**7/1/2025**

**Via Certified Mail**

NAME

F: FAX NO

Our Client: «Client\_Name»

Date of Incident: «IncidentDate»

NAME,

As you are aware, «IncidentDate». Please allow the following to serve as our client’s demand to resolve this matter prior to litigation.

**Facts of the Occurrence**

«Damages»

**Damages**

«Damages»

**Settlement Demand**

«Damages»

Sincerely,

|  |
| --- |
| /s/ *Michael R. Grieco* |

Michael R. Grieco

**Stinar Gould Grieco & Hensley**

101 N. Wacker Drive, Suite 100

Chicago, IL 60606

P: (312) 748-7338

[Mike@sgghlaw.com](mailto:Mike@sgghlaw.com)