

**ROANE COUNTY GOVERNMENT**

Policy Number(s): 81M81409



**Detail Loss Report** **Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
----------	---------	----	--------------	---------------	-------------	------------	-----	-------	-------	---------	---------

**Policy Year: 2017**

**Line of Insurance: GL - GENERAL LIABILITY**

007	LR	<a href="#">FCW8434</a>	05/19/2018	06/04/2018	08/06/2018	C					
POSSIBLE CLAIM FOR DEFAMATION							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Line of Insurance : GL**

**Total Claim Count: 1**

Inc:	\$0.00	\$0.00	\$0.00	\$0.00
Pd:	\$0.00	\$0.00	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Line of Insurance: MP - MALPRACTICE**

007	LR	<a href="#">E3N7296</a>	06/29/2018	03/16/2021	05/06/2021	C					
SUIT FILED AGAINST INSURED							Inc:	\$2,192.00	\$0.00	\$0.00	\$2,192.00
							Pd:	\$2,192.40	\$0.00	\$0.00	\$2,192.40
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Line of Insurance : MP**

**Total Claim Count: 1**

Inc:	\$2,192.00	\$0.00	\$0.00	\$2,192.00
Pd:	\$2,192.40	\$0.00	\$0.00	\$2,192.40
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Policy Year : 2017**

**Total Claim Count: 2**

Inc:	\$2,192.00	\$0.00	\$0.00	\$2,192.00
Pd:	\$2,192.40	\$0.00	\$0.00	\$2,192.40
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Policy Year: 2018**

**Line of Insurance: GL - GENERAL LIABILITY**

007	LR	<a href="#">FKE5187</a>	05/21/2019	05/21/2019	05/22/2019	C					
ROANE CO. HWY. DEPT EMPLOYEE WAS MOWING ON HIGH RIDGE RD., KINGSTON, TN AND THREW A LOT OF GRASS ON THE ROADWAY CAUSING A VEHICLE- NISSAN ALTIMA- TO BUST A TIRE AND TEARING OFF A PLASTIC PIECE FROM UNDERNEAT							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

007	LR	<a href="#">FEX1508</a>	09/03/2018	12/07/2018	06/10/2019	C					
A TREE FELL ACROSS THE ROAD AND HAD BOTH SIDE OF THE ROAD BLOCKED WHEN THE CLMT HIT THE TREE							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
<b>Policy Year: 2018</b>											
<b>Line of Insurance: GL - GENERAL LIABILITY</b>											
<b>Subtotals for Line of Insurance : GL</b>											
<b>Total Claim Count: 2</b>							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>											
<b>Line of Insurance: MP - MALPRACTICE</b>											
	007	LR	<a href="#">FEA7268</a>	02/22/2019	02/26/2019	03/18/2021	C				
INMATE DIED WHILE IN CUSTODY. FAMILY HAS CONTACTED CHIEF TODAY AND THEY HAVE AN ATTORNEY.							Inc:	\$32,189.00	\$10,000.00	\$0.00	\$22,189.00
							Pd:	\$32,189.00	\$10,000.00	\$0.00	\$22,189.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FEV6405</a>	07/01/2018	01/11/2019	04/19/2019	C				
EEOC COMPLIANT							Inc:	\$2,400.00	\$0.00	\$0.00	\$2,400.00
							Pd:	\$2,400.08	\$0.00	\$0.00	\$2,400.08
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<b>Subtotals for Line of Insurance : MP</b>											
<b>Total Claim Count: 2</b>							Inc:	\$34,589.00	\$10,000.00	\$0.00	\$24,589.00
							Pd:	\$34,589.08	\$10,000.00	\$0.00	\$24,589.08
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>											
<b>Subtotals for Policy Year : 2018</b>											
<b>Total Claim Count: 4</b>							Inc:	\$34,589.00	\$10,000.00	\$0.00	\$24,589.00
							Pd:	\$34,589.08	\$10,000.00	\$0.00	\$24,589.08
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>											
<b>Policy Year: 2019</b>											
<b>Line of Insurance: CM - COMMERCIAL MULTI-PERIL</b>											
	007	LR	<a href="#">FMT0238</a>	12/16/2019	12/17/2019	12/17/2019	C				
REC'D PHONE CALL FROM CLAIMANT @ 8654147225 ON HER 2014 FORD FUSION. SHE STATED SHE HIT A POT HOLE. DAMAGING HER FRONT AND REAR TIRE ARE BUSTED, RIMS ARE BENT, HAD TO BE TOWED, NEEDS ALIGNMENT. WANTS TO FILE A CLAIM.							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FNZ0539</a>	05/22/2020	06/11/2020	06/22/2020	C				
IN HER VERSION, SHE WAS PARKED ACROSS THE BOTTOM OF A FRIEND'S DRIVEWAY ( I APOLOGIZE FOR NOT REMEMBERING THE NAME OF THE ROAD)ABOUT A MONTH AGO AND OUR MOWER CAME BY AND REALLY MESSED UP THE BACK END OF HER TRUCK. I TALKED WITH OU							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**ROANE COUNTY GOVERNMENT**

Policy Number(s): 81M81409



**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
----------	---------	----	--------------	---------------	-------------	------------	-----	-------	-------	---------	---------

**Policy Year: 2019**

**Line of Insurance: CM - COMMERCIAL MULTI-PERIL**

007	LR		<a href="#">FMT4563</a>	02/06/2020	02/19/2020	03/16/2020	C					
CLMNT DRIVING ON STATE ROAD DURING FLOODING - INSD COUNTY REP ADVISED CLMNT TO TAKE A DETOUR ONTO A BLOCKED COUNTY ROAD, CAUSING CLMNT TO DRIVE STRAIGHT INTO FLOODWATERS.								Inc:	\$0.00	\$0.00	\$0.00	\$0.00
								Pd:	\$0.00	\$0.00	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Line of Insurance : CM**

**Total Claim Count: 3**

Inc:	\$0.00	\$0.00	\$0.00	\$0.00
Pd:	\$0.00	\$0.00	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Line of Insurance: GL - GENERAL LIABILITY**

007	LR		<a href="#">FLN9364</a>	12/03/2019	12/05/2019	12/19/2019	C					
ROANE COUNTY HIGHWAY DEPT WAS MOWING AND THREW A ROCK BUSTING WINDSHIELD AND SCRATCHED FENDER OF CLAIMANTS TRUCK.								Inc:	\$262.00	\$262.00	\$0.00	\$0.00
								Pd:	\$261.52	\$261.52	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00

007	LR		<a href="#">FKE8023</a>	07/01/2019	07/01/2019	08/12/2019	C					
CLAIMANT HIT A TREE LIMB BREAKING HIS WINDSHIELD THAT WAS STICKING OUT IN THE ROAD FROM WHERE ROANE COUNTY HWY DEPT CUT SOME TREES OUT OF THE ROAD DUE TO A BAD WIND STORM.								Inc:	\$0.00	\$0.00	\$0.00	\$0.00
								Pd:	\$0.00	\$0.00	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Line of Insurance : GL**

**Total Claim Count: 2**

Inc:	\$262.00	\$262.00	\$0.00	\$0.00
Pd:	\$261.52	\$261.52	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Subtotals for Policy Year : 2019**

**Total Claim Count: 5**

Inc:	\$262.00	\$262.00	\$0.00	\$0.00
Pd:	\$261.52	\$261.52	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Policy Year: 2020**

**Line of Insurance: CM - COMMERCIAL MULTI-PERIL**

007	LR		<a href="#">FRZ5493</a>	05/10/2021	08/19/2021	08/26/2021	C					
CLAIMANT STATE THAT WHEN THE AMBULANCE ARRIVED, IT BACKED INTO THE DRIVEWAY. HE STATED THAT HE WAS STANDING THE GARAGE AND WAS APPROXIMATELY FIVE FEET AWAY AND HAD A CLEAR VIEW WHEN THE AMBULANCE CONTINUED TO BACK AND THE CORNER								Inc:	\$0.00	\$0.00	\$0.00	\$0.00
								Pd:	\$0.00	\$0.00	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense	
<b>Policy Year: 2020</b>												
<b>Line of Insurance: CM - COMMERCIAL MULTI-PERIL</b>												
	007	LR	<a href="#">FQW2300</a>	04/12/2021	06/07/2021	06/15/2021	C					
CLAIMANT VEHICLE HIT A LARGE POTHOLE CAUSING DAMAGE TO 4 WHEELS AND TIRES							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	
	007	LR	<a href="#">FRZ2044</a>	07/01/2020	06/24/2021	07/02/2021	C					
INSURED IS BEING SUED BY CLAIMANT FOR HERSELF AND THE ESTATE OF HER RELATIVE AND HIS MINOR CHILDREN.							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	
	007	LR	<a href="#">FNZ2206</a>	07/05/2020	07/14/2020	07/27/2020	C					
CLAIMANT WAS DRIVING WHEN A LIMB FELL FROM A TREE HITTING HER CAR							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	
	007	LR	<a href="#">FQN5357</a>	03/04/2021	03/09/2021	03/15/2021	C					
CLMT ALLEGES TREE FELL ON HER VEHICLE AS SHE WAS DRIVING ON CANEY CREEK RD							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	
	007	LR	<a href="#">FNZ2213</a>	07/08/2020	07/14/2020	10/01/2020	C					
CLMT STATES SHE WAS DRIVING AND A VINE WAS HANGING DOWN AND WRAPPED AROUND MIRROR AND RIPPED IT OFF							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Subtotals for Line of Insurance : CM</b>												
<b>Total Claim Count: 6</b>							Inc:	\$0.00	\$0.00	\$0.00	\$0.00	
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00	
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00	

**Line of Insurance: GL - GENERAL LIABILITY**

	007	LR	<a href="#">FNU9957</a>	03/17/2021	04/12/2021	05/25/2021	C				
DAMAGE TO FIRE HYDRANT MOWER WITH THE HIGHWAY DEPT. POLICY # ZLP81M81409							Inc:	\$3,550.00	\$3,550.00	\$0.00	\$0.00
							Pd:	\$3,549.95	\$3,549.95	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FNZ2926</a>	07/27/2020	07/27/2020	08/05/2020	C				
CLAIMANT, STATES A LAWNMOWER WITH ROANE COUNTY HIGHWAY DEPARTMENT KICKED UP A ROCK AND HIT HIS VEHICLE CAUSING DAMAGE.							Inc:	\$1,636.00	\$1,636.00	\$0.00	\$0.00
							Pd:	\$1,635.62	\$1,635.62	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense	
<b>Policy Year: 2020</b>												
<b>Line of Insurance: GL - GENERAL LIABILITY</b>												
	007	LR	<a href="#">FNU5993</a>	01/04/2021	01/12/2021	01/29/2021	C					
CLMT STATES WHILE ATTEMPTING TO PASS A ROANE COUNTY MOWER THEY SET THE BLADE ON HIS FENDER CAUSING DAMAGE.								Inc:	\$2,100.00	\$2,100.00	\$0.00	\$0.00
								Pd:	\$2,099.94	\$2,099.94	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FNU7981</a>	02/23/2021	02/25/2021	03/05/2021	C					
CLAIMANT ALLEGES INSD CAUSED HOLES IN CLAIMANT SIDING FROM MOWING								Inc:	\$2,322.00	\$2,322.00	\$0.00	\$0.00
								Pd:	\$2,322.33	\$2,322.33	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FRZ6435</a>	05/07/2021	09/03/2021	12/09/2021	C					
WE HAD A MOWER AT THIS LOCATION ON THIS DAY AND THIS LADY SAYS WE BUSTED HER WATER METER AND CUT OFF HER WATER. SHE HAD TO HAVE AN EMERGENCY REPAIR DONE. PICS ARE HERE AND THE INVOICE IS ATTACHED.								Inc:	\$0.00	\$0.00	\$0.00	\$0.00
								Pd:	\$0.00	\$0.00	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<b>Subtotals for Line of Insurance : GL</b>								Inc:	\$9,608.00	\$9,608.00	\$0.00	\$0.00
<b>Total Claim Count: 5</b>								Pd:	\$9,607.84	\$9,607.84	\$0.00	\$0.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>												
<b>Line of Insurance: MP - MALPRACTICE</b>												
	007	LR	<a href="#">E3N7570</a>	07/01/2020	04/21/2021	04/13/2022	C					
CLASS ACTION - AGAINST EVERY COUNTY IN TENNESSEE ALLEGING CONSTITUTIONAL DUE PROCESS VIOLATION.								Inc:	\$3,424.00	\$0.00	\$0.00	\$3,424.00
								Pd:	\$3,424.00	\$0.00	\$0.00	\$3,424.00
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">FRZ6793</a>	07/01/2020	09/09/2021		O					
THIS IS AN ACTION FOR THE WRONGFUL DEATH OF DECEASED WHILE THE DECEASED WAS IN THE CUSTODY OF THE DEFENDANTS.								Inc:	\$110,000.00	\$60,000.00	\$0.00	\$50,000.00
								Pd:	\$15,940.00	\$0.00	\$0.00	\$15,940.00
								O/S:	\$94,060.00	\$60,000.00	\$0.00	\$34,060.00
	007	LR	<a href="#">FRZ1890</a>	07/01/2020	06/23/2021	03/07/2023	C					
PLAINTIFF ALLEGES THAT THE DEFENDANTS CONSPIRED TO EXTORT BOND MONIES FROM HIM IN VIOLATION OF HIS CONSTITUTIONAL RIGHTS								Inc:	\$7,155.00	\$0.00	\$0.00	\$7,155.00
								Pd:	\$7,155.10	\$0.00	\$0.00	\$7,155.10
								O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<b>Subtotals for Line of Insurance : MP</b>								Inc:	\$120,579.00	\$60,000.00	\$0.00	\$60,579.00
<b>Total Claim Count: 3</b>								Pd:	\$26,519.10	\$0.00	\$0.00	\$26,519.10
								O/S:	\$94,059.90	\$60,000.00	\$0.00	\$34,059.90

**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
<b>Policy Year: 2020</b>											
<b>Subtotals for Policy Year : 2020</b>											
<b>Total Claim Count: 14</b>							Inc:	\$130,187.00	\$69,608.00	\$0.00	\$60,579.00
							Pd:	\$36,126.94	\$9,607.84	\$0.00	\$26,519.10
							O/S:	\$94,060.06	\$60,000.16	\$0.00	\$34,059.90
<hr/>											
<b>Policy Year: 2021</b>											
<b>Line of Insurance: MP - MALPRACTICE</b>											
	007	LR	<a href="#">A2G4984</a>	06/27/2022	07/01/2022		O				
SEE ATTACHED LAWSUIT							Inc:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
<hr/>											
<b>Subtotals for Line of Insurance : MP</b>											
<b>Total Claim Count: 1</b>							Inc:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
<hr/>											
<b>Subtotals for Policy Year : 2021</b>											
<b>Total Claim Count: 1</b>							Inc:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$15,000.00	\$0.00	\$0.00	\$15,000.00
<hr/>											
<b>Policy Year: 2022</b>											
<b>Line of Insurance: GL - GENERAL LIABILITY</b>											
	007	LR	<a href="#">A2F4477</a>	09/25/2022	09/29/2022		O				
CLAIMANT WAS FATALLY INJURED DURING AN ATTACK BY TWO PIT BULLS							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">A3C9530</a>	09/23/2022	09/26/2022	09/27/2022	C				
WHEN THE LITTER TRUCK AND RANDY'S TRUCK WERE PASSING EACH OTHER AT 133 WHITE PINE ROAD, THE BRUSH LOAD ON THE LITTER TRUCK'S TRAILER HIT RANDY'S WINDSHIELD CRACKING IT.							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
	007	LR	<a href="#">A2F6776</a>	09/16/2022	11/14/2022	03/22/2023	C				
CLAIMANT WAS ATTENDING AN EVENT AT RCHS ON 9-16-22 WHEN SHE WAS INJURED. SHE HAS BEEN TO A COUPLE OF APPOINTMENTS FOR AN INJURY SUSTAINED FROM A FALL. MY UNDERSTANDING THAT MEDICAL TREATMENT WAS REFUSED AT THE TIME OF I							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00

**ROANE COUNTY GOVERNMENT**

Policy Number(s): 81M81409



**Detail Loss Report**

**Losses From: 04/03/2018 To 04/03/2023**

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
<b>Policy Year: 2022</b>											
<b>Line of Insurance: GL - GENERAL LIABILITY</b>											
<b>Subtotals for Line of Insurance : GL</b>											
<b>Total Claim Count: 3</b>							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>											
<b>Line of Insurance: MP - MALPRACTICE</b>											
	007	LR	<a href="#">A2F6703</a>	07/01/2022	11/10/2022		O				
PLAINTIFF CLAIMS THAT JUDGE, CLERK AND DEFENDANT IN HIS UNDERLYING LAWSUIT CONSPIRED TO DEPRIVE HIM OF HIS CONSTITUTIONAL RIGHTS.							Inc:	\$25,000.00	\$0.00	\$0.00	\$25,000.00
							Pd:	\$1,300.50	\$0.00	\$0.00	\$1,300.50
							O/S:	\$23,699.50	\$0.00	\$0.00	\$23,699.50
	007	LR	<a href="#">A2F4108</a>	09/21/2022	09/22/2022		O				
AN INMATE @ THE ROANE COUNTY JAIL WAS FOUND UNRESPONSIVE ON 9/21/22. EMT'S WERE DISPATCHED AND SHE WAS REVIVED, ONLY TO PASS AT THE HOSPITAL.							Inc:	\$0.00	\$0.00	\$0.00	\$0.00
							Pd:	\$0.00	\$0.00	\$0.00	\$0.00
							O/S:	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>											
<b>Subtotals for Line of Insurance : MP</b>											
<b>Total Claim Count: 2</b>							Inc:	\$25,000.00	\$0.00	\$0.00	\$25,000.00
							Pd:	\$1,300.50	\$0.00	\$0.00	\$1,300.50
							O/S:	\$23,699.50	\$0.00	\$0.00	\$23,699.50
<hr/>											
<b>Subtotals for Policy Year : 2022</b>											
<b>Total Claim Count: 5</b>							Inc:	\$25,000.00	\$0.00	\$0.00	\$25,000.00
							Pd:	\$1,300.50	\$0.00	\$0.00	\$1,300.50
							O/S:	\$23,699.50	\$0.00	\$0.00	\$23,699.50
<hr/>											
<b>Report Grand Totals</b>											
<b>Total Claim Count: 31</b>							Inc:	\$207,230.00	\$79,870.00	\$0.00	\$127,360.00
							Pd:	\$74,470.44	\$19,869.36	\$0.00	\$54,601.08
							O/S:	\$132,759.56	\$60,000.64	\$0.00	\$72,758.92

Detail Loss Report Losses From: 04/03/2018 To 04/03/2023

Report Parameters

Losses From: 04/03/2018 To 04/03/2023

Policy Number(s): 81M81409

Sorts

Sort Name	Sort Label	Subtotal	Page Break
1. Policy Year	Policy Year	Y	N
2. Line of Insurance	Line of Insurance	Y	N

Limiting Statements

Large Loss Limiting

Drill Down Limiting Criteria