

# **JOHNSON & ASSOCIATES**

Attorneys at Law  
7561 Pine Ln  
Houston, TX 88081  
Phone: 714-319-7034 | Fax: 593-985-6087

Date: 10/14/2019

Liberty Mutual  
Claims Department  
P.O. Box 12345  
Houston, AZ 70823

**RE: Demand for Settlement - Karen Moore**

Claim Number: CLM-AU0189  
Date of Loss: 10/12/2019  
Your Insured: Karen Moore

Dear Claims Adjuster:

This firm represents Karen Moore in connection with the above-referenced claim. On 10/12/2019, 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: \$31,926  
Lost Wages: \$4,054  
Property Damage: \$58,688  
Pain and Suffering: \$65,175

**TOTAL DEMAND: \$103,210**

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.**  
Johnson & Associates  
Attorney for Karen Moore