

Detail Loss Report

Losses From: 04/26/2016 To 04/26/2021

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
Policy Year: 2016											
Line of Insurance: AL - AUTOMOBILE											
/TES (TEST SERVICES COOP	480	AB	E6L1234	07/22/2016	07/27/2016	11/28/2016	C				
IV R/E OV AND PUSHED OV2 INTO OV AT A STOP LIGHT							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
/SENSIBLE DEPARTMENT	480	AB	E8B1234	03/06/2017	03/21/2017	02/17/2021	C				
IV REAR ENDED OV ON 710 FREEWAY							Inc:	\$155,107.00	\$100,000.00	\$0.00	\$55,107.00
							Pd:	\$155,106.55	\$100,000.00	\$0.00	\$55,106.55
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
/SENSIBLE BAKERY	480	AD	E8B2345	01/06/2017	01/09/2017	03/31/2017	C				
OV WAS WB ON HWY AT INTERSECTION. IV R/E OV.							Inc:	\$3,146.00	\$3,146.00	\$0.00	\$0.00
							Pd:	\$3,145.83	\$3,145.83	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
JOHN SMITH	480	AB	E9R1234	05/31/2017	06/15/2017	08/16/2017	C				
IV WAS STOPPED AT STOP SIGN WHEN HE WAS HIT FROM BEHIND BY OV GOING APPROX 25MPH.							Inc:	\$2,668.00	\$2,668.00	\$0.00	\$0.00
							Pd:	\$2,667.98	\$2,667.98	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
JANE DOE	480	AD	E9R2345	06/18/2017	06/21/2017	07/06/2017	C				
IV WAS TRYING TO PARK WHEN IV DRIVER ACCIDENTLY ACCELERATED IV RESULTING IN IV R/E OV THAT WAS PARKED UNOCCUPIED ON THE STREET.							Inc:	\$3,505.00	\$3,505.00	\$0.00	\$0.00
							Pd:	\$3,505.35	\$3,505.35	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
UNKNOWN UNKNOWN	480	AD	E9R3456	06/27/2017	09/18/2017	11/27/2018	C				
CALLER STATES IV WAS HIT BY OV.							Inc:	\$12.00	\$12.00	\$0.00	\$0.00
							Pd:	\$12.45	\$12.45	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
Subtotals for Line of Insurance : AL							Inc:	\$164,438.00	\$109,331.00	\$0.00	\$55,107.00
Total Claim Count: 6							Pd:	\$164,438.16	\$109,331.61	\$0.00	\$55,106.55
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
Line of Insurance: WC - WORKERS COMP											
SMITH JOHN	095	CB	E6S1234	05/31/2017	06/15/2017	03/15/2018	C				
IV WAS STOPPED AT STOP SIGN WHEN HE WAS HIT FROM BEHIND BY OV GOING APPROX 25MPH/EE COMPLAINED OF NECK & LOW BACK PAIN.							Inc:	\$625.00	\$0.00	\$577.00	\$48.00
							Pd:	\$624.71	\$0.00	\$576.88	\$47.83
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

Detail Loss Report

Losses From: 04/26/2016 To 04/26/2021

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
Policy Year: 2016											
Line of Insurance: WC - WORKERS COMP											
GUMP	FORREST	152	CB	E6S2345	05/09/2017	05/19/2017	05/26/2018	C			
IW WAS CARRYING A 250LB AIR CONDENSER AND HURT HIS BACK								Inc:	\$9,852.00	\$5,352.00	\$3,886.00
								Pd:	\$9,852.31	\$5,352.28	\$3,886.07
								O/S:	\$0.00	\$0.00	\$0.00
JONES	SALLY	152	CB	E6S3456	09/29/2016	10/05/2016	11/22/2017	C			
IW FELL THROUGH THE FLOOR (2 FEET) WHILE WORKING AND STRUCK A STEEL BEAM BELOW								Inc:	\$25,743.00	\$6,477.00	\$16,705.00
								Pd:	\$25,742.16	\$6,476.66	\$16,704.59
								O/S:	\$0.00	\$0.00	\$0.00
Subtotals for Line of Insurance : WC								Inc:	\$36,220.00	\$11,829.00	\$21,168.00
Total Claim Count: 3								Pd:	\$36,219.18	\$11,828.94	\$21,167.54
								O/S:	\$0.00	\$0.00	\$0.00
Subtotals for Policy Year : 2016								Inc:	\$200,658.00	\$121,160.00	\$21,168.00
Total Claim Count: 9								Pd:	\$200,657.34	\$121,160.55	\$21,167.54
								O/S:	\$0.00	\$0.00	\$0.00
Policy Year: 2017											
Line of Insurance: AL - AUTOMOBILE											
DUCK DONALD		480	AD	FBF1234	03/27/2018	03/29/2018	05/15/2018	C			
IV BACKED INTO A STOPPED OV.								Inc:	\$3,171.00	\$3,171.00	\$0.00
								Pd:	\$3,170.91	\$3,170.91	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00
MOUSE MICKEY		480	AB	FBF2345	02/13/2018	02/15/2018	04/08/2021	C			
IV WAS WAITING ON A TRAFFIC LIGHT AND WAS REAR ENDED BY OV								Inc:	\$0.00	\$0.00	\$0.00
								Pd:	\$0.00	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00
MOUSE MINNIE		480	AB	FBF3456	01/05/2018	01/22/2018	04/26/2019	C			
405 FREEWAY TRAVELING THE CLMT STOPPED AND WAS R/E BY THE IV								Inc:	\$58,117.00	\$57,977.00	\$0.00
								Pd:	\$58,117.56	\$57,977.16	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00

Detail Loss Report

Losses From: 04/26/2016 To 04/26/2021

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
Policy Year: 2017											
Line of Insurance: AL - AUTOMOBILE											
DUCK DAFFY	480	AD	FBF6789	01/31/2018	02/06/2018	06/06/2018	C				
IV WAS DRIVING EB ON CARSON ST. AND THE SUN HIT HIS FACE. DRIVER OF IV WAS BLINDED BY THE SUN AND WHEN HE OPENED HIS EYES, IV WAS VERY CLOSE TO OV. IV REAR-ENDED OV.								Inc:	\$20,248.00	\$20,248.00	\$0.00
								Pd:	\$20,248.00	\$20,248.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00
Subtotals for Line of Insurance : AL								Inc:	\$81,536.00	\$81,396.00	\$0.00
Total Claim Count: 4								Pd:	\$81,536.47	\$81,396.07	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00
Line of Insurance: WC - WORKERS COMP											
PLUTO	GOOFY	039	CB	FCT1235	02/13/2018	02/15/2018	08/31/2018	C			
IV WAITING AT TRAFFIC LIGHT WHEN REAR ENDED BY OV. IW LOWER BACK INJURED IN THE COLLISION								Inc:	\$78.00	\$0.00	\$0.00
								Pd:	\$78.04	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00
BUNNY	BUGS	152	CB	E9H6758	08/11/2017	08/14/2017	O				
A PIECE OF EQUIPMENT FELL ON BOTH OF THE EMPLOYEE'S HANDS WHICH MAY HAVE RESULTED IN A BROKEN BONE IN ONE HAND AND INJURED A TENDON IN THE OTHER HAND								Inc:	\$146,440.00	\$65,437.00	\$56,581.00
								Pd:	\$105,389.53	\$51,749.36	\$36,539.44
								O/S:	\$41,050.47	\$13,687.64	\$20,041.56
Subtotals for Line of Insurance : WC								Inc:	\$146,518.00	\$65,437.00	\$56,581.00
Total Claim Count: 2								Pd:	\$105,467.57	\$51,749.36	\$36,539.44
								O/S:	\$41,050.43	\$13,687.64	\$20,041.56
Subtotals for Policy Year : 2017											
Total Claim Count: 6								Inc:	\$228,054.00	\$146,833.00	\$56,581.00
								Pd:	\$187,004.04	\$133,145.43	\$36,539.44
								O/S:	\$41,049.96	\$13,687.57	\$20,041.56
Report Grand Totals											
Total Claim Count: 15								Inc:	\$428,712.00	\$267,993.00	\$77,749.00
								Pd:	\$387,661.38	\$254,305.98	\$57,706.98
								O/S:	\$41,050.62	\$13,687.02	\$20,042.02



Detail Loss Report		Losses From: 04/26/2016 To 04/26/2021	
Report Parameters			
Losses From: 04/26/2016 To 04/26/2021		Policy Number(s): 4H112345	
Sorts			
Sort Name	Sort Label	Subtotal	Page Break
1. Policy Year	Policy Year	Y	N
2. Line of Insurance	Line of Insurance	Y	N
Limiting Statements			
Large Loss Limiting			
Drill Down Limiting Criteria			