

WILLIAMS LAW FIRM

Attorneys at Law
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Date: 08/15/2019

Travelers
Claims Department
P.O. Box 12345
Phoenix, AZ 76253

RE: Demand for Settlement - Christopher Martin

Claim Number: CLM-AU0068

Date of Loss: 08/13/2019

Your Insured: Christopher Martin

Dear Claims Adjuster:

This firm represents Christopher Martin in connection with the above-referenced claim. On 08/13/2019, our client sustained injuries and property damage as a direct result of the incident described in your claim file. Our client has incurred substantial medical expenses lost wages, and continues to suffer from pain and limitations in daily activities.

DAMAGES SUMMARY:

Medical Expenses: \$10,231

Lost Wages: \$13,508

Property Damage: \$22,561

Pain and Suffering: \$36,226

TOTAL DEMAND: \$67,269

This demand is made in good faith based on the injuries, damages, and losses sustained by our client. We request that you respond to this demand within 30 days of receipt. Should you fail to respond appropriately, we are prepared to pursue all available legal remedies including filing

Please direct all communications to our office.

Sincerely,

Sarah Johnson, Esq.
Williams Law Firm
Attorney for Christopher Martin