NORTH CAROLINA REINSURANCE FACILITY

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ROBERT M. GREER Audit Manager

F. TIMOTHY LUCAS Automobile Manager

ROBERT M. NEWTON Claims Manager

> DAVID E. SINK, JR. Accounting Manager

July 31, 2000

CIRCULAR LETTER TO ALL MEMBER COMPANIES

A PROMPT RESPONSE IS URGENTLY NEEDED

Re: Twenty-Seventh Annual Meeting October 25, 2000

The Twenty-Seventh Annual Meeting of the North Carolina Reinsurance Facility will convene at 8:30 a.m. on Wednesday, October 25, 2000. The meeting will be held in the Conference Center, Mid Pines Inn and Golf Club, l0l0 Midland Road, Southern Pines, North Carolina.

A meeting of the Board of Governors will convene immediately following adjournment of the Twenty-Seventh Annual Meeting.

The following constitutes the agenda for the Annual Meeting:

1. The Annual Report

JOHN W WATKINS

General Manager

The Facility's Annual Report will be presented.

2. Any other business which might properly come before the meeting.

We urge that a representative of your Company attend this meeting. For those companies which cannot be so represented at the meeting, voting by proxy will be permitted. A proxy form is enclosed which we request that you complete and forward to this Office to the attention of Linda Gould, Office Services Coordinator, AS SOON AS POSSIBLE, but no later than October 1, 2000, whether or not your Company expects to be represented in person. This will help to assure that a quorum will be present. If a representative of your Company is present at the meeting, the proxy will not be used.

It is suggested that our member companies consider naming as proxy the current Board of Governors member representing the appropriate group of companies as indicated below.

Alliance of American Insurers - Liberty Mutual Insurance Company American Insurance Association - Royal Insurance Company of America National Ass'n of Independent Insurers - Allstate Insurance Company Non-Affiliated Stock Insurers - Great American Insurance Company Non-Affiliated Non-Stock Insurers - Nationwide Mutual Ins. Company

Very truly yours,

John W. Watkins

JWW:lg Enclosure RF-00-8

General Manager

NORTH CAROLINA REINSURANCE FACILITY (PROXY FORM)

KNOW ALL MEN BY THESE	PRESENTS THAT I		,	, of the
		Insert Name)	(Insert Title)	
do	hereby constitute and ap	ppoint		
(Insert Name of Company) do hereby constitute and appoint (Insert Name of Company Appointed)				ted as Proxy)
as my attorney and agent for the	said Company, in my n	ame, place and stead	to vote as proxy at t	he Twenty-Seventh
Annual Meeting of the NORT	H CAROLINA REINS	SURANCE FACILI	TY to be held on the	e Twenty-Fifth (25th)
day of October, 2000 and/or su	ch other date or dates to	which such meeting	may be adjourned,	hereby giving to such
attorney and agent power and au	thority to act conclusive	ely for said Company	on all questions wh	ich may duly come before
such meeting as fully as I could	act if I were personally	present.		
IN WITNESS WHEREOF I hav	ve hereunto subscribed n	my name and title and	the name of said C	ompany,
this day of	, 2000.			
(Signature)	(Title)			
(Company)				
This Company votes as (check of	one):			
() Member of Alliance of Ame	erican Insurers			
() Member of American Insura				
() Member of National Associa() Non-Affiliated stock insurer	-	surers		
() Non-Affiliated non-stock in				
Return to:				
North Carolina Reinsurance Fac	ility			
Att: Linda Gould Office Services Coordinator				
P. O. Box 176010				

Raleigh, North Carolina 27619-6010