL 35259-0009  
800-282-6242 • 205-802-4710 fax  
www.proassurance.com

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EBSA/PUBLIC DISCLOSURE  
2011 MAY 16 PM 3:55



May 11, 2011

Top Hat Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Avenue N.W.  
Washington, DC 20210

SUBJECT: PROASSURANCE GROUP  
ALTERNATIVE REPORTING & DISCLOSURE STATEMENT FOR  
NONQUALIFIED DEFERRED COMPENSATION PLANS

Dear Sir or Madam:

Enclosed for your handling is the required Alternative Reporting and Disclosure Statement for Nonqualified Deferred Compensation Plans.

If you have questions or need any additional information, my direct number is 205/877-4462.

Sincerely,

PROASSURANCE CORPORATION

A handwritten signature in black ink that reads 'Clay H. Shaw'.

Clay H. Shaw  
Vice President – Human Resources

/cs

Enclosure

**Alternative Reporting And Disclosure Statement  
For Nonqualified Deferred Compensation Plans**

To: Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Ave. N.W.  
Washington, DC 20210

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: ProAssurance Group Services Corporation
2. The mailing address of the Employer is: 100 Brookwood Place; Suite 300  
Birmingham, AL 35209-6830
3. The Employer Identification Number is: 63-1285505
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:  
One Plan(s) covering 1 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

ProAssurance Group Services Corporation  
A Delaware Corporation

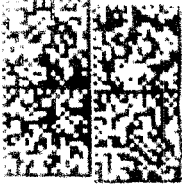
By: Clay Shaw  
Authorized Person

VP-Human Resources

Dated: 04/21/2011

**PROASSURANCE**  
Treated Fairly

100 Brookwood Place  
P.O. Box 590009  
Birmingham, AL 35259-0009



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