

Insured Name: Ajit Singh MD Report Date: October 15, 2020

> Report Date Loss Involved Loss Indemnity Indemnity Expense Expense Total Claimant Category Status Insured Type Reserve Paid Reserve Incurred

Policy Number: GHPL-001-160710 Effective Dates: 07/10/2016 - 07/10/2017

Description:

THERE HAVE BEEN NO CLAIMS FOR THE ABOVE POLICY PERIOD.

Policy Number: GHPL-002-170710 Effective Dates: 07/10/2017 - 07/10/2018

THERE HAVE BEEN NO CLAIMS FOR THE ABOVE POLICY PERIOD.

Policy Number: GHPL-26606-180710 Effective Dates:

Dr. Ajit Singh, \$18,424.46 05/15/2019 03/27/2019 SHOSHANA, MESHI Claim Other Settled \$0.00 \$250,000.00 \$0.00 \$268,424.46

Completed by: Greenhill User