

SMITH LEGAL GROUP

Attorneys at Law
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Date: 07/24/2019

Progressive
Claims Department
P.O. Box 12345
Houston, AZ 74600

RE: Demand for Settlement - Mary Jackson

Claim Number: CLM-HO0195
Date of Loss: 07/19/2019
Your Insured: Mary Jackson

Dear Claims Adjuster:

This firm represents Mary Jackson in connection with the above-referenced claim. On 07/19/2019, 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: \$14,196
Lost Wages: \$9,219
Property Damage: \$92,725
Pain and Suffering: \$39,587

TOTAL DEMAND: \$140,075

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,

Robert Williams, Esq.
Smith Legal Group
Attorney for Mary Jackson