



A Berkley Company

Loss Experience

Report Data Valued As Of: 1/7/2020

Starnet Insurance Company

CITY OF MANCHESTER - All (992-1480)

All Available Years



Client Type: **City of Manchester**
 Agency: **Starnet Insurance Company**
 Policy Type: **Accident and Sickness**
 Policy Period: **01/01/2016 - 12/31/2019**
 Report Period: **01/01/2016 - 12/31/2019**
 Report Date: **01/07/2020**

STRAIN - ELBOW - Strain

16039022
 Medical Record Only
 Closed
 08/26/2016
 09/27/2016
 16036480

INJURED WORKER WAS LOADING PIPES ONTO A TRUCK AND STRAINED HIS ELBOW

Indemnity	0.00	0.00	0.00
Medical	0.00	0.00	0.00
Expense	0.00	0.00	0.00
Totals	0.00	0.00	0.00

Received 32 days
FRACTURE - LOWER ARM - RADIUS, ULNA - Fall

Compensation
 Closed
 09/07/2016
 09/14/2016
 16037532

WALKING DOWN SIDEWALK AT WAREHOUSE, TRIPPED ON UNEVEN PAVEMENT AND FELL INJURING LEFT ELBOW & RIGHT WRIST AND ABRASIONS, POSSIBLE FRACTURE

Indemnity	7,093.26	0.00	7,093.26
Medical	8,466.69	0.00	8,466.69
Expense	2,862.90	0.00	2,862.90
Totals	18,422.85	0.00	18,422.85

Received 7 days
BURN - UPPER EXTREMITIES (ARMS) - Burn

Medical Record Only
 Closed
 09/21/2016
 09/22/2016
 16038002

EMPLOYEE WAS STRIPPING FLOORS AT THE MANCHESTER RECREATION COMPLEX AND HAD RASH, RED SPOTS SHOW UP ON HIS CHEST, BACK AND ARMS

Indemnity	0.00	0.00	0.00
Medical	0.00	0.00	0.00
Expense	0.00	0.00	0.00
Totals	0.00	0.00	0.00

Received 1 day
SPRAIN - LOWER BACK - LUMBAR LUMBO-SACRAL - Fall

Compensation
 Closed
 09/27/2016
 09/27/2016
 16042403

EMPLOYEE TRIPPED ON CORNER OF TABLE AND FELL INJURED LOWER BACK

Indemnity	26,691.44	0.00	26,691.44
Medical	20,480.01	0.00	20,480.01
Expense	3,896.05	0.00	3,896.05
Totals	51,067.50	0.00	51,067.50

Received same day
LACERATION - HAND - METACARPALS - Struck

Medical
 Closed
 Policy year(s) with no claim activity are not displayed.

OFFICER WAS ATTEMPTING TO CONTROL A SUICIDAL SUBJECT ARMED WITH A KNIFE AND WAS ACCIDENTALLY CUT ON THE HAND

Indemnity	0.00	0.00	0.00
Medical	377.99	0.00	377.99
Expense	56.80	0.00	56.80



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CITY OF MANCHESTER - All (992-1480)
All Available Years



Sheet 3
Group Name: City of Manchester
Agency: City of Manchester
Report Date: 1/7/2020
Report Period: 1/1/2010 - 12/31/2019
Number of Policy Years: 10

10/30/2016
Received 5 days
1804743
Medical
Closed
10/31/2016
11/02/2016
1804292
Compensation
Closed
11/08/2016
11/09/2016
1804694
Medical
Closed
11/10/2016
11/29/2016
1804573
Medical
Closed
12/08/2016
12/09/2016
1700281

Received 5 days
OTHER SPECIFIC INJURIES, KCC - MOUTH - LIP/TONGUE/THROAT/TASTE - Misc
FIREFIGHTER WAS STUNG BY BEE IN MOUTH, CAUSING A SEVERE ALLERGIC REACTION
Received 2 days
DISLOCATION, PINCHED NERVE, TEAR - HAND - METACARPALS - Fall
FELL DURING CLEANING OF SHOWER STALL SLAMMING HAND AND KNEE ON WALL
Received 1 day
SPRAIN - SHOULDER - ARM/FT. ROTATOR CLIFF, SCAPULA - Fall

Medical
Closed
11/10/2016
11/29/2016
1804573
Medical
Closed
12/08/2016
12/09/2016
1700281

Received 19 days
SPRAIN - KNEES) - Strain
AFTER EXITING TRUCK MR. SPENCER TURNED TO SHUT DOOR OF FIRE TRUCK AND FELT KNEE PAIN
Received 1 day
SPRAIN - MULTIPLE BODY PARTS - Fall

Code	Expense	Indemnity	Total
Totals	434.59	0.00	434.59
Indemnity	0.00	0.00	0.00
Medical	606.08	0.00	606.08
Expense	42.25	0.00	42.25
Totals	648.33	0.00	648.33
Indemnity	6,031.24	0.00	6,031.24
Medical	10,916.89	0.00	10,916.89
Expense	1,424.11	0.00	1,424.11
Totals	18,372.24	0.00	18,372.24
Indemnity	0.00	0.00	0.00
Medical	994.58	0.00	994.58
Expense	100.66	0.00	100.66
Totals	1,095.24	0.00	1,095.24
Indemnity	0.00	0.00	0.00
Medical	547.93	0.00	547.93
Expense	52.43	0.00	52.43
Totals	600.36	0.00	600.36
Indemnity	0.00	0.00	0.00

Policy year(s) with no claim activity are not displayed.
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a Berkeley Company

Loss Experience

Report Data Valued As Of: 1/7/2020

Starnet Insurance Company

CITY OF MANCHESTER - All (992-1480)

All Available Years



Company: City of Manchester
Account: 30000
Policy: 10000
Effective Date: 1/1/2017
Reporting Period: 1/1/2017 - 1/31/2020

Medical Record Only	Employee	Injury Description	Medical Expense	Indemnity	Medical Expense	Indemnity
01/12/2017	Received 1 day	EMPLOYEE WAS LOCATING A WATER LINE IN THE PARKING LOT OF MARCHON'S PHARMACY AND FELL ON RIGHT SIDE.	0.00	0.00	0.00	0.00
01/13/2017	Received 1 day	CONTUSION - HAND - METACARPALS - Struck	0.00	0.00	0.00	0.00
01/15/2017	Received 5 days	OFFICER ADCOCK WAS RESTRAINING A COMBATIVE PRISONER AND DURING THE INCIDENT RECEIVED INJURY TO HAND	49.78	0.00	49.78	0.00
01/20/2017	Received 5 days	SPRAIN - SHOULDER - AC/MPJ, ROTATOR CUFF, SCAPULA - Fall	467.11	0.00	467.11	0.00
02/08/2017	Received 2 days	GREASING TRUCK AND WAS COMING DOWN THE STEPS AND SLIPPED AND FELL BACK AGAINST THE BAR ON THE TRUCK	166.17	0.00	166.17	0.00
02/10/2017	Received 2 days	FOREIGN BODY - MULTIPLE BODY PARTS - Burn	13.79	0.00	13.79	0.00
02/14/2017	Received 270 days	EE TRIED RESTRAINING SUSPECT WHO WAS COMBATIVE. SUSPECT WAS INJURED DURING ALTERCATION AND SPIT BLOOD ONTO EES FACE	176.96	0.00	176.96	0.00
04/18/2017	Received 270 days	SPRAIN - ANKLE - TARSALS - Strike Against	92.85	0.00	92.85	0.00
05/10/2017	Received 2 days	STEPPED IN A HOLE WHEN RETURNING FROM BURNING STRUCTURE	279.87	0.00	279.87	0.00
05/10/2017	Received 2 days		17.23	0.00	17.23	0.00
Totals			297.10	0.00	297.10	0.00



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StarNet Insurance Company

CITY OF MANCHESTER - All (992-1480)

All Available Years



Client # 17016729 Employee Medical Expense Indemnity Expense Total Expense Total Indemnity

17016729 [REDACTED] SPRAIN - SHOULDER - ANKLE, ROTATOR CUFF, SCAPULA - Mac 0.00 0.00 0.00 0.00

Medical EMPLOYEE ATTEMPTED TO PULL A MILITARY LIGHT TOWER Indemnity 0.00 0.00 0.00 0.00

Closed 05/19/2017 Expense 721.14 0.00 721.14 0.00

05/19/2017 Received 23 days Totals 788.58 0.00 788.58 0.00

17017598 PUNCTURE - UPPER ARM, HUMERUS - Cuff/Puncture Indemnity 0.00 0.00 0.00 0.00

Medical EMPLOYEE SLIPPED ON WET FLOOR AND PUNCTURED ARM ON A PIPE Medical 99.32 0.00 99.32 0.00

Closed 06/10/2017 Expense 12.34 0.00 12.34 0.00

06/10/2017 Received 5 days Totals 111.66 0.00 111.66 0.00

StarNet Insurance Company - CITY OF MANCHESTER - All (992-1480) Indemnity 39,815.94 0.00 39,815.94 0.00

Total Claims: 16 Medical 44,050.86 0.00 44,050.86 0.00

Expense 8,610.57 0.00 8,610.57 0.00

Totals 92,477.37 0.00 92,477.37 0.00

Policy year(s) with no claim activity are not displayed.



A Berkey Company

Loss Experience

Report Data Valued As Of: 1/7/2020

STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2017



Claim # 17023437
 Date of Loss 08/18/2017
 Reported Date 08/22/2017
 Employee Name [REDACTED]
 Description of Injury Received [REDACTED]
 Reported by [REDACTED]
 Date of Report [REDACTED]

170234328 [REDACTED] STRAIN - LOWER BACK - LUMBAR, LUMBO-SACRAL - Strain
 Compensation Closed WENT TO STEP INTO TRUCK AND RIGHT LEG GAVE AWAY, CAUSING PAIN IN BACK AND LEGS
 08/18/2017 Received 14 days
 08/28/2017 [REDACTED] STRAIN - MULTIPLE BODY PARTS - Fall
 17023437

Compensation Closed SLIPPED ON MUD AND FELL HURTING NECK AND RIGHT SHOULDER
 08/18/2017 Received 3 days
 08/21/2017 [REDACTED] STRAIN - UPPER BACK - THORACIC AREA - Strain
 17028927

Medical Closed EMPLOYEE WAS PICKING UP BASE OF FLAG POLE AND HAD SEVERE BACK SPASMS WHICH MADE IT DIFFICULT FOR HIM TO MOVE
 10/12/2017 Received 8 days
 10/18/2017 [REDACTED] NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc
 18038540

Medical Record Only HARRIS WAS THE PRIMARY CREW MEMBER IN CHARGE OF PERFORMING EXTRICATION OF A VEHICLE FIRE. SEATS HAD TO BE REMOVED WITH THE REMAINS STILL IN THE SEATS
 Closed 02/22/2018 Received 93 days
 11/21/2017 [REDACTED] STRAIN - SHOULDER - ANKLE, ROTATOR CUFF, SCAPULA - Fall
 18034939

Compensation Closed CLIMBING OUT OF VALVE PIT, SLIPPED AND CAUGHT HIMSELF. NEXT MORNING COULD NOT RAISE ARM
 Closed Policy year(s) with no claim activity are not displayed.

Claim #	Date of Loss	Reported Date	Employee Name	Description of Injury Received	Reported by	Date of Report	Indemnity	Medical	Expense	Totals
170234328	[REDACTED]	[REDACTED]	[REDACTED]	STRAIN - LOWER BACK - LUMBAR, LUMBO-SACRAL - Strain	[REDACTED]	[REDACTED]	16,684.13	7,986.17	834.86	25,577.16
17023437	[REDACTED]	[REDACTED]	[REDACTED]	STRAIN - MULTIPLE BODY PARTS - Fall	[REDACTED]	[REDACTED]	14,998.10	5,809.83	890.05	21,798.08
17028927	[REDACTED]	[REDACTED]	[REDACTED]	STRAIN - UPPER BACK - THORACIC AREA - Strain	[REDACTED]	[REDACTED]	0.00	170.72	28.87	199.59
18038540	[REDACTED]	[REDACTED]	[REDACTED]	NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc	[REDACTED]	[REDACTED]	0.00	0.00	0.00	0.00
18034939	[REDACTED]	[REDACTED]	[REDACTED]	STRAIN - SHOULDER - ANKLE, ROTATOR CUFF, SCAPULA - Fall	[REDACTED]	[REDACTED]	2,500.00	4,873.71	1,171.54	8,545.25



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Report Data Valued As Of: 1/17/2020

STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2017



City of Manchester
 100 North Main Street
 Manchester, NH 03102
 Phone: 603.271.1000
 Fax: 603.271.1001
 Email: info@cityofmanchester.com

11/28/2017
 01/08/2018
 18034680

Received 41 days
 STRAIN - SHOULDER - ARM/PT, ROTATOR CUFF, SCAPULA - Fall
 SLIPPED WHEN CLIMBING DOWN FROM CARDOBOARD TRUCK

Compensation Closed
 12/27/2017
 01/03/2018
 18036894

Received 7 days
 STRAIN - LOWER BACK - LUMBAR, LUMBOSACRAL - Strain

Medical Claim Denied Closed
 01/18/2018
 18039897

RESPONDED TO WATER FLOW ALARM. FIREMAN ROBISON WAS USING A SQUEEGEE TO PUSH WATER
 Received 13 days
 CONTUSION - ANKLE - TARSALS - Struck

Medical Record Only Closed
 01/20/2018
 01/31/2018
 18036574

WORKING ON STRUCTURE FIRE. FIREFIGHTER WAS TEARING SIDING OFF THE HOUSE WITH PICKHEAD AXE. THE HEAD OF AXE CAME DOWN AND PIC PART HIT RIGHT ANKLE
 Received 11 days
 DISLOCATION, PINCHED NERVE, TEAR - UPPER EXTREMITIES (ARMS) - Strain

Compensation Closed
 01/22/2018
 18039856

RECEIVED 911 CALL FROM A CITIZEN STATING HER HUSBAND HAD FALLEN. PATROLMAN GADOKEN RESPONDED TO THE CALL AND LIFTED THE HUSBAND OFF THE FLOOR.
 Received 4 days
 BURN - HAND - METACARPALS - Burn

18039856

Category	Indemnity	Medical Expense	Totals
11/28/2017 - 01/08/2018	0.00	0.00	0.00
01/08/2018 - 12/27/2017	0.00	0.00	0.00
12/27/2017 - 01/03/2018	0.00	0.00	0.00
01/03/2018 - 01/18/2018	0.00	0.00	0.00
01/18/2018 - 01/20/2018	0.00	0.00	0.00
01/20/2018 - 01/31/2018	0.00	0.00	0.00
01/31/2018 - 01/22/2018	1,950.33	24,962.85	26,913.18
01/22/2018 - 01/26/2018	0.00	4,037.64	4,037.64
01/26/2018 - 18039856	0.00	0.00	0.00
Totals	1,950.33	28,999.49	30,949.82

Policy year(s) with no claim activity are not displayed.



18 Berkeley Company

Loss Experience

Report Data Valued As of: 1/7/2020

STARLET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2017



Client: City of Manchester
 Group: 18 Berkeley Company
 Account: 2017-1076
 Policy: 18041827
 Report Date: 1/7/2020

02/26/2018
 Closed
 EMPLOYEE OPENED MICROWAVE DOOR TO GET FOOD AND MICROWAVE CONTINUED TO RUN AFTER DOOR WAS OPENED BURNING HAND. MICROWAVE HAS BEEN DISPOSED.

03/07/2018
 Closed
 Received 9 days
 SPRAIN - (KNEE(S)) - Fall

03/05/2018
 Closed
 EMPLOYEE WAS DELIVERING SUPPLIES TO FRED DEADMAN PARK AND STEPPED OFF SIDEWALK AND KNEE BUCKLED.

03/07/2018
 Closed
 Received 2 days
 STRAIN - MULTIPLE BODY PARTS - Various

18041049
 Medical
 EE STATING HE WAS DRIVING AND STOPPED AT LIGHT WHEN HE WAS REAR ENDED FROM BEHIND HURTING BACK OF HEAD ON SEAT REST STIFF NECK AND SHOULDERS

03/28/2018
 Closed
 Received 21 days
 SPRAIN - ANKLE - TARSALS - Misc

18041145
 Compensation
 STEPPED IN A METER BOX THAT WAS MISSING ALID

03/28/2018
 Closed
 Received 1 day
 NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc

18041827
 Medical
 BLOOD WAS SPRAYED IN EYES, MOUTH AND FACE AREA

04/05/2018
 Closed
 Received 1 day

Policy year(s) with no claim activity are not displayed.

Medical	103.34	0.00	103.34
Expense	8.67	0.00	8.67
Totals	114.01	0.00	114.01

Indemnity	0.00	0.00	0.00
Medical	482.64	0.00	482.64
Expense	24.13	0.00	24.13
Totals	486.77	0.00	486.77

Indemnity	0.00	0.00	0.00
Medical	0.00	0.00	0.00
Expense	0.00	0.00	0.00
Totals	0.00	0.00	0.00

Indemnity	4,754.97	0.00	4,754.97
Medical	2,298.51	0.00	2,298.51
Expense	128.66	0.00	128.66
Totals	7,090.14	0.00	7,090.14

Indemnity	0.00	0.00	0.00
Medical	203.27	0.00	203.27
Expense	104.47	0.00	104.47
Totals	307.74	0.00	307.74



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Loss Experience

Report Data Valued As Of: 1/7/2020

STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2017



Client # 00001199
 Group Name City of Manchester
 Account Number 00000000000000000000
 Report Date 1/7/2020
 Report of Injury Part of Class
 Report of Injury Part of Class
 Report of Injury Part of Class

18042011	Medical	18042011	Medical	18042011	Medical	18042011	Medical
	Closed		Closed		Closed		Closed
	04/09/2018		04/09/2018		04/09/2018		04/09/2018
	Received 1 day		Received 1 day		Received 1 day		Received 1 day
	NEEDLE STICK DURING SEARCH OF SUSPECT		BENDING OVER TO HOOK UP BACK FLOW PREVENTOR AND SOMETHING POPPED IN BACK		STRAIN - LOWER BACK - LUMBAR, LUMBO-SACRAL - Strain		STRAIN - UPPER EXTREMITIES (ARMS) - Strain
	Indemnity		Indemnity		Indemnity		Indemnity
	0.00		0.00		0.00		0.00
	Medical		Medical		Medical		Medical
	612.92		302.94		1,382.20		1,382.20
	Expense		Expense		Expense		Expense
	75.61		16.64		68.51		68.51
	Totals		Totals		Totals		Totals
	688.53		319.58		1,450.71		1,450.71

18045020	Medical	18045020	Medical	18045020	Medical	18045020	Medical
	Closed		Closed		Closed		Closed
	04/16/2018		04/16/2018		04/16/2018		04/16/2018
	Received same day		Received same day		Received same day		Received same day
	NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc		PRISONER SPT IN OFFICER FOWLER'S FACE		SPRAIN - KNEE(S) - Strain		SPRAIN - KNEE(S) - Strain
	Indemnity		Indemnity		Indemnity		Indemnity
	0.00		0.00		0.00		0.00
	Medical		Medical		Medical		Medical
	304.64		304.64		304.64		304.64
	Expense		Expense		Expense		Expense
	40.04		40.04		40.04		40.04
	Totals		Totals		Totals		Totals
	344.68		344.68		344.68		344.68

18045144	Medical	18045144	Medical	18045144	Medical	18045144	Medical
	Closed		Closed		Closed		Closed
	05/17/2018		05/17/2018		05/17/2018		05/17/2018
	Received 8 days		Received 8 days		Received 8 days		Received 8 days
	MOVING CARDIO EQUIPMENT		MOVING CARDIO EQUIPMENT		MOVING CARDIO EQUIPMENT		MOVING CARDIO EQUIPMENT
	Indemnity		Indemnity		Indemnity		Indemnity
	0.00		0.00		0.00		0.00
	Medical		Medical		Medical		Medical
	308.38		308.38		308.38		308.38
	Expense		Expense		Expense		Expense
	43.50		43.50		43.50		43.50
	Totals		Totals		Totals		Totals
	351.88		351.88		351.88		351.88

Policy year(s) with no claim activity are not displayed.



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STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2018



Group # 18046377
 Client Type
 Policy Type
 Policy Description
 Policy Effective Date
 Policy Termination Date
 Policy Renewal Date

Policy Description
 POISONING-CHEMICAL - EYE - OPTIC NERVE,ETC,ETC,VISION - Misc

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18046377
 Medical
 Closed
 07/18/2018
 18050533
 Medical
 Closed
 07/13/2018
 18050533
 Medical
 Closed
 07/28/2018
 18054113
 Medical
 Closed
 09/11/2018
 19002479
 Medical
 Closed
 09/11/2018
 19001629
 Medical
 Closed

Received same day
 WAS PUTTING ACID IN POOL CONTAINER HAD BEEN OPENED PREVIOUSLY AND WHEN HE SAW THE BUCKET DOWN IT SPLASHED INTO HIS EYES

Received same day
 SARAH HAS BEEN WORKING FOR THE SUMMER DAYCAMP PROGRAM WITH KIDS AND WAS PLAYING SOCCER AND TRIPPED OVER A CHILD AND FELL ON KNEE

Received 4 days
 STRAIN - UPPER BACK - THORACIC AREA - Strain

Received same day
 NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc

Received 42 days
 LACERATION - HAND - METACARPALS - Cut/Fracture

Medical Claim Denied
 LOW BLOOD SUGAR

EE WAS HELPING A MOTORIST AND CUT MIDDLE FINGER ON LEFT HAND.

Indemnity 0.00
 Medical 93.50
 Expense 11.47
Totals 104.97

Indemnity 0.00
 Medical 177.08
 Expense 8.40
Totals 185.48

Indemnity 0.00
 Medical 959.47
 Expense 42.48
Totals 1,001.95

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00

Indemnity 0.00
 Medical 223.30
 Expense 15.27
Totals 238.57

Indemnity 0.00
 Medical 0.00
 Expense 0.00
Totals 0.00



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STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2018



01/03/2019
 01/15/2019
 19004797
 Medical
 Closed
 03/05/2019
 03/19/2019
 19004924
 Medical Record Only
 Closed
 03/19/2019
 03/21/2019
 19005843
 Compensation
 Open
 04/10/2019
 04/10/2019
 04/16/2019
 19006882

Received 12 days

STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain

Received 14 days

SPRAIN - CHEST - RBS, STERNUM, SOFT TISSUE - Vehicle

Received 2 days

WATER VEHICLE WAS STRUCK BY A VEHICLE, STIFF AND SORENESS OF UPPER NECK, SHOULDER AND BACK.

Received 2 days

FRACTURE - FINGER - Caught

HAD A STEEL PIPE IN A VICE, PUTTING COUPLING ON AND THE PIPE SLIPPED AND GOT PINKY FINGER (LEFT HAND) CAUGHT BETWEEN THE VICE AND PIPE

Received same day

CONTUSION - LOWER LEG - TIBIA, FIBULA - Misc

WHILE ARRESTING A SUSPECT, THE SUSPECTS DOG BIT THE OFFICER ON THE LOWER RIGHT CALF

Received 6 days

STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain

Received 6 days

STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain

Policy year(s) with no claim activity are not displayed.

Code	Start Date	End Date	Days	Description	Indemnity	Medical	Expense	Totals
01/03/2019	01/15/2019		12	STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain	0.00	1,013.37	74.86	1,088.22
03/05/2019	03/19/2019		14	SPRAIN - CHEST - RBS, STERNUM, SOFT TISSUE - Vehicle	0.00	0.00	0.00	0.00
03/19/2019	03/21/2019		2	WATER VEHICLE WAS STRUCK BY A VEHICLE, STIFF AND SORENESS OF UPPER NECK, SHOULDER AND BACK.	0.00	0.00	0.00	0.00
03/21/2019			2	FRACTURE - FINGER - Caught	8,935.79	6,948.53	15,886.32	31,770.64
04/10/2019	04/10/2019		1	HAD A STEEL PIPE IN A VICE, PUTTING COUPLING ON AND THE PIPE SLIPPED AND GOT PINKY FINGER (LEFT HAND) CAUGHT BETWEEN THE VICE AND PIPE	6,978.41	5,770.58	12,750.00	25,508.99
04/16/2019			1	CONTUSION - LOWER LEG - TIBIA, FIBULA - Misc	1,457.30	294.25	1,751.55	3,203.10
04/16/2019			1	WHILE ARRESTING A SUSPECT, THE SUSPECTS DOG BIT THE OFFICER ON THE LOWER RIGHT CALF	0.00	0.00	0.00	0.00
04/16/2019			1	STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain	304.54	0.00	32.08	336.62
04/16/2019			1	STRAIN - SHOULDER - ARMPT, ROTATOR CUFF, SCAPULA - Strain	0.00	0.00	0.00	0.00
Totals					17,372.50	13,014.37	30,386.87	60,773.74



a Berkley Company

Loss Experience

Report Data Valued As Of: 1/7/2020

STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2018



MasterKey
Connects.

Claim #	Event Type	Event Description	Received & date	Medical	Indemnity	Medical Expense	Totals
04/24/2019	Medical	WAS TURNING FIRE HYDRANT AND SHOULDER POPPED		606.67	0.00	606.67	606.67
04/24/2019	Chaeed			57.81	0.00	57.81	57.81
Totals				664.48	0.00	664.48	664.48
STARNET INSURANCE COMPANY - CITY OF MANCHESTER - All (993-1076)							
Total Claims: 10							

Policy year(s) with no claim activity are not displayed.



a Berkley Company

Loss Experience

Report Data Valued As Of: 1/7/2020

STARNET INSURANCE COMPANY

CITY OF MANCHESTER - All (993-1076)

Policy Year: 2019



Group # [REDACTED] Employee # [REDACTED] Policy # [REDACTED]
 Contract # [REDACTED] Account # [REDACTED] Description [REDACTED]
 Policy # [REDACTED] Policy # [REDACTED] Policy # [REDACTED]

KEY000008273 **[REDACTED]** **PUNCTURE - EYE - OPTIC NERVE/EYE/US.VISION - Calf/Puncture**
 Medical METAL SHAWNG GOT IN EYE
 Open 08/11/2019

KEY000008075 **[REDACTED]** **NO PHYSICAL INJURY - NO PHYSICAL INJURY - Misc**
 Medical FELT SICK AFTER GYMNASIUM FLOORS WERE REFINISHED
 Closed 08/28/2019

KEY000008089 **[REDACTED]** **OTHER SPECIFIC INJURIES; NOC - TEETH - Misc**
 Medical Record Only GRABBED SALT SHAKER FROM TABLE, APPLIED TO FOOD. THE CONTENTS OF SALT SHAKER
 Closed WAS POWDERED GLASS.
 08/28/2019

Received 4 days	Received 2 days	Received 2 days
Indemnity	0.00	0.00
Medical	0.00	0.00
Expense	0.00	0.00
Totals	0.00	0.00
Indemnity	0.00	0.00
Medical	0.00	0.00
Expense	0.00	0.00
Totals	0.00	0.00

Total Claims: 3

Policy year(s) with no claim activity are not displayed.



Risk Manager

Policy Loss Analysis Summary By Line of Business For All Locations

Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100881
 Policy Number: 791001895-0000

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000
 Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Liability

Claim/Suffix	Suffix Status	Claimant	Loss Rev \$	Loss Paid \$	Alleg-Exp Rev \$	Exp Pd \$	Subrod/Salvage \$	Subtotal \$	Dead Amt Rcvd \$	Total \$
AB-272430 01	Open		5,000	0	27,000	0	0	32,000	0	32,000
Type of Loss: Liability - EPL										
Claim Totals:			5,000	0	27,000	0	0	32,000	0	32,000

Loss Date: 11/13/2019 Date Reported: 11/18/2019 Claim Status: Open

Accident Location: Manchester, TN
 Cause of Accident: EPL - Retaliation Discrimination - Retaliation - Claimant pursuing discrimination claim
 Claim Description: IE alleges retaliation and freedom of speech.

AB-273022 01	Open	Claim Totals:	100	0	0	0	0	100	0	100
Type of Loss: OBI										

Loss Date: 12/07/2019 Date Reported: 12/16/2019 Claim Status: Open

Accident Location: Manchester, TN
 Cause of Accident: BI/PD - Slips/Trip/Fall Building - Slips/Trips/Falls - Sidewalks Other Than Ice/Snow
 Claim Description: Cirlt allegedly tripped & fell on sidewalk at park

Totals for Liability	5,100	0	27,000	0	0	0	0	32,100	0	32,100
2 (Claims)										

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100861

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000

	Total Claims	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvage \$	Subtotal \$	Debt Amt Recvd \$	Total \$
Totals for Policy 791001895-0000	2	5,100	0	27,000	0	0	32,100	0	32,100

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100881
 Policy Number: 791001895-0000

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000
 Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Automobile

Claim/Suffix	Suffix Status	Claimant	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvge \$	Subtotal \$	Dead Amt Rcvd \$	Total \$
AB-273065 01	Closed		0	0	0	0	0	0	0	0
Type of Loss:	APD									
Claim Totals:			0	0	0	0	0	0	0	0

Loss Date: 11/15/2019 Date Reported: 11/22/2019 Claim Status: Closed

Accident Location: Manchester, TN
 Cause of Accident: Other Type of Accidents - All Other - Auto (Passenger Type)-Insured Owner - Our Insured--Not At Fault
 Claim Description: windshield claim.
 Driver: Driver Name Not Available

AB-274031 01	Closed	City of Manchester,	0	808	0	0	0	808	0	808
Type of Loss:	Collision									
Claim Totals:			0	808	0	0	0	808	0	808

Loss Date: 10/28/2019 Date Reported: 12/05/2019 Claim Status: Closed

Accident Location: Manchester, TN
 Cause of Accident: Backing Up By Insured Without clear vision - Auto (Passenger Type)-Insured Owner - Our Insured--At Fault
 Claim Description: Insured was backing from parking same at the same time claimant was pulling into lot and both v

AB-274896 01	Open	City of Manchester,	10,000	0	0	0	0	10,000	0	10,000
Type of Loss:	Open									
Claim Totals:			10,000	0	0	0	0	10,000	0	10,000

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100861
 Policy Number: 791001895-0000

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000
 Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Automobile

Claim/Suffix	Suffix Status	Claimant	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvage \$	Subtotal \$	Dead Amt Rcvd \$	Total \$
Type of Loss: APH-Other Than Collision										
Claims Totals:			10,000	0	0	0	0	10,000	0	10,000
Loss Date: 12/09/2019	Date Reported: 12/13/2019	Claim Status: Open								
Accident Location: Manchester, TN Cause of Accident: Fire All Other - Auto (Passenger Type)-Insured Owner - Our Insured-Not At Fault Claim Description: The insured noticed smoke coming from the dash of the vehicle. The brakes began to lock and ins Driver: [REDACTED]										
AB-274896 01	Closed	City of Manchester,	0	4,698	0	0	0	4,698	0	4,698

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100881
 Policy Number: 791001895-0000

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000
 Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Automobile

Claim/Suffix	Suffix Status	Claimant	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvage \$	Subtotal \$	Debt Amt Rec'd \$	Total \$
Type of Loss: APH-Other Than Collision										

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100881
 Policy Number: 791001895-0000

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000
 Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Automobile

Claim#	Suffix	Status	Claimant	Loss Rsv \$	Loss Paid \$	Alloc Exp Rsv \$	Exp Pd \$	Subro/ Salvage \$	Subtotal \$	Debt Amt Rsvd \$	Total \$
Claim Totals:				0	4,698	0	0	0	4,698	0	4,698

Loss Date: 12/05/2019 Date Reported: 12/13/2019 Claim Status: Closed
 Accident Location: Manchester, TN
 Cause of Accident: Animal or Bird Animal Struck vehicle - Auto (Passenger Type)--Insured Owner - Our Insured--Not At Fault
 Claim Description: A deer jumped out in front of insured
 Driver: [REDACTED]

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
Loss Period: 07/01/2019 to 01/10/2020
Line(s) of Business: < All >
Producer: 4100861
Policy Number: 791001895-0000

Valuation: 01/09/2020
Claim Status: Open and Closed
Incidents: Include
SIC Code: 9199 000
Policy Term: 07/01/2019 - 07/01/2020

Line of Business: Automobile

Claim/Suffix	Suffix Status	Claimant	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvage \$	Subtotal \$	Debt Amt Rcvd \$	Total \$

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
Loss Period: 07/01/2019 to 07/10/2020
Line(s) of Business: < All >
Producer: 4100881
Policy Number: 791001895-0000

Valuation: 01/09/2020
Claim Status: Open and Closed
Incidents: Include
SIC Code: 9199 000
Policy Term: 07/01/2019 - 07/01/2020

**Totals for Automobile
4 (Claims)**

10,000	5,506	0	0	0	15,506	0	15,506
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**Policy Loss Analysis Summary By Line of Business
For All Locations**



Insured: MANCHESTER, CITY OF
 Loss Period: 07/01/2019 to 01/10/2020
 Line(s) of Business: < All >
 Producer: 4100881

Valuation: 01/09/2020
 Claim Status: Open and Closed
 Incidents: Include
 SIC Code: 9199 000

	Total Claims	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Exp Pd \$	Subro/ Salvge \$	Subtotal \$	Dead Amt Recvd \$	Total \$
Totals for Policy 791001895-0000	4	10,000	5,506	0	0	0	15,506	0	15,506

**Policy Loss Analysis Summary By Line of Business
For All Locations**



Line of Business Summary - Grouped by Policy

791001895-0000 Policy Term: 07/01/2019 - 07/01/2020

Coverage	# of Claims	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Expenses Paid \$	Subtrd Salvage \$	Subtotal \$	Dead Amt Rcvd \$	Total \$
Automobile	4	10,000	5,506	0	0	0	15,506	0	15,506
Liability	2	5,100	0	27,000	0	0	32,100	0	32,100
Policy Totals:	6	15,100	5,506	27,000	0	0	47,606	0	47,606

	# of Claims	Loss Rev \$	Loss Paid \$	Alloc Exp Rev \$	Expenses Paid \$	Subtrd Salvage \$	Subtotal \$	Dead Amt Rcvd \$	Total \$
Total for all Policies:	6	15,100	5,506	27,000	0	0	47,606	0	47,606

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Loss Data

Valued as of 1/8/2020

Claim Number	Claimant Name	Date of Loss	Cov	MED/BI Incurred	MED/BI Paid	IND/PPD Incurred	IND/PPD Paid	Legal Incurred	Legal Paid	EXP Incurred	EXP Paid	Voc Rehab Incurred	Voc Rehab Paid	Recovery	Incurred Total	Paid Total	O/S Total
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Location: 53582 - CITY OF MANCHESTER
 Policy Eff Date: 7/1/2016

Major Coverage: AL - Auto Liability

P655-16-10891 - 01		11/16/2016	AD	0.00	0.00	8,533.17	8,533.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,533.17	8,533.17	0.00
TN 53582		F	N	0.00	0.00	8,533.17	8,533.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CV RAN OVER PIECE OF EQUIPMENT THAT FELL FROM IV CAUSING																	
P655-16-10844 - 01		9/15/2016	AD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN 53582		F	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV RUBBED OV																	

Major Coverage: APD - Auto PD

P655-16-11190 - 01	CITY OF MANCHESTER	12/30/2016	AC	0.00	0.00	1,098.93	1,098.93	0.00	0.00	0.00	0.00	0.00	0.00	500.00	598.93	598.93	0.00
TN 53582		F	N	0.00	0.00	1,098.93	1,098.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV ATTEMPTING TO PARK AND STRUCK A POST CAUSING DAMAGE T																	
P655-16-10756 - 02	CITY OF MANCHESTER	8/24/2016	AC	0.00	0.00	8,078.31	8,078.31	0.00	0.00	0.00	0.00	0.00	0.00	500.00	7,578.31	7,578.31	0.00
TN 53582		F	N	0.00	0.00	8,078.31	8,078.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STOPPED QUICKLY AND ANOTHER IV STRUCK IV																	
P655-16-10756 - 01	CITY OF MANCHESTER	8/24/2016	AC	0.00	0.00	7,017.05	7,017.05	0.00	0.00	0.00	0.00	0.00	0.00	500.00	6,517.05	6,517.05	0.00
TN 53582		F	N	0.00	0.00	7,017.05	7,017.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STOPPED QUICKLY AND ANOTHER IV STRUCK IV																	

Major Coverage: EO - Errors and Omissions

				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



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Valued as of 1/8/2020

Loss Data													Valued as of	1/8/2020			
Claim Number	Claimant Name	Date Of Loss	Cov	MED/BI Incurred	IND/PI Incurred	Legal Incurred	EXP Incurred	Voc Rehab Incurred	Recovery	Incurred Total	MED/BI Paid	IND/PI Paid	Legal Paid	EXP Paid	Voc Rehab Paid	Paid Total	O/S Total
State	Location	Insured Driver Name	ST MI LIT SUB	MED/BI O/S Res	IND/PI O/S Res	Legal O/S Res	EXP O/S Res	Voc Rehab O/S Res									

Location: 63682 - CITY OF MANCHESTER
 Policy Eff Date: 7/1/2017

Major Coverage: AL - Auto Liability

P655-16-12828 - 01				5/14/2018	AD						0.00	3,079.67	0.00	158.05		0.00	0.00	3,237.72
TN				F	N	N					0.00	3,079.67	0.00	158.05		0.00	0.00	3,237.72
INSURED VEHICLE BACKED OUT OF PARKING SPOT INTO CLAIMANT																		

Major Coverage: APD - Auto PD

P655-16-12947 - 01				6/11/2018	AC						0.00	0.00	0.00	0.00		0.00	0.00	0.00
TN				F	N	N					0.00	0.00	0.00	0.00		0.00	0.00	0.00
OTHER VEHICLE FAILED TO YIELD RIGHT OF WAY																		
P655-16-12720 - 01				3/27/2018	AC						0.00	2,583.35	0.00	0.00		0.00	0.00	500.00
TN				F	N	N					0.00	2,583.35	0.00	0.00		0.00	0.00	2,083.35
DRIVE OF STOLEN VEHICLE ATTEMPTED TO ELUDE APPREHENSION																		
P655-16-12697 - 01				3/16/2018	AC						0.00	3,253.50	0.00	0.00		0.00	0.00	500.00
TN				F	N	N					0.00	3,253.50	0.00	0.00		0.00	0.00	2,753.50
IV HIT UTILITY POLE																		
P655-16-12604 - 01				3/5/2018	AC						0.00	0.00	0.00	0.00		0.00	0.00	0.00
TN				F	N	N					0.00	0.00	0.00	0.00		0.00	0.00	0.00
OV REAR ENDED IV																		
P655-16-12415 - 01				1/15/2018	AP						0.00	0.00	0.00	0.00		0.00	0.00	0.00
TN				F	N	N					0.00	0.00	0.00	0.00		0.00	0.00	0.00
IV HIT DEER																		
P655-17-12410 - 01				12/15/2017	AP						872.25	0.00	0.00	0.00		0.00	0.00	500.00
TN				F	N	N					872.25	0.00	0.00	0.00		0.00	0.00	372.25
IV HIT DEER																		



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Valued as of 1/8/2020

Loss Data		Claimant Name	Date Of Loss	Cov	MED/BI Incurred	MED/BI Paid	IND/FPD Incurred	IND/FPD Paid	Legal Incurred	Legal Paid	EXP Incurred	EXP Paid	Voc Rehab Incurred	Voc Rehab Paid	Recovery	Incurred Total	Paid Total	
Claim Number	Location	Insured Driver Name	ST	MI	LIT	SUB	MED/BI O/S Res	IND/FPD O/S Res	Legal O/S Res	EXP O/S Res	Voc Rehab O/S Res	O/S Total						

Location: 53582 - CITY OF MANCHESTER

Major Coverage: EO - Errors and Omissions

P655-18-12857 - 01			5/14/2018	EO	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN	53582		F	Y	N				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAINTIFF DEMANDS INJUNCTIVE RELIEF OVER DRAINAGE ISSUES																	
P655-17-12312 - 01			11/30/2017	PL	0.00	0.00	0.00	0.00	1,573.60	1,573.60	0.00	0.00	0.00	0.00	1,573.60	0.00	0.00
TN	53582		F	Y	N				1,573.60	1,573.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAINTIFF ALLEGES OBSTRUCTION OF JUSTICE ABUSE OF AUTHORITY																	

Major Coverage: GL - General Liability

P655-18-13125 - 01			5/22/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN	53582		F	N	N				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FLY BALL INJURED CLAIMANT'S HAND																	
P655-18-12698 - 01			4/7/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN	53582		F	N	N				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLAIMANT CHILD INJURED AT CITY REC CENTER																	
P655-18-12988 - 01			6/22/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN	53582		F	N	N				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLAIMANT ALLEGES SHE JUMPED FROM WALL AND BROKER HER L																	
P655-18-12902 - 01			5/31/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN	53582		F	N	N				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD WAS RACING AND RUNNING AND TRIPPED OVER HIS FEET AND																	



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Valued as of 1/8/2020

Loss Data

Claim Number	Location	Claimant Name	Insured Driver Name	Date Of Loss	Cov	MED/BI Incurred	MED/BI Paid	MED/BI O/S Res	IND/PD Incurred	IND/PD Paid	IND/PD O/S Res	Legal Incurred	Legal Paid	Legal O/S Res	EXP Incurred	EXP Paid	EXP O/S Res	Voc Rehab Incurred	Voc Rehab Paid	Voc Rehab O/S Res	Recovery	Incurred Total	Paid Total	O/S Total	
Location: 53582 - CITY OF MANCHESTER																									
P655-18-12879 - 01				5/27/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IL 53582				F	N	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD FOUND FLOATING IN POOL																									
P655-17-11988 - 01				7/17/2017	GB	1,942.96	1,942.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,942.96	0.00	0.00	0.00
TN 53582				F	N	N	1,942.96	1,942.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLAIMANT CHILD HIT HIS HEAD ON THE SLIDE																									
P655-17-11989 - 01				8/12/2017	GD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN 53582				F	N	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SEWER BACK UP AT CLAIMANT HOME																									
P655-18-12496 - 01				2/7/2018	GD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN 53582				F	N	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SEWER LINE STOPPED AND FLOODED CLAIMANT HOUSE																									

Major Coverage: PROP - Property

P655-18-12987 - 01	CITY OF MANCHESTER	6/24/2018	RC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TN 53582		F	N	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WIND DAMAGE TO UMBRELLA																									
P655-18-12419 - 01	CITY OF MANCHESTER	1/22/2018	RB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	451.64	451.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	451.64	0.00
TN 53582		F	N	N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	451.64	451.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	451.64	0.00
POSSIBLE MOLD AND MILDEW DAMAGE TO INSURED BUILDING																									

0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



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Valued as of 1/9/2020

Loss Data											
Claim Number	Claimant Name	Date Of Loss	Cov	MED/BI Incurred	IND/BI Incurred	Legal Incurred	EXP Incurred	Voc Rehab Incurred	Recovery	Incurred Total	
State	Location	Insured Driver Name	ST MI LT SUB	MED/BI Paid	IND/BI Paid	Legal Paid	EXP Paid	Voc Rehab Paid		Paid Total	
Accident Description				MED/BI O/S Res	IND/BI O/S Res	Legal O/S Res	EXP O/S Res	Voc Rehab O/S Res		O/S Total	

Location: 33532 - CITY OF MANCHESTER

Policy Eff Date: 7/1/2018

Major Coverage: AL - Auto Liability

P655-19-13973 - 01			3/19/2019	AD	0.00	9,539.20	0.00	0.00	0.00	9,539.20
TN			F	N	N	0.00	9,539.20	0.00	0.00	9,539.20
INSURED AND CLAIMANT COLLIDED WHEN INSURED PULLED OUT II										
P655-18-13124 - 01			7/29/2018	AD	0.00	814.33	0.00	0.00	0.00	814.33
TN			F	N	N	0.00	814.33	0.00	0.00	814.33
INSURED VEHICLE ROLLED INTO CLAIMANT VEHICLE										
P655-18-13115 - 01			7/25/2018	AD	0.00	4,696.40	158.05	0.00	0.00	4,854.45
TN			F	N	N	0.00	4,696.40	158.05	0.00	4,854.45
INSURED VEHICLE BACKED INTO CLAIMANT VEHICLE										
P655-18-13058 - 01			7/17/2018	AD	0.00	9,760.95	0.00	0.00	0.00	9,760.95
TN			F	N	N	0.00	9,760.95	0.00	0.00	9,760.95
IV RAN INTO CV										

Major Coverage: APD - Auto PD	City of Manchester	3/19/2019	AC	0.00	7,994.67	0.00	302.65	0.00	500.00	7,797.32
P655-19-13973 - 02	CITY OF MANCHESTER	3/19/2019	AC	0.00	7,994.67	0.00	302.65	0.00	500.00	7,797.32
TN	53582		F	N	N	0.00	302.65	0.00	0.00	7,797.32
INSURED AND CLAIMANT COLLIDED WHEN INSURED PULLED OUT II										



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Loss Data

Valued as of 1/8/2020

Claim Number	Claimant Name	Date Of Loss	Cov	MED/BI Incurred	IND/PPD Incurred	Legal Incurred	EXP Incurred	Voc Rehab Incurred	Recovery	Incurred Total	
State	Location	ST	MI	LIT	SUB	MED/BI Paid	IND/PPD Paid	Legal Paid	EXP Paid	Voc Rehab Paid	O/S Total
Accident Description						MED/BI O/S Res	IND/PPD O/S Res	Legal O/S Res	EXP O/S Res	Voc Rehab O/S Res	
Location: 53582 - CITY OF MANCHESTER											
P655-18-13058 - 02	CITY OF MANCHESTER	7/17/2018	AC	0.00	3,501.61	0.00	311.45	0.00	500.00	3,313.06	
TN 53582		F	N	N	3,501.61	0.00	311.45	0.00		3,313.06	
IV RAN INTO CV					0.00	0.00	0.00	0.00		0.00	
P655-19-13996 - 01	CITY OF MANCHESTER	5/7/2019	AC	0.00	4,029.59	0.00	0.00	0.00	500.00	3,529.59	
TN 53582		F	N	N	0.00	4,029.59	0.00	0.00		3,529.59	
INSURED VEHICLE BACKED INTO TRAILER					0.00	0.00	0.00	0.00		0.00	
P655-18-13301 - 01	CITY OF MANCHESTER	9/13/2018	AC	0.00	500.00	0.00	0.00	0.00	500.00	0.00	
TN 53582		F	N	Y	500.00	0.00	0.00	0.00		0.00	
INSURED BACKED HIS PERSONAL VEHICLE INTO INSURED VEHICLE					0.00	0.00	0.00	0.00		0.00	
Major Coverage: dl - General Liability											
P655-19-13931 - 01		4/22/2019	GB	5,000.00	0.00	0.00	11.15	0.00	2,500.00	2,511.15	
TN 53582		F	N	N	5,000.00	0.00	11.15	0.00		2,511.15	
CLAIMANT ALLEGES TRIP AND FALL ON POT HOLE					0.00	0.00	0.00	0.00		0.00	
P655-18-13272 - 01		9/10/2018	GB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TN 53582		F	N	N	0.00	0.00	0.00	0.00		0.00	
CLAIMANT ALLEGES SHE BLACKED OUT ON STEPTS					0.00	0.00	0.00	0.00		0.00	
P655-18-13848 - 01		10/31/2018	GB	0.00	0.00	10,000.00	982.79	0.00	0.00	10,982.79	
TN 53582		R	N	N	0.00	0.00	982.79	0.00		982.79	
CLAIMANT ALLEGES INJURY AT HAUNTED HOUSE EVENT					0.00	10,000.00	0.00	0.00		10,000.00	
P655-18-13767 - 01		8/17/2018	GD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TN 53582		F	N	N	0.00	0.00	0.00	0.00		0.00	
SEWER BACK UP					0.00	0.00	0.00	0.00		0.00	

10,000.00 0.00 10,000.00 982.79 0.00 2,500.00 10,982.79



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Valued as of 1/8/2020

Loss Data

Claim Number	Location	Claimant Name	Insured Driver Name	Date Of Loss	Cov	MED/BI Incurred	MED/BI Paid	IND/PPD Incurred	IND/PPD Paid	Legal Incurred	Legal Paid	EXP Incurred	EXP Paid	Voc Rehab Incurred	Voc Rehab Paid	Recovery	Incurred Total	Paid Total	O/S Total
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Location: 53582 - CITY OF MANCHESTER

Major Coverage: PROP - Property

P655-19-14262 - 01	TN	CITY OF MANCHESTER		6/20/2019	RB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WIND DAMAGE TO UMBRELLA AND FENCE						0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
P655-19-14262 - 02	TN	CITY OF MANCHESTER		6/20/2019	RC	2,600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,600.00	0.00
WIND DAMAGE TO UMBRELLA AND FENCE						0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
P655-18-13502 - 01	TN	CITY OF MANCHESTER		11/5/2018	RB	1,750.00	0.00	0.00	0.00	0.00	0.00	175.00	0.00	0.00	0.00	0.00	1,000.00	925.00	0.00
OP DAMAGED INSURED GUARDRAIL WITH THEIR VEHICLE						1,750.00	0.00	0.00	0.00	0.00	0.00	175.00	0.00	0.00	0.00	0.00	0.00	925.00	0.00
P655-19-13834 - 01	TN	CITY OF MANCHESTER		3/15/2019	RB	0.00	0.00	0.00	0.00	0.00	0.00	3,446.40	0.00	0.00	0.00	0.00	0.00	3,446.40	0.00
CRACKED FOUNDATION WALL						0.00	0.00	0.00	0.00	0.00	0.00	3,446.40	0.00	0.00	0.00	0.00	0.00	3,446.40	0.00
P655-18-13698 - 01	TN	CITY OF MANCHESTER		12/28/2018	RB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WIND DAMAGE TO INSURED TRAFFIC LIGHT						0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
P655-18-13695 - 01	TN	CITY OF MANCHESTER		11/1/2018	RB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VEHICLE DAMAGE TO UTILITY POLE						0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



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Valued as of 1/8/2020

Loss Data

Claim Number	Claimant Name	Date Of Loss	Cov	MED/BI Incurred	IND/PI Incurred	Legal Incurred	EXP Incurred	Voc Rehab Incurred	Recovery	Incurred Total
State	Location	Insured Driver Name	ST MI LIT SUB	MED/BI Paid	IND/PI Paid	Legal Paid	EXP Paid	Voc Rehab Paid		Paid Total
Accident Description				MED/BI O/S Res	IND/PI O/S Res	Legal O/S Res	EXP O/S Res	Voc Rehab O/S Res		O/S Total

Location: 53882 - CITY OF MANCHESTER



