

**TS CHIROPRACTIC WELLNESS**

116-05 Jamaica Ave, Hill, NY 11418 Tel (718)374-3709 Fax(718)374-3808

Patient Name- Cesar Gonzalez

Patients Address- 94-39 86th Rd Woodhaven, NY 11421

Patients Phone # 516-344-9519

D.O.B- 06/17/83 Patients SS# 180-57-2285

Date Of Accident- 2/1/2022

Motor Vehicle Accident yes x No   

N/F Adjuster!

Insurance Company- Statefarm

Doug Robertson

**LIABILITY**  
Adjuster: Jessica Davis

518-884-5164

Adjuster #:402-327-3239 ext:

Medical Adjuster: #

Address to send medical bills- Statefarm Claims PO Box 52250 Phoenix, AZ 85072

Fax# 855-820-6318

Policy # C06420432G

Claim Number: 3230H966R

Attorney Name: Surdez & Perez

Attorney Number- 718-482-1555