

06/19/2024

Claims as of:

August RE Services Inc. 3612 Amherst Ave Dallas, TX 75225-7421

Loss Run Report

Policy Number: 0002095539

Policy Period: 06/21/2023 to 06/23/2024

Claim Number: 1427001379131 Accident Date: 12/06/2023 Emp. Name: Mullens, Mark COMPENSABLE

Claim Status: CLOSED Reported Date: 12/06/2023 Location:

Class: 9032 **Closed Date:** 02/09/2024

Part of Body: Knee			Outstanding		
Injury Deceription		Paid to Date	Reserves	Recoveries	Total Incurred
Injury Description	Indemnity	\$0.00	\$0.00	\$0.00	\$0.00
After completing a plumbing repair, the injuredworker slipped on water and twisted his right knee	Medical	\$463.52	\$0.00	\$0.00	\$463.52
and twisted his right knee	Expenses	\$7.20	\$0.00	\$0.00	\$7.20
Injury Classification	Other	\$0.00	\$0.00	\$0.00	\$0.00
Fall, slip, or trip injury from liquid or grease	Employer Liability	\$0.00	\$0.00	\$0.00	\$0.00
	Totals	\$470.72	\$0.00	\$0.00	\$470.72

Total Incurred = Represents the total dollars paid or reserved on claims associated with the policy (includes both Loss and ALAE payments - Net of Subrogation).

Employer Liability = Coverage provided by Part B of the workers' compensation policy that provides coverage to the insured (employer) for damages arising out of liability to employees for work-related injury or disease as permitted by law and not covered under Part A of the policy.

August RE Services Inc.

Policy Number: 0002095539
Claims as of: 06/19/2024 Policy Period: 06/21/2023 to 06/23/2024

Total Open Claims for Period:	0		Outstanding		
		Paid to Date	Reserves	Recoveries	Total Incurred
	Indemnity	\$0.00	\$0.00	\$0.00	\$0.00
	Medical	\$0.00	\$0.00	\$0.00	\$0.00
	Expenses	\$0.00	\$0.00	\$0.00	\$0.00
	Other	\$0.00	\$0.00	\$0.00	\$0.00
	Employer Liability	\$0.00	\$0.00	\$0.00	\$0.00
	Totals	\$0.00	\$0.00	\$0.00	\$0.00
Total Closed Claims for Period:	1	Paid to Date	Outstanding Reserves	Recoveries	Total Incurred
	Indemnity	\$0.00	\$0.00	\$0.00	\$0.00
	Medical	\$463.52	\$0.00	\$0.00	\$463.52
	Expenses	\$7.20	\$0.00	\$0.00	\$7.20
	Other	\$0.00	\$0.00	\$0.00	\$0.00
	Employer Liability	\$0.00	\$0.00	\$0.00	\$0.00
	Totals	\$470.72	\$0.00	\$0.00	\$470.72
Total Claims for Period:	1		Outstanding		
Total Claims for Period.	1	Paid to Date	Outstanding Reserves	Recoveries	Total Incurred
	Indemnity	\$0.00	\$0.00	\$0.00	\$0.00
	Medical	\$463.52	\$0.00	\$0.00	\$463.52
		47.00	\$0.00	\$0.00	\$7.20
	Expenses	\$7.20	Φ0.00	Φ0.00	\$1.20
	Expenses Other	\$7.20 \$0.00	\$0.00	\$0.00	\$0.00
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Claims as of: 06/19/2024

Summary for policies 0002095539 06/21/2023 to 06/23/2024

Total Open Claims:	0	Outstanding						
		Paid to Date	Reserves	Recoveries	Total Incurred			
	Indemnity	\$0.00	\$0.00	\$0.00	\$0.00			
	Medical	\$0.00	\$0.00	\$0.00	\$0.00			
	Expenses	\$0.00	\$0.00	\$0.00	\$0.00			
	Other	\$0.00	\$0.00	\$0.00	\$0.00			
	Employer Liability	\$0.00	\$0.00	\$0.00	\$0.00			
	Totals	\$0.00	\$0.00	\$0.00	\$0.00			

Total Closed Claims: 1

		Outstanding			
	Paid to Date	Reserves	Recoveries	Total Incurred	
Indemnity	\$0.00	\$0.00	\$0.00	\$0.00	
Medical	\$463.52	\$0.00	\$0.00	\$463.52	
Expenses	\$7.20	\$0.00	\$0.00	\$7.20	
Other	\$0.00	\$0.00	\$0.00	\$0.00	
Employer Liability	\$0.00	\$0.00	\$0.00	\$0.00	
Totals	\$470.72	\$0.00	\$0.00	\$470.72	

Loss Summary for All Policy Periods

						Outstanding			
Effective Date	# Claims	Indemnity Paid	Medical Paid	Other Paid	Total Paid	Recovery	Reserves	Total Incurred	
06/21/2023	1	\$0.00	\$463.52	\$7.20	\$470.72	\$0.00	\$0.00	\$470.72	
Totals	1	\$0.00	\$463.52	\$7.20	\$470.72	\$0.00	\$0.00	\$470.72	

*This report provides loss information only and does not confirm or imply coverage for these dates.