

SMITH LEGAL GROUP

Attorneys at Law
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Date: 08/31/2019

Travelers
Claims Department
P.O. Box 12345
Dallas, TX 79234

RE: Demand for Settlement - Elizabeth Johnson

Claim Number: CLM-AU0075

Date of Loss: 08/30/2019

Your Insured: Elizabeth Johnson

Dear Claims Adjuster:

This firm represents Elizabeth Johnson in connection with the above-referenced claim. On 08/30/2019, 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: \$21,715

Lost Wages: \$7,318

Property Damage: \$31,309

Pain and Suffering: \$50,504

TOTAL DEMAND: \$103,828

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.
Smith Legal Group
Attorney for Elizabeth Johnson