



Crum & Forster Surplus & Specialty Lines

Loss Run - Valuation Date 7/10/2025

Client Info: PRO TRANS INC
1225 CARPENTER RD, Defiance, OH, 43512

Producer Info: RPS CHARLOTTE

Policy Number: 506910592

Policy Period: 10/4/2024 - 10/4/2025

Line Of Business: Package with Auto - If defense costs are within policy limits then claims expense shows as indemnity in columns below

Carrier: UNITED STATES FIRE INSURANCE COMPANY

Policy Total

Total # Of Claims	# Closed Without Indemnity Payment	Deductible Reserve	Subro/ Salvage	Indemnity Reserves	Paid Indemnity	Expense Reserves	Paid Expense	Total Incurred*
1	0	0.00	0.00	0.00	17,719.34	0.00	0.00	17,719.34

Claim Details:

Claim Number: MNC92413832

Claim Status: RE-OPENED Date Of Loss: 12/4/2024 Reported Date: 12/16/2024			Accident Description: IV struck OV while attempting to merge onto highway Accident State: OH						
Claim Details	Deductible Reserve	Subro/ Salvage	Indemnity Reserve	Paid Indemnity	Total Indemnity	Expense Reserve	Paid Expense	Total Expense	Total Incurred*
Type of Claim: BODI Loss Description: SACRUM/COCCYX Claimant Name: Ronald Nagim Driver Name:	0.00	0.00	0.00	15,000.00	15,000.00	0.00	0.00	0.00	15,000.00
Type of Claim: PROP Loss Description: Claimant Name: Ronald Nagim Driver Name:	0.00	0.00	0.00	2,719.34	2,719.34	0.00	0.00	0.00	2,719.34
CLAIM TOTAL:	0.00	0.00	0.00	17,719.34	17,719.34	0.00	0.00	0.00	17,719.34

*Total Incurred = Total Indemnity + Total Expense - Subro - Salvg



**P.O. Box 94739
Cleveland, OH 44101**

**Telephone: 800-444-4487
progressive.com**

Date: August 29, 2025

State: OH

Policy #: 952718883

Insured: PRO TRANS INC

DBA:

Coverage Dates: 10/04/2021 - 10/04/2023

Re: Loss History

There have been no losses on the policy term(s)/date(s) listed

There have been losses on the policy term(s)/date(s) listed

If you have any questions regarding your loss history, please contact us at:
1-800-444-4487

We comply with the state insurance laws that regulate the provision of loss history information. Unless required by law we provide a list of claims and the paid amounts only.

Thank you,
Commercial Lines Customer Care

Date of Loss	Claim Number	Claim Status	Coverage	Pay Out	Vehicle Make/Model	Driver
2023-09-25	24-7169747	CWP	CARGO-COMP	\$0.00	35 UNKNOWN UNKNOWN	H, GREG
		CWP	CARGO-COMP	\$0.00		
2023-02-07	23-4460826	CLSD CWP	PD COLL	\$2,697.75 \$0.00	15 VOLVO TRACTOR	AL-KUHALI, WALEED A.

Loss Run (Page 1)



Policy Number:	ASC-9213624-00		10/04/2023
Insured Name:	PRO TRANS INC		10/04/2024
Claim Number:	EVCASI24010037	Loss Date:	2024-01-19 00:00:00
Loss Location 1:	TIPP CITY, OH, 45371	Coverage:	AL
VIN and Driver:	3AKJGLD59G5GY3140, SANTARROW RUSSEL	Claimant Name:	
Loss Description:	IV changing lanes collided with OV		

Loss		Legal Expense		Other Expense:		Total
Incurred:	12,494	Incurred:	95	Incurred:	-	Incurred: 12,589
Paid:	12,494	Paid:	95	Paid:	-	Paid: 12,589
Outstanding:	-	Outstanding:	-	Outstanding:	-	Outstanding: -

COVER WHALE INSURANCE SOLUTIONS	Valued as of: 10/01/25
	Report Run Date: 10/02/25

Loss Run (Page 2)



Grand Total	Expense Paid	Reserves	Total
Claim 1:	95	0	12,589
TOTAL	95	0	12,589

COVER WHALE INSURANCE SOLUTIONS

Valued as of: 10/01/25

Report Run Date: 10/02/25

MICHIGAN MI USA

COMMERCIAL DRIVER LICENSE



A 422 271 319 787

DOB 10-13-1986

ISS 02-04-2022

EXP 10-13-2026

101386

GALAL HUSSEIN AL-SHUGAA

10 PERKINS ST
COLDWATER, MI 49036-1936

Sex M

Hgt 600

Eyes BRO

Lic Type CA

End NONE

Restrictions Corrective Lens



DD 1203065590223

Rev 08-16-2021

MICHIGAN
MI
USA

**ENHANCED COMMERCIAL
DRIVER LICENSE**



A 236 765 001 699

DOB 09-08-1971

**SHAHID AKHTAR SHAH
44045 PINEWOOD DR
STERLING HEIGHTS, MI 48313-1134**

Sex M

Hgt 602

Eyes BRO

Lic Type E,CA

End N



Restrictions NONE

09-08-1971



A handwritten signature of Shahid Akhtar Shah.

DD 1205827116169

Rev 07-01-2012

Michigan

USA

COMMERCIAL DRIVER'S LICENSE



Zain Musse

DD 1210201668223

DL# M 200 974 048 086 Iss: 05/13/2024
DOB 02/01/1991 Exp: 02/01/2028

ZAIN ALI-MOHAMED
MUSSA

14 HOOKER ST
COLDWATER, MI 49036-2128

Sex M Hgt 5'-10" Eyes HAZ
Class CA End NONE
Rest Corrective Lens

DONOR



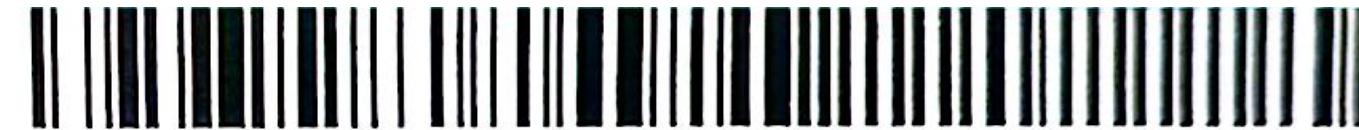
02/01/91

M20097404808619910201280201

MEDICAL ALERT

ENCODED DATA: BIRTH, REVISION,
EXPIRATION & TRANSACTION
DATES; DL/ID CARD #; SEX; NAME;
ADDRESS; ISSUING STATE &
INVENTORY CONTROL #;
COMPLIANCY INDICATOR;
DURATION INDICATOR.

02/01/1991



2028

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Card does not contain Radio Frequency Identification (RFID) Technology.

Michigan USA

**COMMERCIAL
DRIVER'S LICENSE**



DL # R 130 462 001 339 Iss 05/01/2024
DOB 05/03/1984 Exp 05/03/2028

KHALED MOHAMED SAE
RUBAID
7642 E MORROW CIR
DEARBORN, MI 48125-1240

Sex M Hgt 5'-05" Eyes BRO
Class CA End NONE
Rest NONE

Khaled

DD 1210099996138

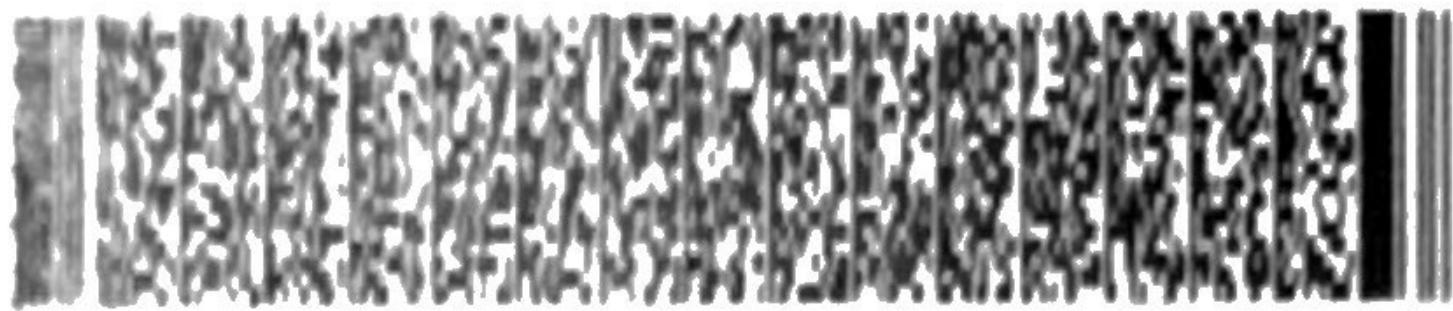
05/03/84



A130489001234567890123456789

MEDICAL ALERT

ENCODED DATA FROM THE FOLLOWING
EXPIRATION & TRANSMISSION
DATES: DIAO CARD # 91234567890123456789
ADDRESS IS RUINE STATE: 0
INVENTORY CONTROL #:
COMPLIANCE INDICATOR:
DURATION INDICATOR:
05/03/1984



2028

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