



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01458B

15WC01458B	REYES, LUZ	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRELINGHUYSEN MS	4/1/2015	4/1/2015	Open	162.00	243.00	0.00	0.00	0.00	0.00	405.00
EE SLIPPED ON A PIECE OF LETTUCE ON GROUND & FELL CAUSING STRAIN T			2,338.00	2.00	0.00	0.00	0.00	0.00	0.00	2,340.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			162.00	243.00	0.00	0.00	0.00	0.00	0.00	405.00
			2,338.00	2.00	0.00	0.00	0.00	0.00	0.00	2,340.00

Claim Number: 15WC01462W

15WC01462W	KELLY, TYLER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERKELEY ES	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR PULLED L SHOULDER			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01463P

15WC01463P	RAUCCI, ESTELLE	10	152,500.00	1,195.00	227,865.00	0.00	0.00	0.00	0.00	381,560.00
MIDDLE SCHOOL MS	4/1/2015	4/1/2015	Open	12,962.53	1,193.00	1,874.24	0.00	0.00	0.00	16,029.77
WALKING & TRIPPED OVER OWN FEET, FELL INJURING RT ARM, RT KNEE, RT			139,537.47	2.00	225,990.76	0.00	0.00	0.00	0.00	365,530.23
Total by Claim Number 1 Claim			152,500.00	1,195.00	227,865.00	0.00	0.00	0.00	0.00	381,560.00
			12,962.53	1,193.00	1,874.24	0.00	0.00	0.00	0.00	16,029.77
			139,537.47	2.00	225,990.76	0.00	0.00	0.00	0.00	365,530.23

Claim Number: 15WC01464B

15WC01464B	NUNEZ, KERLYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	4/1/2015	4/1/2015	Open	402.55	243.00	0.00	0.00	0.00	0.00	645.55
EE WAS KICKED IN R LEG WHILE ATTEMPTING TO BREAK UP A FIGHT BETWEI			2,097.45	2.00	0.00	0.00	0.00	0.00	0.00	2,099.45



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				402.55	243.00	0.00	0.00	0.00	0.00	645.55
				2,097.45	2.00	0.00	0.00	0.00	0.00	2,099.45
Claim Number: 15WC01465K										
15WC01465K	RIEDEL, KATHRYN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY REG BOE	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
REPORTING TO WORK, SLIPPED & FELL ON ICE INJURING HEAD, NECK, & BAC				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01466B										
15WC01466B	HUNT, BRUCE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
PRIMARY ES	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
LIFTING A 10 LB. BOX OF BOOKS, FELT A POP IN GROIN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01467Y										
15WC01467Y	RUSHINSKI-HANLEY, MARIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SHARON ELEMENTARY	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING, SHE TRIPPED OVER UNEVEN PAVEMENT HITTING HEAD				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01469B										



NEW CLAIMS

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Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01469B

15WC01469B	MARLIN, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLE SCHOOL	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO BACK AFTER ATTEMPTING TO BREAK UP A FIGHT BETWEEN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01470W

15WC01470W	VILLIAROLA, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY BROOK ES	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE WORKING WITH A STUDENT, STUDENT HEADBUTTED EE ON R SIDE OF				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01472Y

15WC01472Y	GIANNOTTI, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE ATTEMPTING TO BREAK UP A FIGHT BETWEEN STUDENTS, EE WAS PL				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01473K

15WC01473K	CASTILLO, RITA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HALEDON PUBLIC SCHOOL	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENTS PLAYING SOCCER STRUCK HER IN THE HEAD, LT EYE AREA WITH				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01474W										
15WC01474W	CANE, KAREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN TWP E.S.	4/1/2015	4/1/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT THREW BODY WEIGHT INTO MAT SHE WAS HOLDING MAT STRUCK			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01475B										
15WC01475B	RICKETTI, BARBARA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
TRENTON BOARD OF EDUCATION	4/1/2015	4/2/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED OVER BACKWARDS OVER STUDENT WALKING BEHIND HER INJUREI			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 Claim			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Claim Number: 15WC01476W										
15WC01476W	PATEL, RITA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN NO. 5 ELEM.	4/1/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DECORATING BULLETIN BOARD CHAIR SLIPPED SHE FELL INJURED R WRIST			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01479K										



NEW CLAIMS

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Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01479K

15WC01479K	WALKER, KRYSTAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN TWP H.S.	4/1/2015	4/1/2015	Open	2,375.68	243.00	0.00	0.00	0.00	0.00	2,618.68
WHILE STANDING BY HOME PLACE SHE WAS STRUCK IN THE MOUTH BY A FC				124.32	2.00	0.00	0.00	0.00	0.00	126.32
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				2,375.68	243.00	0.00	0.00	0.00	0.00	2,618.68
				124.32	2.00	0.00	0.00	0.00	0.00	126.32

Claim Number: 15WC01480B

15WC01480B	YOUNG, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INDIAN AVENUE E.S.	4/2/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE WALKING IN PARKING LOT A ROCK GOT STUCK ON BOTTOM OF HER S				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01485K

15WC01485K	TEKER, MUJDE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY REG BOE	4/2/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
HEADBUTTED IN NOSE BY A STUDENT				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01487Y

15WC01487Y	O'BRIEN, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	4/2/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
USING AN EXACTO KNIFE, CUTTING A MAP FOR A STUDENT'S ART PROJECT,				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01488Y										
15WC01488Y	CAVALERI, JUDITH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HANOVER PARK REG HS BOE	4/2/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING A MAP USING UTILITY KNIFE FOR STUDENT PROJECTS, CUT L INDE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01490M										
15WC01490M	VARGAS, LUIS	10		2,500.00	1,193.00	10,000.00	0.00	0.00	0.00	13,693.00
MORRISTOWN H.S.	4/1/2015	4/1/2015	Open	119.82	1,193.00	2,384.08	0.00	0.00	0.00	3,696.90
EE WAS CLEANING WOMAN'S BATHROOM, INJURED BACK WHILE BENDING TC				2,380.18	0.00	7,615.92	0.00	0.00	0.00	9,996.10
Total by Claim Number 1 Claim				2,500.00	1,193.00	10,000.00	0.00	0.00	0.00	13,693.00
				119.82	1,193.00	2,384.08	0.00	0.00	0.00	3,696.90
				2,380.18	0.00	7,615.92	0.00	0.00	0.00	9,996.10
Claim Number: 15WC01493Y										
15WC01493Y	MONTONE, LESLIE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
FAIRMOUNT	4/2/2015	4/2/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE STANDING ON THE STAIRS SHE TURNED AROUND TO LOOK @ HER CC				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01494W										



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Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01494W

15WC01494W	O'HARE, THOMAS	15	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
G HAROLD ANTRIM ES	4/2/2015	4/3/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ASSISTING IN REMOVING FILE CABINET FROM OFFICE LOST FOOTING AND FE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01495B

15WC01495B	MELILLO, NINA	14	13,000.00	0.00	0.00	0.00	0.00	0.00	0.00	13,000.00
NEW HANOVER TWP ES	4/2/2015	4/3/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING TO DELIVER FOOD TO TEACHER SLIPPED AND TWISTED R ANKLE A				13,000.00	0.00	0.00	0.00	0.00	0.00	13,000.00
Total by Claim Number 1 Claim				13,000.00	0.00	0.00	0.00	0.00	0.00	13,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				13,000.00	0.00	0.00	0.00	0.00	0.00	13,000.00

Claim Number: 15WC01496K

15WC01496K	CONOVER, ZACHARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	4/1/2015	4/3/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO R INDEX FINGER WHILE ATTEMPTING TO TRANSPORT STUD				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01497W

15WC01497W	CORRIERI, DIANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	4/1/2015	4/3/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO R HAND AFTER HOLDING DOOR CLOSED AS STUDENT WAS I				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01498K

15WC01498K	RODRIGUEZ, DEBORAH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILDWOOD HIGH SCHOOL	4/2/2015	4/3/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DOING A CRAFT STANDING, LEANED ON TOP OF DESK WITH HER REAR END,				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01502K

15WC01502K	FLAIM, JILL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK MS	4/1/2015	4/6/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL ON L KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01506W

15WC01506W	DARMIENTO, LIDIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CEDAR HILL ES	4/6/2015	4/7/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STEPPED ON A DRAIN CAUSING L ANKLE TO ROLL				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01509W



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01509W

15WC01509W	EPSTEIN, SANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DAYTON E S	4/7/2015	4/7/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN ON R FOREARM BY STUDENT HAVING BEHAVIORAL				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01510W

15WC01510W	SIESPUTOWSKI, RICHARD	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY TWP H.S.	4/7/2015	4/7/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FLOOR WAS BEING STRIPPED, SLIPPED ON STRIPPER AND FELL BACK HITTING				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01512W

15WC01512W	WILLIAMS, DANIELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO H.S.	4/4/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING SOFTBALL PRACTICE TAKING DECORATIONS DOWN, STEPPED DOWN				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01513Y

15WC01513Y	SACHENSKI, AMANDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON CENTRAL REG HS	4/8/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STRUCK HEAD ON PENCIL SHARPENER				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01514V										
15WC01514V	BREWER, MICHELLE	10		12,500.00	1,193.00	6,500.00	0.00	0.00	0.00	20,193.00
W CALDWELL V.S.	4/8/2015	4/8/2015	Open	106.66	1,193.00	692.70	0.00	0.00	0.00	1,992.36
WENT TO SIT ON TOILET TOP PIECE BROKE INJURED LOWER BACK				12,393.34	0.00	5,807.30	0.00	0.00	0.00	18,200.64
Total by Claim Number 1 Claim				12,500.00	1,193.00	6,500.00	0.00	0.00	0.00	20,193.00
				106.66	1,193.00	692.70	0.00	0.00	0.00	1,992.36
				12,393.34	0.00	5,807.30	0.00	0.00	0.00	18,200.64
Claim Number: 15WC01515B										
15WC01515B	GRINDELL, RHONDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/8/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT HER R FOREARM				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01516B										
15WC01516B	REILLY, DIANE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
RIDGE HS	4/7/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON STAIRS INJURED R KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01517Y										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01517Y

15WC01517Y	GILLIAMS, JAI		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTARY	4/2/2015	4/9/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PLAYING IN A STAFF STUDENT BASKETBALL GAME INJURED L ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01518B

15WC01518B	JONES, DAVID		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SENIOR HS	4/9/2015	4/9/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DEMONSTRATING WALL CLIMBING DURING GYM CLASS, FELL INJURING HEAD				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01519Y

15WC01519Y	BRENDEL, ROY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONTGOMERY HS	4/7/2015	4/9/2015	Open	178.40	243.00	0.00	0.00	0.00	0.00	0.00	421.40
REPAIRING A DOOR (APPROX 150 LBS) & INJURED LOWER BACK				2,321.60	2.00	0.00	0.00	0.00	0.00	0.00	2,323.60
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				178.40	243.00	0.00	0.00	0.00	0.00	0.00	421.40
				2,321.60	2.00	0.00	0.00	0.00	0.00	0.00	2,323.60

Claim Number: 15WC01520K

15WC01520K	DEVENEY, DINA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAK KNOLL M.S.	4/7/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN RAMP TO BUS DUTY, EE SLIPPED ON WET RAMP & TWISTED				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01522F

15WC01522F	GRYSCKIEWICZ, JOHN	10	37,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	63,693.00
WILLIAMSTOWN H.S.	4/9/2015	4/10/2015	Open	0.00	1,193.00	2,320.66	0.00	0.00	0.00	3,513.66
EE STRAINED L KNEE WHILE PARTICIPATING IN STUDENTS VS FACULTY BASEBALL				37,500.00	0.00	22,679.34	0.00	0.00	0.00	60,179.34
Total by Claim Number 1 Claim			37,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	63,693.00
			0.00	1,193.00	2,320.66	0.00	0.00	0.00	0.00	3,513.66
			37,500.00	0.00	22,679.34	0.00	0.00	0.00	0.00	60,179.34

Claim Number: 15WC01525I

15WC01525I	LOGAN, ANGELA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNIVERSITY HEIGHTS CHARTER SCHOOL	4/8/2015	4/9/2015	4/23/2015	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DURING RECESS WAS STRUCK IN L KNEE BY A STUDENT ON SCOOTER				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 15WC01526T

15WC01526T	BEAUMONT, THOMAS	10	25,000.00	1,193.00	47,763.00	0.00	0.00	0.00	0.00	73,956.00
ROBERT FULTON NO. 2 ELEM.	4/9/2015	4/10/2015	Open	170.00	1,193.00	0.00	0.00	0.00	0.00	1,363.00
CARRYING OUT GARBAGE BAGS, SLIPPED ON STARIS HITTING R ANKLE, READING				24,830.00	0.00	47,763.00	0.00	0.00	0.00	72,593.00
Total by Claim Number 1 Claim			25,000.00	1,193.00	47,763.00	0.00	0.00	0.00	0.00	73,956.00
			170.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,363.00
			24,830.00	0.00	47,763.00	0.00	0.00	0.00	0.00	72,593.00

Claim Number: 15WC01528W



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01528W

15WC01528W	MAYORGA, LUIS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HALEDON PUBLIC SCHOOL	4/9/2015	4/10/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HE SLIPPED & FELL ON FRESHLY WAXED FLOOR INJURING HIS RT UPPER LE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01529B

15WC01529B	BOCCIO, CIRO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	4/8/2015	4/10/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING A HEAVY LIFT AND FELT A PULL IN L ACHILLES				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01531Y

15WC01531Y	JITESHKUMAR, ANISHA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/8/2015	4/10/2015	Open	69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
STUDENT PUSHED DESK INTO HER R HIP				2,430.46	2.00	0.00	0.00	0.00	0.00	0.00	2,432.46
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
				2,430.46	2.00	0.00	0.00	0.00	0.00	0.00	2,432.46

Claim Number: 15WC01532Y

15WC01532Y	DOUGHTY, PAMELA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
QUARTER MILE LANE E.S.	4/10/2015	4/10/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR KICKED HER IN L ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01533B

15WC01533B	DALTON, FRANCES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	4/10/2015	4/10/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CHILD BIT HER L WRIST, WHILE ASSISTING STUDENT WITH BEHAVIORAL ISSU				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01534B

15WC01534B	VASTA, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	4/10/2015	4/10/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
AGGRESSIVE STUDENT CAME AFTER HER & PULLED HER HAIR, SCRATCHED				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01536K

15WC01536K	MACCHIA, TERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARETOWN E.S.	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STANDING IN MAIN LOBBY TALKING TO CO-WORKER FELT STRAIN TO L CALF				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01537T



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01537T

15WC01537T	WALSH, LYNDA	10	30,000.00	1,193.00	58,056.00	0.00	0.00	0.00	0.00	89,249.00
GRACE DUNN MIDDLE SCHOOL	4/2/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
OPENED DOOR TO COURTYARD, STEPPED OWN AND R ANKLE GAVE OUT, SF				30,000.00	950.00	58,056.00	0.00	0.00	0.00	89,006.00
Total by Claim Number 1 Claim			30,000.00	1,193.00	58,056.00	0.00	0.00	0.00	0.00	89,249.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			30,000.00	950.00	58,056.00	0.00	0.00	0.00	0.00	89,006.00

Claim Number: 15WC01541A

15WC01541A	HANS, AMY	10	9,000.00	3,193.00	18,000.00	0.00	0.00	0.00	0.00	30,193.00
WINSLOW TWP #3 E.S.	4/7/2015	4/13/2015	Open	556.34	1,193.00	1,587.85	0.00	0.00	0.00	3,337.19
MOVING A CLASSROOM DIVIDER & THE BASE STRUCK R FOOT				8,443.66	2,000.00	16,412.15	0.00	0.00	0.00	26,855.81
Total by Claim Number 1 Claim			9,000.00	3,193.00	18,000.00	0.00	0.00	0.00	0.00	30,193.00
			556.34	1,193.00	1,587.85	0.00	0.00	0.00	0.00	3,337.19
			8,443.66	2,000.00	16,412.15	0.00	0.00	0.00	0.00	26,855.81

Claim Number: 15WC01543Y

15WC01543Y	ALE, KIMBERLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIECK AVE ES	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE STRUCK R ELBOW AGAINST BATHROOM DOOR, WHILE TRYING TO ROLL U				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01544W

15WC01544W	TOTH, TIBOR	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON SCHOOL	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WENT TO SIT ON A CHAIR, THE CHAIR ROLLED AWAY FROM CLMT, CLMT FELI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01545K										
15WC01545K	POGORZELSKI, RICHARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW EGYPT ES	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WORKING ON A MOTOR FROM A FAN FELT PAIN IN RT HAND THUMB			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01546W										
15WC01546W	PARKER, KIYOE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIGHT BEGINNINGS LEARNING CI	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT HAVING A BEHAVIOR ISSUE BIT CLMT ON LT LOWER ARM			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01547K										
15WC01547K	DOMINQUEZ, ESTELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELAWARE VALLEY REG HS	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CLEANING BOARD, PIECE OF PAPER STRUCK EE IN L EYE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01548B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01548B

15WC01548B	GALLOPO, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALLKILL VALLEY REG HS	4/3/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TWISTED R FOOT ON UNEVEN PAVEMENT INJURED L KNEE AND R HAND			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01549A

15WC01549A	SCOTT, CINDY	10	10,000.00	2,243.00	23,000.00	0.00	0.00	0.00	0.00	35,243.00
DEPT OF TRANSPORTATION	4/11/2015	4/12/2015	Open	0.00	243.00	2,591.76	0.00	0.00	0.00	2,834.76
RETURNED FROM ROBOTICS DARK OUTSIDE STEPPED OFF BUS FELT A POP			10,000.00	2,000.00	20,408.24	0.00	0.00	0.00	0.00	32,408.24
Total by Claim Number 1 Claim			10,000.00	2,243.00	23,000.00	0.00	0.00	0.00	0.00	35,243.00
			0.00	243.00	2,591.76	0.00	0.00	0.00	0.00	2,834.76
			10,000.00	2,000.00	20,408.24	0.00	0.00	0.00	0.00	32,408.24

Claim Number: 15WC01550W

15WC01550W	MOSKALUK, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY VOCATIONAL	4/13/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RETURNING FROM FIRE DRILL, TRIPPED ON STAIRS INJURED R ANKLE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01551K

15WC01551K	LITWIN, COLLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EAST AMWELL TWP ES	4/8/2015	4/8/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ENTERING CONF. ROOM SHE TRIPPED OVER RECYCLING BIN & FELL CAUSIN			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01553B

15WC01553B	ZULLO, ANN		14	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFFICE	4/13/2015	4/14/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT CAME AFTER HER HITTING HER IN L ARM, BITING HER ON L UPPER				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01554Y

15WC01554Y	HERMAN, MICHAEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE HANDLING GYM EQUIPMENT, HE DROPPED A DUMBBELL ON LT MIDL				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01555K

15WC01555K	BICSKO, RACHEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLESEX CO. VO-TECH	4/10/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO LIFT A STUDENT'S WHEELCHAIR ONTO THE BUS RAMP SHE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01556K



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01556K

15WC01556K	DAVILA, JESSICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK HS	4/14/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING AND MISSED A STEP TWISTING L ANKLE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01557Y

15WC01557Y	CUESTA-AVILES, GERALDINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBIDGE VOCATIONAL	4/13/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAVING HER ARMS TO GET STUDENTS ATTENTION DURING GAME, FELT PAI			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01559K

15WC01559K	CAMPANELLA, KERRI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOLLWOOD ES	4/13/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN WATER AND FELL ON L HAND			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01560M

15WC01560M	LOKICH, JUDITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	4/14/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO PREVENT STUDENT FROM LEAVING CLASSROOM SHE WAS			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01561V										
15WC01561V	KELLY, MARTHA	10		13,000.00	1,195.00	10,260.00	0.00	0.00	0.00	24,455.00
RED BANK REGIONAL HS	4/14/2015	4/14/2015	Open	3,757.60	1,193.00	3,420.00	0.00	0.00	0.00	8,370.60
A CHILD THREW A BALL HITTING HER IN HEAD				9,242.40	2.00	6,840.00	0.00	0.00	0.00	16,084.40
Total by Claim Number 1 Claim				13,000.00	1,195.00	10,260.00	0.00	0.00	0.00	24,455.00
				3,757.60	1,193.00	3,420.00	0.00	0.00	0.00	8,370.60
				9,242.40	2.00	6,840.00	0.00	0.00	0.00	16,084.40
Claim Number: 15WC01562W										
15WC01562W	SCARANO, LISA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
E BRUNSWICK H. S.	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT SPIT IN HER FACE SEVERAL TIMES				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01563Y										
15WC01563Y	ANDERS, KRISTINA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY HEIGHTS CHARTER S	4/14/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE ATTEMPTING TO BREAK UP A FIGHT BETWEEN STUDENTS, SHE & ANC				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01565B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01565B

15WC01565B	FIORILLI, CHRISTINA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MATAWAN AVENUE MS	4/13/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND FELL ON BOTH KNEES				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01566B

15WC01566B	DELEON-ALEJO, LETISHA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK MS	4/14/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STRUCK HER LT FOOT AGAINST HEAVY METAL DOOR WHILE ENTERING SCH				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01568W

15WC01568W	CAFFREY, SCOTT	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/14/2015	4/14/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE TRANSPORTING STUDENT OUT OF CLASSROOM, STUDENT BIT HIM ON				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01569K

15WC01569K	BESLOW, LAVERNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
RANOCAS VALLEY REG. HS	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
MOVING CASES OF COPY PAPER STRAINING HER LOWER BACK, R HIP AND T				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01570B

15WC01570B	EBERHARDT, SANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCGINNIS M.S.	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING MAGNET OFF DOOR, CHILD PUSHED THE DOOR INJURED FINGERS				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01571F

15WC01571F	SCHERER, PETER	10		2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
GRACE DUNN MIDDLE SCHOOL	4/14/2015	4/15/2015	Open	0.00	1,193.00	659.60	0.00	0.00	0.00	0.00	1,852.60
AS HE PICKED UP A BUCKET OF WATER HE FELT PAIN IN HIS LOWER BACK				2,500.00	0.00	4,340.40	0.00	0.00	0.00	0.00	6,840.40
Total by Claim Number 1 Claim				2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
				0.00	1,193.00	659.60	0.00	0.00	0.00	0.00	1,852.60
				2,500.00	0.00	4,340.40	0.00	0.00	0.00	0.00	6,840.40

Claim Number: 15WC01572W

15WC01572W	DELUCCA, MARIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 9	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WENT TO UNLOCK CABINET AND WHILE BENDING DOWN A CHILD STANDING				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01573K





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01573K

15WC01573K	EICHNER, DEBRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DWIGHT D EISENHOWER E.S.	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT HAVING TANTRUM, STUDENT BIT R UPPER ARM				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01574J

15WC01574J	HERZOG, JASON	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
GREATER BRUNSWICK CHARTER S	4/13/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RUNNING ACROSS GYM WITH STUDENTS, FELT PAIN IN R KNEE				2,500.00	950.00	0.00	0.00	0.00	0.00	3,450.00
Total by Claim Number 1 Claim				2,500.00	1,193.00	0.00	0.00	0.00	0.00	3,693.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	950.00	0.00	0.00	0.00	0.00	3,450.00

Claim Number: 15WC01575F

15WC01575F	DIBENEDETTO, ARMAND	10	2,500.00	1,195.00	7,500.00	0.00	0.00	0.00	0.00	11,195.00
PASSAIC COUNTY TECH. INSTITUT	4/15/2015	4/15/2015	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
EE WAS COMING OFF OF TRUCK AT LOADING DOCK, EE TWISTED L ANKLE OF				2,500.00	2.00	7,500.00	0.00	0.00	0.00	10,002.00
Total by Claim Number 1 Claim				2,500.00	1,195.00	7,500.00	0.00	0.00	0.00	11,195.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
				2,500.00	2.00	7,500.00	0.00	0.00	0.00	10,002.00

Claim Number: 15WC01577J

15WC01577J	KAYHART, MARCIA	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
JOHN F. KENNEDY E.S.	4/14/2015	4/15/2015	Open	220.47	1,193.00	0.00	0.00	0.00	0.00	1,413.47
CLMT WAS SUPERVISING STUDENTS ON PLAYGROUND WHEN A STUDENT TH				2,279.53	0.00	0.00	0.00	0.00	0.00	2,279.53



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	1,193.00	0.00	0.00	0.00	0.00	3,693.00
				220.47	1,193.00	0.00	0.00	0.00	0.00	1,413.47
				2,279.53	0.00	0.00	0.00	0.00	0.00	2,279.53
Claim Number: 15WC01578K										
15WC01578K	ORSINO, NICHOLAS		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MARY ETHEL COSTELLO	4/14/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PUTTING AWAY TWO IPADS WHEN STRAP SNAPPED OFF INJURING R EYE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01579T										
15WC01579T	SHIMKOVITCH, SERGE		10	2,500.00	1,193.00	2,500.00	0.00	0.00	0.00	6,193.00
MORRISTOWN H.S.	4/13/2015	4/14/2015	Open	29.18	1,193.00	1,099.28	0.00	0.00	0.00	2,321.46
EE WAS CLEANING SCHOOL LIBRARY & WAS EMPTYING TRASH CANS, FELT F				2,470.82	0.00	1,400.72	0.00	0.00	0.00	3,871.54
Total by Claim Number 1 Claim				2,500.00	1,193.00	2,500.00	0.00	0.00	0.00	6,193.00
				29.18	1,193.00	1,099.28	0.00	0.00	0.00	2,321.46
				2,470.82	0.00	1,400.72	0.00	0.00	0.00	3,871.54
Claim Number: 15WC01580Y										
15WC01580Y	LAPARULO, BARBARA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON E S	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE WLAKING DOWN THE HALLWAY, SOMEONE OPENED THE DOOR STRIK				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01581K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01581K

15WC01581K	SORIANO, PATRICIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	4/2/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS TRYING TO BREAK UP A FIGHT BETWEEN TWP STUDENTS WHEN I				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01584K

15WC01584K	SEDJWICK, CHRISTIAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/14/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BITTEN BY CHILD ON TOP OF R HAND				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01585B

15WC01585B	CIRINEO, FERNANDO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS HILLS ADULT HS	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STEPS, EE TWISTED FOOT ON STEP & FELL ON R SIDE OF F/				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01586W

15WC01586W	SKORGA, JUDITH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
COLONIA HIGH SCHOOL	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO ENTER SCHOOL, EE WAS STRUCK BY METAL DOOR KNOCKE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01588T										
15WC01588T	AMERICK, DOREEN	10		22,500.00	245.00	0.00	0.00	0.00	0.00	22,745.00
BAYONNE BOARD OF EDUCATION	4/13/2015	4/16/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PICKING UP CHILD OUT OF CAR SEAT, L INGUINAL AREA FELT A POPPING SEI				22,500.00	245.00	0.00	0.00	0.00	0.00	22,745.00
Total by Claim Number 1 Claim				22,500.00	245.00	0.00	0.00	0.00	0.00	22,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				22,500.00	245.00	0.00	0.00	0.00	0.00	22,745.00
Claim Number: 15WC01589C										
15WC01589C	MATTIE, JOHN	10		2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
WESTFIELD SENIOR HS	4/15/2015	4/16/2015	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
EE FELT STRAIN TO LOWER BACK AFTER MOVING OLD DESK TO DUMPSTER,				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01590W										
15WC01590W	LEZAK, AMANDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
PATERSON CHARTER SCHOOL OF	4/14/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT STEPPED ON HER FOOT CAUSING HER TO FALL BACKWARDS INJUI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01591Y										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01591Y

15WC01591Y	SHIVERS, KRISTIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/15/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT HAVING A BEHAVIOR ISSUE STRUCK CLMT IN THE LT EYE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01592B

15WC01592B	ALBANESE, ANTHONY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
THE SHORE CENTER FOR STUDEN	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR HIT EE'S R PINKY FINGER				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01594Y

15WC01594Y	KOCH, BRIDGET	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
RAVINE DRIVE ES	4/15/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLMT ATTEMPTED TO OPEN CLASSROOM DOOR THE DOOR SWUNG OPEN S1				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01595B

15WC01595B	LATKO, MARGARET	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFORD A BALDWIN ES	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PICKING UP TOP TO SAND TABLE, TOP SLID OFF THE TABLE LANDING ON HEI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01596K

15WC01596K	PANACCIONE, ROSE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUDSON CNTY VO-TECH	4/14/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE BREAKING UP A FIGHT, EE WAS STRUCK IN R ARM				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01597W

15WC01597W	CINIELLO, LISA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #18 INDIANA AVE	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR BIT HER BREAKING THE SKIN ON HER RT THIK				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01598K

15WC01598K	CESARIO, JANICIA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DALLAGO IMPACT PRE SCHOOL	4/15/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS BIT BY A STUDENT ON HER RT HAND BREAKING THE SKIN WHILE /				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01599B





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01599B

15WC01599B	MCKEE, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN E. RILEY E.S.	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHEN COMING INSIDE FROM EVACUATION CLMT STEPPED ON A SEED POD T				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01600Y

15WC01600Y	PRYCE, ALLISON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR BIT HER ON HER RT INDEX FINGER BREAKING				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01601W

15WC01601W	COLLINS, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PACKANACK E.S.	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE OVERSEEING A GAME CLMT TURNED TWIST LT KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01602J

15WC01602J	BEACHUM, DANA	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
MONROE TWP HS	4/14/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLMT SLIPPED & FELL ON FOOD WHEN LEAVING THE BLDG INJ LT SIDE, LT K				2,500.00	950.00	0.00	0.00	0.00	0.00	3,450.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	1,193.00	0.00	0.00	0.00	0.00	3,693.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	950.00	0.00	0.00	0.00	0.00	3,450.00
Claim Number: 15WC01603C										
15WC01603C	JONES, MICHAEL	10		2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
MIDDLE SCHOOL	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE SUPERVISING STUDENTS DURING LUNCH TIME, A STUDENT RAN INTO				2,500.00	952.00	0.00	0.00	0.00	0.00	3,452.00
Total by Claim Number 1 Claim				2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	952.00	0.00	0.00	0.00	0.00	3,452.00
Claim Number: 15WC01604K										
15WC01604K	GRAHAM, SANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CUMBERLAND CAMPUS	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE STRUCK HER R ELBOW AGAINST METAL BATHROOM DOOR WHILE ATTEM				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01605Y										
15WC01605Y	KLIEMISCH, KELLY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGEWATER-RARITAN HS	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE ATTEMPTING TO RESTRAIN STUDENT, EE WAS KICKED IN HEAD BY ST				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01606W										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01606W

15WC01606W	PROVOST, MELISSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY DEMAREST HS	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE WAS BIT ON HER L FOREARM BREAKING THE SKIN BY A STUDENT HAVING			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01608Y

15WC01608Y	RIVERA, PAMELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL ES	4/16/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CLEANING LUNCH TABLES FELT STRAIN TO LOWER BACK			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01609K

15WC01609K	DURAN, AMELIDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW HORIZON COMM CHARTER S	4/16/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTED TO PREVENT A STUDENT FROM THROWING A CHAIR THE CHILD F			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01610B

15WC01610B	BROWN, CATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GEORGE E. WILSON E.S.	4/16/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A STUDENT KICKED A BASKETBALL WHICH STRUCK CLMT'S LOWER BACK			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01612Y										
15WC01612Y	SCHIESSER, MARGARET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAK KNOLL M.S.	4/15/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SUPERVISING STUDENTS DURING RECESS, WAS STUNG BY A BEE ON L LOW			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01613B										
15WC01613B	LAURICELLA, ANGELITA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH MOUNTAIN MS	4/17/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE TRIPPED OVER A METAL BOX IN THE COPY ROOM & FELL STRIKING HER L			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01614I										
15WC01614I	BISHOP, JEFFREY	10	50,000.00	1,193.00	38,000.00	0.00	0.00	0.00	0.00	89,193.00
NJ REGIONAL DAY-JACKSON	4/15/2015	4/15/2015	Open	0.00	1,193.00	2,565.00	0.00	0.00	0.00	3,758.00
TEACHING CLASS HE CUT HIS RT HAND WITH A TABLE SAW INJURING HIS RT			50,000.00	0.00	35,435.00	0.00	0.00	0.00	0.00	85,435.00
Total by Claim Number 1 Claim			50,000.00	1,193.00	38,000.00	0.00	0.00	0.00	0.00	89,193.00
			0.00	1,193.00	2,565.00	0.00	0.00	0.00	0.00	3,758.00
			50,000.00	0.00	35,435.00	0.00	0.00	0.00	0.00	85,435.00
Claim Number: 15WC01615K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01615K

15WC01615K	GROSSI, VISIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	4/14/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING AROUND DESK, STUMBLED AND FELL BACK AGAINST CUBBIES INJ I				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01616W

15WC01616W	TIMMONS-RYNNING, CYNDEE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCKINLEY NO.10 ELEM.	4/14/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING FROM BLDG, SLIPPED ON GRAVEL AND FELL FOOT LACERATION				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01617B

15WC01617B	MARONEY, SUZANNE	11	2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
BELMAR ES	4/13/2015	4/13/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A MOUSE CRAWLED OVER HER R FOOT CAUSING HER TO KICK AND FEEL PA				2,501.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1 Claim				2,501.00	243.00	0.00	0.00	0.00	0.00	2,744.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,501.00	0.00	0.00	0.00	0.00	0.00	2,501.00

Claim Number: 15WC01618Y

15WC01618Y	ANDERSON, AUSTIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELTRAN HIGH SCHOOL	4/17/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING AND HIT HIS HAND ON METAL BOX CUTTING L HAND INDEX FINGER				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01619B										
15WC01619B	TAPIA, ROSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION/BUS LOT	4/16/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER FORKLIFT AND FELL ON KNEES AND SHINS				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01620W										
15WC01620W	BOWLES, MAUREEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOSEPH R. BOLGER MS	4/17/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT GAVE HER A HUG, THE STUDENT PICKED HER UP HEARD CARCKIN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01621F										
15WC01621F	THOMAS, LAMAR	10	17,500.00	0.00	3,500.00	0.00	0.00	0.00	0.00	21,000.00
JANIS E DISMUS MS	4/2/2015	4/17/2015	Open	0.00	0.00	2,687.00	0.00	0.00	0.00	2,687.00
STRAINED LOWER BACK TRANSFERRING BOOKS FROM ONE BOOK CASE TO				17,500.00	0.00	813.00	0.00	0.00	0.00	18,313.00
Total by Claim Number 1 Claim			17,500.00	0.00	3,500.00	0.00	0.00	0.00	0.00	21,000.00
			0.00	0.00	2,687.00	0.00	0.00	0.00	0.00	2,687.00
			17,500.00	0.00	813.00	0.00	0.00	0.00	0.00	18,313.00
Claim Number: 15WC01622B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01622B

15WC01622B	TALIAFERRO, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL	4/17/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
OPENING A BLOOD PRESSURE CUFF, IT BROKE MERCURY SPLASHED INTO L				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01623Y

15WC01623Y	GATTO, ROBIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	4/15/2015	4/15/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE WALKING A STUDENT TO HER CLASS, STUDENT PULLED EE CAUSING				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01624W

15WC01624W	CLARK, MARVIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURNETT JR. HIGH SCHOOL (UNIC	4/16/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A BOX FELL AND HIT A LIGHT BULB ON CART, BULB SHATTERED HITTING EY				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01625T

15WC01625T	KASYANENKO, RACHELLE	10	2,500.00	1,438.00	0.00	0.00	0.00	0.00	0.00	3,938.00
WARREN DEVELOP. LEARNING CTI	4/20/2015	4/20/2015	Open	541.10	1,193.00	0.00	0.00	0.00	0.00	1,734.10
WHILE TALKING TO A STUDENT, STUDENT SLAPPED EE ON THE L SIDE OF F				1,958.90	245.00	0.00	0.00	0.00	0.00	2,203.90



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	1,438.00	0.00	0.00	0.00	0.00	3,938.00
				541.10	1,193.00	0.00	0.00	0.00	0.00	1,734.10
				1,958.90	245.00	0.00	0.00	0.00	0.00	2,203.90
Claim Number: 15WC01626A										
15WC01626A	KENNEDY, CAREY	10		20,000.00	2,743.00	53,500.00	0.00	0.00	0.00	76,243.00
ANTHONY WAYNE MS	4/20/2015	4/20/2015	Open	0.00	243.00	1,446.25	0.00	0.00	0.00	1,689.25
STRUCK BY STUDENT RUNNING IN HALLWAY CAUSING HER HEAD TO WHIP B				20,000.00	2,500.00	52,053.75	0.00	0.00	0.00	74,553.75
Total by Claim Number 1 Claim				20,000.00	2,743.00	53,500.00	0.00	0.00	0.00	76,243.00
				0.00	243.00	1,446.25	0.00	0.00	0.00	1,689.25
				20,000.00	2,500.00	52,053.75	0.00	0.00	0.00	74,553.75
Claim Number: 15WC01627B										
15WC01627B	HUNT, KAREN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ASSISTING CHILD WITH GLUCOSE TREATMENT PUNCTURED HAND				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01628Y										
15WC01628Y	OMENSON, ROCHELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
TRITON HS	4/16/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING STUDENTS DOWN HALL, TURNED TO LOOK AT STUDENTS, TRIPPEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01629K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01629K

15WC01629K	TERRACINO, CHERYL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PETER COOPER SCHOOL	4/16/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENT, STUDENT DROPPED DEAD WEIGHT WHILE HOLDING HI				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01630C

15WC01630C	THAYAAPARAN, MIRNAALINI	14		40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
LINWOOD MIDDLE SCHOOL	4/17/2015	4/20/2015	4/28/2015	40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
AN INSECT BITE ON SOFT TISSUE				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
				40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 15WC01631W

15WC01631W	HEINEMANN, KRISTINE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORWOOD PUBLIC ES	4/17/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE TEACHING CLASS, CHILD TRIED RUNNING OUT OF CLASS & EE CAUGH-				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01632K

15WC01632K	GONZALEZ, JENNIFER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERTH AMBOY H.S.	4/18/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STEPPE IN HOLE IN GRASS TWISTED L ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01633Y										
15WC01633Y	WABA, AIDA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SOMERVILLE HS	4/17/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON LINOLEUM STRAINED L KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01634K										
15WC01634K	TOBIA, CHRISTINE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	4/17/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CARRYING STUDENT OFF BUS, STUDENT STARTED TO HAVE TANTRUM FELT				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01635K										
15WC01635K	EM, ROBERT		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS TRANSPORTATION	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STEPPING OFF LADDER, LOST BALANCE, FELT SHARP PAIN PULL IN R FOOT				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01636B



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01636B

15WC01636B	NANTON, NIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRUNSWICK ACRES E. S.	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RESTRAIN A CHILD WAS BITTEN ON L LEG				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01637W

15WC01637W	JAROSSE, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HIGH SCHOOL (UNION)	4/17/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE STUDENT WAS WALKING QUICKLY INTO LIBRARY, EE WAS STRUCK IN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01638K

15WC01638K	SARACINO, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
LOCKING DOOR, SPRING ON KEY RING OPENED AND PUNCTURED L INDEX FI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01639W

15WC01639W	BRIGHT, MARGARET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUTEN ROAD ES	4/17/2015	4/17/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON FOOD TWISTING L ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01640Y										
15WC01640Y	RAMSAY, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PORT MONMOUTH ROAD ES	4/17/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE RESTRAINING STUDENT, EE WENT TO GET UP & CHILD PULLED EE'S L AI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01641B										
15WC01641B	GARNER, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE TENDING TO STUDENT, EE WAS ACCIDENTALLY KNEED IN THE JAW BY				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01642K										
15WC01642K	MUSSO, VIOLET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLESEX HS	4/17/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE TRIPPED OVER BACKPACK THAT WAS ON THE FLOOR, TWISTING R KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01643B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01643B

15WC01643B	PIETRZAK, SHERRI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WANAQUE ES	4/17/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER BLUE TAPE ON FLOOR, FELL BACKWARDS HITTING UPPER BA			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01645B

15WC01645B	GHOBRIAL, AMEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A SPEC ED STUDENT HAVING A BEHAVIOR ISSUE PULLED CLMT'S ARM INJ LT			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01646A

15WC01646A	KENNEDY, TRESSIE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
MIDDLE SCHOOL AT SPRINGSIDE	4/17/2015	4/20/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HANGING POSTERS ON WALL IN HALLWAY, EXPERIENCED PAIN IN LOWER BA			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 Claim			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 15WC01647W

15WC01647W	SCHMALZ, EDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMBRIDGE E S	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELL COMING OFF CURB AND LANDED ON R SIDE, R RIBS, HAND			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01648W

15WC01648W	KREGLER, DIANE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRUNSWICK ACRES E. S.	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE HOLDING A STUDENT'S HAND WHILE WALKING WITH STUDENTS, STUC				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01649Y

15WC01649Y	KLEIN, MICHAEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN OFFICE	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE EXITING HIS COMPANY VEHICLE, WAS STRUCK IN HEAD BY A FENCE F				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01650Y

15WC01650Y	STELLMAN, CHARLES	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PENNSAUKEN INTERMEDIATE	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ON LOADING DOCK LOADING LUNCH TRAYS ONTO VAN HE SLIPPED & EXTEN				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01651W





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01651W

15WC01651W	RODRIGUEZ, ROSA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LANDIS INTERMEDIATE SCHOOL	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE COOKING IN KITCHEN SHE BURNED HER LT FOREARM ON OPEN STOV				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01652A

15WC01652A	WILLIAMSON, RONALD	10		20,000.00	1,193.00	48,500.00	0.00	0.00	0.00	69,693.00
OCEAN TWP H.S.	4/8/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRAINED GROIN AREA LIFTING WINDOWS FROM TRUCK				20,000.00	1,193.00	48,500.00	0.00	0.00	0.00	69,693.00
Total by Claim Number 1 Claim				20,000.00	1,193.00	48,500.00	0.00	0.00	0.00	69,693.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				20,000.00	1,193.00	48,500.00	0.00	0.00	0.00	69,693.00

Claim Number: 15WC01653K

15WC01653K	ZUCHOWSKI, MARIE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WOODLAND SCHOOL	4/21/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EXITING BLDG DURING FIRE DRILL STEPPED ON RUSTY NAIL PUNCTURE R FC				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01654K

15WC01654K	ROTONDO, MICHAEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CONNECTICUT FARMS SCHOOL (L	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CLEANING GARBAGE CAN BARRELL HE FELT STRAIN TO GROIN AREA				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01656W										
15WC01656W	CAMPISI, PETER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MADISON PARK ES	4/21/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BITTEN BY A CHILD ON L THIGH			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01657A										
15WC01657A	SUPIOT, JENNIFER	10	20,000.00	4,193.00	51,000.00	0.00	0.00	0.00	0.00	75,193.00
BANKBRIDGE REG DEVELOPMENT	4/21/2015	4/22/2015	Open	0.00	1,193.00	530.82	0.00	0.00	0.00	1,723.82
STRUCK L SIDE OF HEAD ON METAL POST AFTER BEING HIT WITH A SWING			20,000.00	3,000.00	50,469.18	0.00	0.00	0.00	0.00	73,469.18
Total by Claim Number 1 Claim			20,000.00	4,193.00	51,000.00	0.00	0.00	0.00	0.00	75,193.00
			0.00	1,193.00	530.82	0.00	0.00	0.00	0.00	1,723.82
			20,000.00	3,000.00	50,469.18	0.00	0.00	0.00	0.00	73,469.18
Claim Number: 15WC01658W										
15WC01658W	STEPP, DIANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER SCH V	4/20/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN BY STUDENT ON L SIDE OF WRIST			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01659K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01659K

15WC01659K	DIRENZO, ALESSANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 1	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE KICKED SOCCER BALL BACK TO STUDENTS, BANGED R FOOT ON CONCRE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01665B

15WC01665B	MARTIN, ANDREA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ESU-AUTISM	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
GOING UP STAIRS, EE FELL ON WATER TWISTING L KNEE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01667W

15WC01667W	DOMBROWSKI, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEHOLD TWP EARLY CHILDHOC	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CARRYING STAND MIXER, EE BENT DOWN TO PUT AWAY & TOP FELL C				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01668W

15WC01668W	KERR, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUDREY W CLARK	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
REMOVING SPLINTER FROM STUDENT'S HAND, STUDENT JERKED BACK CAU:				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01669Y										
15WC01669Y	GUBERMAN, LITA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LINWOOD MIDDLE SCHOOL	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CHILD THREW A BASKETBALL, IT BOUNCED OFF RIM & HIT EE IN THE HEAD				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01670Y										
15WC01670Y	SHINKLE, KIMBERLY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
RICHARD C. CROCKETT M.S.	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE WAS STRUCK ON L SIDE OF HEAD W/ BASKETBALL DURING GYM CLASS				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01671B										
15WC01671B	ORTIZ, LISA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN CO. VOC-TECH V.S. (GLO.	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
THROWING TRASH INTO THE COMPACTOR & THE DOOR HIT L TEMPLE AREA				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01672Y										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01672Y

15WC01672Y	CERVERIZZO, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTHERN BLVD ES	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SITTING BY A STUDENT & STUDENT POKED EE IN L EYE WITH FINGER			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01673Y

15WC01673Y	STINSON, KRISTIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMILTON NORTH NOTTINGHAM H	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING IN CLASSROOM, TOE CAUGHT BACK OF CHAIR & FELL INJURING KN			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01674Y

15WC01674Y	ROSSI, JANATH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUDSON CNTY VO-TECH	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PLACING SALAD IN WALK-IN FRIDGE EE SLIPPED ON SUBSTANCE ON GROUND			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01675K

15WC01675K	PERALTA, DAWE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EE WAS OPENING WINDOW SHADE & WINDOW WAS CRACKED. EE RECEIVED			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01676B										
15WC01676B	STASIUM, LORRI	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MARY ETHEL COSTELLO	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELL ON BROKEN PAVEMENT INJURING L FOOT				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01677B										
15WC01677B	HIGGINS, SARAH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL (UNION)	4/20/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLOSING A WINDOW ON 2ND FLOOR & NOW HAS PAIN IN R SHOULDER				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01678W										
15WC01678W	BRZYSKI, FRANK	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
AMSTERDAM ES	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE LIFTING A CRATE OF MILK, EE FELT PAIN IN L GROIN AREA				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01679W										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01679W

15WC01679W	LAU, JENNY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SCHOOL (UNION)	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
GOING FROM ONE SCHOOL TO ANOTHER TRIPPED ON UNEVEN CRACKED SII				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01680W

15WC01680W	GENITO, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN ADAMS SCHOOL	4/21/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CLIMBING UP A LADDER TO REPARIR A LIGHT, EE FELT SHARP PAIN IN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01681B

15WC01681B	ABREU, PAULA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS EDISON SCHOOL	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TAKING GARBAGE OUT, EE STRUCK R ARM AGAINST OPEN DOOR CAUSING F				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01682Y

15WC01682Y	BORN, CAROL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY CTY SPEC SERVICES H:	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE LEANING TO SPEAK TO A STUDENT THAT WAS HAVING A TANTRUM, S				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01684Y

15WC01684Y	MOORE, GERARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANOVER PARK REG HS BOE	4/20/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE INSTRUCTING A TRACK TEAM IN WEIGHT ROOM, A WEIGHT WAS DROF			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01685Y

15WC01685Y	CARABALLO, ANGEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOLLWOOD ES	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE ROLLING DOWN STAGE EXTENDERS HIS RT HAND WAS CAUGHT BETW			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01686Y

15WC01686Y	VIGLIONE, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GARFIELD HS	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE DOING DEMOLISHING WORK RIPPING OUT SHEET ROCK CLMT EXPERI			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01687Y





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01687Y

15WC01687Y	PUC, GREG	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONROE TWP TRAILER MS	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BRINGING SEWER FROM TRUCK, FELL INJURED L SHIN				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01688Y

15WC01688Y	GWASDA, CHRISTOPHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY HEIGHTS CHARTER S	4/21/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE PLAYING BASKETBALL W/ STUDENTS, EE WAS ELBOWED IN NOSE BY J				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01689K

15WC01689K	LEDDY, RUBI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WANAQUE ES	4/21/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE WALKING IN HALLWAY CLMT SLIPPED ON WATER & FELL CAUSING STI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01690K

15WC01690K	TANAJAUSKAS, WILLIAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS JEFFERSON MS	4/16/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE CLOSING A CROSSBAR, CAME DOWN & HIT HIM ON HEAD/JAW				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01692T										
15WC01692T	VERLANGIERI, KIMBERLY	14	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
MANASQUAN ES	4/21/2015	4/23/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WENT TO LIFT BUCKET BUT IT WAS HEAVY, TRIED TO KICK IT OUT OF WAY IN				2,500.00	0.00	0.00	0.00	0.00	0.00	2,500.00
Total by Claim Number 1 Claim			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
Claim Number: 15WC01693B										
15WC01693B	KWIATKOWSKA, JOLANTA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RYERSON SCHOOL	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT BECAME AGGRESSIVE WITH TEACHER, SHE TRIED TO HELP & STUI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01694B										
15WC01694B	GODFREY, DORIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALLACE MIDDLE SCHOOL	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SHE WAS WALKING & WENT TO GRAB UMBRELLA THAT WAS FALLING OUT OF				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01695B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01695B

15WC01695B	HARRINGTON, THOMAS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK MS	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STANDING ON A STOOL CLEANING THE LIZARD TANK HE STEPPED DOWN, FA			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01696B

15WC01696B	KOWALSKI, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11	4/17/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
GETTING OFF SCHOOL BUS SHE SLIPPED ON WET STEP & FELL INJURING HE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01697I

15WC01697I	ARDAN, MARY	10	75,000.00	1,193.00	62,000.00	0.00	0.00	0.00	0.00	138,193.00
HAMBURG ES	4/22/2015	4/23/2015	Open	0.00	1,193.00	1,710.00	0.00	0.00	0.00	2,903.00
GOING DOWN STAIRS AND FELL CUT FOREHEAD, FX L WRIST/FOREARM			75,000.00	0.00	60,290.00	0.00	0.00	0.00	0.00	135,290.00
Total by Claim Number 1 Claim			75,000.00	1,193.00	62,000.00	0.00	0.00	0.00	0.00	138,193.00
			0.00	1,193.00	1,710.00	0.00	0.00	0.00	0.00	2,903.00
			75,000.00	0.00	60,290.00	0.00	0.00	0.00	0.00	135,290.00

Claim Number: 15WC01698W

15WC01698W	RABBAI, MEGORY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
MISSED HER STEP ON CRACKED SIDEWALK, TWISTED L ANKLE LANDING ON			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01699K										
15WC01699K	RAND, COLLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING MIDDLE SCH	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A STUDENT GRABBED HER BY THE RT WRIST & DUG HER FINGERS INTO HER			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01700B										
15WC01700B	MERCER, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COUNTY PREP HS	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE SITTING IN THE GUIDANCE OFFICE SHE STRUCK HER LT ANKLE AGAIN			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01701Y										
15WC01701Y	PAGAN, LUZ	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMONTON HS	4/16/2015	4/16/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLEANING SHE SQUIRTED CHEMICALS INTO HER EYES			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01702W										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01702W

15WC01702W	SARDENA, ESSAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON IRVINGTON ES	4/22/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
THROWING OUT GARBAGE BAGS INTO THE SCHOOL DUMPSTERS WHEN HE I				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01703K

15WC01703K	AGUIRRE-DEHERRERA, MARGO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL	4/22/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLMT SLIPPED & FELL ON WET FLOOR INJ RT SHOULDER & BUTTOCKS				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01704W

15WC01704W	KRAKOWSKI, FRANK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 8	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
HE BENT DOWN TO RETRIEVE A POSTER FROM CLASSROOM FLOOR & STRU				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01705Y

15WC01705Y	ZISA, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK EARLY CHILDHOOD	4/20/2015	4/20/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING A STUDENT TO THE BATHROOM, THE STUDENT STARTED TO FALL I				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01706K										
15WC01706K	WHEELER, DONNA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HOLLY HEIGHTS ES	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO OPEN A PORTABLE SOCCER GOAL & IT CLOSED HITTING HE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01708B										
15WC01708B	ABODE, MARY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BRUNSWICK ACRES E. S.	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVING TANTRUM, STUDENT SWUNG HIS HEAD, BAC				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01709W										
15WC01709W	MEALIA, LINDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY, STUDENT SLAPPED BACK OF HEAD				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01710K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01710K

15WC01710K	HARRY, EILEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ANNE C. JACQUES ELEMENTARY	4/21/2015	4/21/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE RESTRAINING A STUDENT THAT WAS HAVING A TANTRUM, SHE START				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01711Y

15WC01711Y	FRENCH, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURNET HILL ES	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR BIT HER ON THE RT FOREARM, BARELY BREA				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01712J

15WC01712J	SCAROLA, NANCY	10	2,500.00	1,193.00	6,500.00	0.00	0.00	0.00	0.00	10,193.00
ALLEN W ROBERTS SCHOOL	4/22/2015	4/23/2015	Open	0.00	1,193.00	1,710.00	0.00	0.00	0.00	2,903.00
WAS STRUCK ON R SIDE OF FACE WITH A FOAM BALL DURING GYM CLASS				2,500.00	0.00	4,790.00	0.00	0.00	0.00	7,290.00
Total by Claim Number 1 Claim				2,500.00	1,193.00	6,500.00	0.00	0.00	0.00	10,193.00
				0.00	1,193.00	1,710.00	0.00	0.00	0.00	2,903.00
				2,500.00	0.00	4,790.00	0.00	0.00	0.00	7,290.00

Claim Number: 15WC01713B

15WC01713B	CONLEY, DENISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP M.S.	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT FROM ATTACKING ANOTHER STUDENT, STUDENT PL				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01715K										
15WC01715K	PEART, OPAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TAUNTON SCHOOL	4/22/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DURING RECESS WAS STRUCK IN FACE BY A BALL INJURED L EYE, NOSE/FAC			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01716Y										
15WC01716Y	DOODY, JEANETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLIN POWELL	4/23/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DEMONSTRATING HOW TO RIDE A TRICYCLE, STAINED R ANKLE AS SHE GOT			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01717B										
15WC01717B	MEDINA, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUGUSTA SCHOOL IRVINGTON	4/20/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND FELL ON L SIDE, INJURED L ARM, KNEE AND PA			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01718Y										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01718Y

15WC01718Y	DIJOSEPH, AMY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GERALDINE FOSTER EARLY CHILD	4/22/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER BEAN BAG CHAIR AND FELL ON BOTH KNEES, TAILBONE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01719W

15WC01719W	PURCELL, BARBARA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN TWP E.S.	4/22/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TWISTED R KNEE WHILE ATTEMPTING TO RUN AFTER CHILD				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01720K

15WC01720K	VIVES, REBECCA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRITON HS	4/24/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
OPENING DOOR FOR CO-WORKER, DOOR CLOSED ON HER R FOOT				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01721W

15WC01721W	COPPOLA, MATTHEW	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE E S	4/23/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TAKING AIR CONDITIONER OUR OF WINDOW, IT STARTED TO FALL HE CAUGH				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01723W										
15WC01723W	BERMUDEZ, STEPHANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 3 ES	4/23/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STEPS AND MISSED HER STEP LANDING ON R KNEE, TWISTE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01724B										
15WC01724B	WIEDOW, LUANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
STILLWATER TWP ES	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
HOLDING HANDS & WALKING WITH A STUDENT WHO WAS HAVING A BEHAVIC			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01725K										
15WC01725K	SEPTYNSKI, MARTHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY CTY SPEC SERVICES H	4/22/2015	4/22/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SHE WAS IN THE POOL WHEN A CHILD CLIMING OUT OF THE POOL ON THE L			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01726J										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01726J

15WC01726J	CROMEY, MICHAEL	10		7,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	13,693.00
BELLEVILLE SENIOR HS	4/24/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT TRIPPED OVER DOOR SADDLE & FELL LANDING ON BOTH KNEES				7,500.00	950.00	5,000.00	0.00	0.00	0.00	0.00	13,450.00
Total by Claim Number 1 Claim				7,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	13,693.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				7,500.00	950.00	5,000.00	0.00	0.00	0.00	0.00	13,450.00

Claim Number: 15WC01727Y

15WC01727Y	JOHNSON, CASSANDRA	11		2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
WOODBRIIDGE BOARD OF EDUCAT	4/24/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING OFF A STEP TOWARD THE TABLE AND FELL ON BOTH KNEES				2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1 Claim				2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00

Claim Number: 15WC01728B

15WC01728B	SAYEDAHMED, SAHAR	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE HS	4/23/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON SPILT JUICE STRAINED R ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01729Y

15WC01729Y	GUZMAN, MARLIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EAST CAMPUS	4/24/2015	4/24/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING DESK SMASHED L HAND AND PINKY BETWEEN DESK AND DOORWAY				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01730K										
15WC01730K	RAIA, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MANCHESTER TWP. ES	4/24/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO BOTH KNEES AND L HIP PARTICIPATING IN VOLUNTEER JUM				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01731W										
15WC01731W	HABERSHAM, APRIL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL INTERMEDIATE SCHOO	4/24/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING AUTISTIC STUDENT WAS STRUCK ON ARMS AND CHEST, BITTE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01732K										
15WC01732K	REEVES, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLV (OUR LADY OF VICTORIES)	4/24/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DOING CORSS ARM HOLD ON STUDENT, CHILD HEAD BUTTED HER IN JAW				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01733Y										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01733Y

15WC01733Y	DEBELLA, NANCY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MILL LAKE ES	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP STUDENT THAT WAS KICKING AND SCREAMING, FELT PAIN IN R F				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01735W

15WC01735W	LATERZA, ANTONIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREGORY SCHOOL	4/23/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REDIRECTING STUDENT, STUDENT STEPPED ON R GREAT TOE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01736K

15WC01736K	GIBBON, ROBIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLOW GROVE ES	4/24/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO RETRIEVE MEDICAL BINDER TAPE DISPENSER FELL LANDEE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01737A

15WC01737A	ETHERIDGE, LESLEY	14		1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
PASSAIC COUNTY ADULT SCHOOL	4/27/2015	4/27/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FROM HEAT IN CLASSROOM SUFFERED SHORTNESS OF BREATH, PHLEGM, I				1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 15WC01738F

15WC01738F	HACKNEY-DANKS, VICTORIA	10		35,000.00	1,195.00	27,000.00	0.00	0.00	0.00	0.00	63,195.00
SALEM CAMPUS	4/24/2015	4/27/2015	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
SHE STEPPED ON A CHAIR TO POINT A CLOCK AS AN EXAMPLE, FELL ON L W				35,000.00	2.00	27,000.00	0.00	0.00	0.00	0.00	62,002.00
Total by Claim Number 1 Claim				35,000.00	1,195.00	27,000.00	0.00	0.00	0.00	0.00	63,195.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
				35,000.00	2.00	27,000.00	0.00	0.00	0.00	0.00	62,002.00

Claim Number: 15WC01739Y

15WC01739Y	VAGNARELLI, BRUNO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP TWO STUDENTS CUTTING L BICEP				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01740K

15WC01740K	SKORGA, JUDITH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLONIA HIGH SCHOOL	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER RAISED OUTLET AND FELL ON L KNEE AND ELBOW				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01741Y



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01741Y

15WC01741Y	FITZMAURICE, JAMIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FORREST DALE MS	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STOOD UP ON CHAIR HIT HEAD ON BOOKSHELF CUTTING L SIDE OF HEAD				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01742K

15WC01742K	LYNNE, ROXANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARETOWN E.S.	4/22/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BENDING OVER TO TALK TO STUDENT, STUDENT ROLLED OVER AND KICKED				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01743Y

15WC01743Y	GALIOTO, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE MS	4/24/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLEANING UP DEBRIS HE FELL DOWN STAIRS INJURED L ELBOW				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01744K

15WC01744K	BACON, GARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH HUNTERDON H S	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING GRASS WHEN HE HAD AN ALLERGIC REACTION MULTI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01745F

15WC01745F	ARGEN, LENORE		10	2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
HERITAGE MS	4/25/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STRAINED L FOOT AS SHE STEPPED ON METAL PLATE IN GROUND				2,500.00	952.00	0.00	0.00	0.00	0.00	3,452.00
Total by Claim Number 1 Claim				2,500.00	1,195.00	0.00	0.00	0.00	0.00	3,695.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	952.00	0.00	0.00	0.00	0.00	3,452.00

Claim Number: 15WC01746W

15WC01746W	JACOBSON, SARA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP H.S	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT DROPPED THE BASE OF VOLLEYBALL POLE ON R GREAT TOE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01747K

15WC01747K	BELL, WILLIAM		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HARRISON ES	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE EMPTYING A MOP BUCKET FELT PAIN IN L WRIST				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01748K



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01748K

15WC01748K	BOBIEN, DONALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE PREP ACADEMY	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CONDUCTING A RANDOM STUDENT SEARCH WAS STRUCK BY AN UNKNOWN			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01750Y

15WC01750Y	MCSHANE, THERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONROE TWP TRAILER MS	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BRINGING A CART DOWN A RAMP, CART TURNED & BENT HER LT WRIST BAC			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01751B

15WC01751B	IMPREVEDUTO, JUDITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CONOVER ROAD ES	4/20/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON SLIPPERY FLOOR AND FELL ON L WRIST, COCCYX			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01752W

15WC01752W	OLIVER, JERRY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP STUDENTS FIGHTING, HE WAS BIT ON HIS LT RING FINGER BR			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01753W

15WC01753W	DEFILIPPIS, JANICE	14	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL	4/28/2015	4/28/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STEPPED IN INDENTATION IN GROUND AND TWISTED L ANKLE AND FELL			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01754Y

15WC01754Y	BALDYGA, JANICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INTERMEDIATE ES	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STOOL FELL ON R FOOT AS SHE PICKED IT UP TO PUT UNDER TABLE			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01755W

15WC01755W	SZOKE, GERALDINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIDGEWAY ES	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER BUNCHED UP RUG SHE STUMBLED, BROKE HER FALL HITTING			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01756K



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01756K

15WC01756K	FRANKLIN, RHONDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
QUIBBLETOWN M.S.	4/15/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RETURNING TO SITTING POSITION ON A STOOL SHE FELL INJ HER LOWER BA				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01757Y

15WC01757Y	ROMM, ELLEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBROOK	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING IN THE CLASSROOM, SLIPPED ON SLIPPERY SURFACE & FELL, INJ				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01758B

15WC01758B	KAISER, MARGARET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
G H CARSON	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
OPENING A WINDOW IT CAME DOWN ON HER L PINKY FINGER				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01759W

15WC01759W	FERNANDEZ, DOROTHIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEWBURY SCHOOL	4/24/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A SPEC ED STUDENT HAVING A BEHAVIOR ISSUE BIT CLMT ON LT FOREARM				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01760W										
15WC01760W	GOMEZ, RUBEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR PUSHED HIM, HE FELL CUTTING HIS R SIDE FAC			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01761W										
15WC01761W	INCORUAIA, CAROLINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFWOOD AVENUE ES	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STRUCK L GREAT TOE ON PROTECTIVE RUBBER MAT			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01762Y										
15WC01762Y	KENDALL, GLORIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ATL CNTY SPEC SRV TRANSPORT/	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
GETTING OFF BUS, MISSED STEP CAUSING HER FOOT TO HIT ASPHALT R KNI			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01763B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01763B

15WC01763B	KILLIAN, ELIZABETH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM ANNIN MS	4/23/2015	4/23/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE PLAYING BASKETBALL WITH THE STUDENTS, THE BASKETBALL HIT HE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01764K

15WC01764K	ELFERS, JOHN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH COUNTY VOCATIONAL	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SUPERVISING BASKETBALL GAME, WAS HIT IN MOUTH, FACE, JAW BY BASKE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01765B

15WC01765B	GHYS, SARAH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
UNION HILL MS	4/27/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE PUTTING UP A POSTER, THE METAL PART OF THE MAP HOLDER HIT CI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01766Y

15WC01766Y	DANGELO, AUDREY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
FM BURD E.S.	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK IN L EYE BY A TOY STUDENT WAS WAVING AROUND				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01767Y										
15WC01767Y	WALSH, ALYSSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMONTON MS	4/22/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TEACHING CLASS WAS PUSHED/THREW METAL COMPUTER STOOL HIT R MID			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01768B										
15WC01768B	LONSKY, EVA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E.S. #3	4/27/2015	4/27/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN THE HALLWAY WHEN SHE SLIPPED ON THE FLOOR & TRIED			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01769W										
15WC01769W	RUIZ, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LEAP ACADEMY CHARTER SCHOOL	4/28/2015	4/28/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SHE RAN TO A STUDENT WHO WAS HAVING A SEIZURE & SLIPPED & FELL, LA			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01770W										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01770W

15WC01770W	MCCOLLUM, AMANDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO CALM STUDENT DOWN, STUDENT SWUNG BAG HITTING HER L TH				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01771K

15WC01771K	MONTANARO, DAWN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW TRANSPORTATION	4/28/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BENDING OVER TO PICK UP STUDENTS KINDLE, BUS MADE SHORT STOP ANE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01772Y

15WC01772Y	BUDHU, BERNICE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE HIGH SCHOOL	4/22/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK ON HEAD BY A SOFTBALL THROWN BY DURING PRACTICE				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01773B

15WC01773B	MORANO, RICHARD	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
H & M POTTER ES	4/28/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TINGLING IN L HAND/FINGER TIPS FROM USING SUPROX CLEANER				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01774K										
15WC01774K	THOMAS, EILEEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SOUTHWOOD ES	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A STUDENT HAVING A BEHAVIOR BOT HER ON THE RT HAND WEB AREA BETV				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01775W										
15WC01775W	TAMAYO, LELA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT, A CABINET ABOVE BEING CLOSED STRUCK L SIDE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01776B										
15WC01776B	BROSCHARD, NICOLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #3 E.S.	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SPEAKING WITH A STUDENT, STUDENT KICKED HER IN THE LEG CAUSING HE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 15WC01777K										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01777K

15WC01777K	DECKER, ELLEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON SCHOOL	4/28/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRYING TO STOP STUDENT FROM THROWING CHAIR, FELT PAIN IN LOWER B				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01778Y

15WC01778Y	PATERNO, THERESA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11	4/28/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON FOOD TWISTED L ANKLE				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01779W

15WC01779W	AVALOS, MARIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	4/28/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK IN FACE BY VOLLEYBALL DURING GYM CLASS				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	243.00	0.00	0.00	0.00	0.00	243.00
				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01780B

15WC01780B	BRUCKER, NANCY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR WAS HOLDING SHE BROKE LOOSE AND FELL HI				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01781K

15WC01781K	RALSTON, CINDY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/29/2015	4/29/2015	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO RUN AFTER A STUDENT WHO WAS ATTEMPTING TO RUN OU				2,500.00	2.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 15WC01783B

15WC01783B	RODRIGUEZ, MELINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AMERIGO A ANASTASIA	4/29/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ASSISTING STUDENT OPENING BOTTLE OF JUICE IT SPLASHED INTO BOTH E'				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01784W

15WC01784W	TUSA, VIOLA	14	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN SCHOOL	4/28/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HOLDING STUDENTS HAND, STUDENT DROPPED TO FLOOR PULLING HER L A				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01785Y



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01785Y

15WC01785Y	LACARUBA, LISA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TAYLOR ST E.S.	4/28/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING DOWN STAIRS, HEEL CAUGHT ON STEP SHE FELL ON L KNEE, WRIS				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01786K

15WC01786K	MAHSHID, KARSHENAS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYSHORE MS	4/20/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRYING TO OPEN DOOR IN GYM, STUDENT PUSHED DOOR CLOSING R INDEX				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01787B

15WC01787B	STAVOLA, BRIELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GIBBSBORO E.S.	4/29/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STANDING WITH STUDENT, CHILD STARTED KISSING LEG AND BIT L LEG				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01788K

15WC01788K	COKLEY, JENNIFER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH END ES	4/29/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING AND TRIPPED ON GRAVEL AND FELL ON R ELBOW				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01789Y

15WC01789Y	KELLY-RUSSO, MARGARET	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORAL THREW A PENCIL CASE HITTING HER IN MOU				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01790B

15WC01790B	JACKSON, LEE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS UNION JC TRANSPORTATI	4/16/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING TOWARDS DOOR, TRIPPED AND FELL ONTO RAMP INJURED L KNEE				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01791B

15WC01791B	BURT, AMANDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARY MIDDLE	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD WANTED TO GET OUT OF CLASS AND CLMT WAS PUSHED INTO DOOR				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01792Y



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01792Y

15WC01792Y	HUBER, BRIDGET	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH MAIN STREET SCHOOL	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRYING TO STOP STUDENT FROM LEAVING CLASS, STUDENT BIT HER L FORI				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01793B

15WC01793B	DODDS, BARBARA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ANNE C. JACQUES ELEMENTARY	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIOR BIT LOWER ARM				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01794K

15WC01794K	NEWBY, JASON	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIORAL THREW ONE OF HIS SNEAKERS AT HIM STF				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01795Y

15WC01795Y	PETTI, MARY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELRAN MIDDLE SCHOOL	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT THAT WAS HAVING A TANTRUM, STUDENT BIT HER F				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01796Y

15WC01796Y	SINRAM, KATHLEEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE VALLEY H.S.	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COACHING VOLLEYBALL GAME, WAS STRUCK IN FACE WITH BALL				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01797K

15WC01797K	CLEMENTE, PHYLLIS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOSE MARTI SCHOOL	4/27/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT CAME UP BEHIND HER, GRABBED HER R ARM HYPEREXTENDED				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01798W

15WC01798W	PUGNET, CYNTHIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AMSTERDAM ES	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STANDING ON STEP STOOL PREPARING FOR A CELEBRATION SHE FELL INJU				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01799Y



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01799Y

15WC01799Y	JAMES, BRIDGET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK EARLY CHILDHOOD	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIOR PUNCHED HER IN HEAD			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01800K

15WC01800K	KLEM, KAREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT WAS HAVING A BEHAVIOR, GRABBED PRETZELS THAT FELL ONTO			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01801K

15WC01801K	CAPALBO, KRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGHLAND HS	4/24/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TWO STUDENTS WERE FIGHTING, TRIED TO BREAK IT UP INJURED L SHOULD			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01802B

15WC01802B	OBRIEN, CHRISTIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM ANNIN MS	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING UP STAIRS, MISSED A STEP TWISTED ANKLE			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01803Y										
15WC01803Y	WALL, LINDA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GLENWOOD ES	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING OUTSIDE WITH A CHILD & TRIPPED OVER A BALL, FALLING INJURED				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01804K										
15WC01804K	ROGER, ASHLEY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND TRANSPORTATION	4/28/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DRIVING SCHOOL BUS HAD TO MANUALLY USE HER FOOT TO TURN ON FLAS				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01805W										
15WC01805W	SLACK, CHRISTINE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
FOUNDATION ACADEMY CHAR SCH	4/21/2015	4/21/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN UP TO HER DESK FOR A PENCIL & ACCIDENTALLY RAN INTO H				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01806B										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01806B

15WC01806B	SMITH, COREEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELTRAN HIGH SCHOOL	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FILLING UP WATER BOTTLE AT WATER FOUNTAIN SLIPPED ON WATER TWIST			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01807Y

15WC01807Y	ODONNELL, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTER FOR LIFE LONG LEARNIN	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING A STUDENT HAVING A BEHAVIOR, THE STUDENT THREW A CHA			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01808C

15WC01808C	KEENAN, SHIRLEY	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
BANKBRIDGE ELEMENTRY	4/29/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HBP FROM STRESS WORKING WITH COWORKER			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 Claim			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 15WC01809Y

15WC01809Y	COVERT, DIANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BEAR TAVERN ES	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS STEPPING OFF SCHOOL BUS MISSED A STEP CAUSING HER TO F			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Total by Claim Number 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01810K

15WC01810K	GERARDI, LOUISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLUMBUS SCHOOL #8	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT STEPPED ON A DESK TO HANG UP ART WORK IN CLASSROOM FELL FR				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01811B

15WC01811B	CRAIG, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRAGG ES	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT WAS HAVING A MELTDOWN, SHE TRIED TO PREVENT STUDENT FR				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01813B

15WC01813B	SUTHERLIN, ABBIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
STONE BROOK ES	4/30/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN DOWN THE HALLWAY TOWARD HER, AS SHE TURNED TO MOV				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01816B



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01816B

15WC01816B	HOMIEK, KAREN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOMS RIVER CENTER	4/30/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS LEAVING TO GO TO A BOARD MEETING WHEN SHE LOST HER FOC				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01817W

15WC01817W	HILMY, NARGIS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SUSSEX AVENUE ES	4/29/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS WALKING TO SINK THAT WAS OVERFLOWING TRIPPED OVER RUB				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01822B

15WC01822B	FINN, DOLORES	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROBERT N. WILENTZ ES.	4/22/2015	4/23/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING DOWN THE STAIRS TO LEAVE FOR THE DAY SHE SLIPPED ON WET				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

Claim Number: 15WC01828Y

15WC01828Y	MEDINA, TERY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODLAND AVENUE ES	4/30/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING TO CLASS, SLIPPED & FELL INJURING L KNEE & LOWER BACK				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORKERS' COMPENSATION										
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01832K										
15WC01832K	KILBORN, MEGAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOLLY GLENN ES	4/28/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT DROPPED DEAD WEIGHT & SHE TWISTED HER R KNEE AS SHE WEI			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01834V										
15WC01834V	BAUMAN, ESTER	10	1.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,194.00
ORANGE HIGH SCHOOL	4/30/2015	5/2/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN INTO EE KNOCKING HER DOWN CAUSING HER TO FALL FRACT			1.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,194.00
Total by Claim Number 1 Claim			1.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,194.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,194.00
Claim Number: 15WC01835K										
15WC01835K	YACOEZELLI, DAWN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN H. WINSLOW E.S.	4/28/2015	4/28/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING & HIT LT LEF ON JANITORS CART			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 15WC01842T										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss		Status	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 10 - WORKERS' COMPENSATION

Claim Number: 15WC01842T

15WC01842T	HETZEL, JOSHUA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ADMINISTRATION BUILDING	4/28/2015	5/4/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS LIFTING UP BOXES TO MOVE FROM ONE OFFICE TO ANOTHER PAIN IN L				1.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 Claim			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Major Coverage 302 Claims			1,260,048.00	106,182.00	736,444.00	0.00	0.00	0.00	0.00	2,102,674.00
			21,691.87	78,579.00	27,279.24	0.00	0.00	0.00	0.00	127,550.11
			1,238,356.13	27,603.00	709,164.76	0.00	0.00	0.00	0.00	1,975,123.89

Major Coverage: 20 - GENERAL LIABILITY

Claim Number: 15GL03174D

15GL03174D	PANFILE, NED	21	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
SOMERSET CNTY ED.SERVICES CC	4/9/2015	4/13/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES NAIL IN TIRE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 15GL03191L

15GL03191L	WISBESKI, WILLIAM	21	0.00	0.00	304.95	0.00	0.00	0.00	0.00	304.95
SOUTH HUNTERDON REGIONAL H.	4/15/2015	4/17/2015	4/30/2015	0.00	0.00	304.95	0.00	0.00	0.00	304.95
ALLEGES BASEBALL STRUCK WINDSHEILD & CRACKED IT				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim			0.00	0.00	304.95	0.00	0.00	0.00	0.00	304.95
			0.00	0.00	304.95	0.00	0.00	0.00	0.00	304.95
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 20 - GENERAL LIABILITY

Claim Number: 15GL03198L

15GL03198L	COOK, JANET	21		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
PARKVIEW SCHOOL	4/13/2015	4/20/2015	4/28/2015	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
ALLEGES CLMT CAR DROVE OVER CONCRETE SPIKE IN PARKING LOT CAUSII				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 15GL03203E

15GL03203E	BYRD, ISAIAH	20		15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00
BRIDGETON	4/14/2015	4/21/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES HIB				15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00
Total by Claim Number 1 Claim				15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00

Claim Number: 15GL03206Q

15GL03206Q	STUDENTS, VARIOUS	20		5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
NUMBER 4 ES	4/22/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES EVACUATION DUE TO AN UNDERTERMINED ODOR				5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 Claim				5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00

Claim Number: 15GL03217L

15GL03217L	GIAMEO, PAUL	21		0.00	0.00	200.00	0.00	0.00	0.00	0.00	200.00
ROSELLE PARK HS	4/13/2015	4/23/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES BASEBALL STRUCK REAR WINDOW OF PARKED VEHICLE				0.00	0.00	200.00	0.00	0.00	0.00	0.00	200.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 20 - GENERAL LIABILITY										
Total by Claim Number 1 Claim				0.00	0.00	200.00	0.00	0.00	0.00	200.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	200.00	0.00	0.00	0.00	200.00
Claim Number: 15GL03238L										
15GL03238L	ROCKHILL, GARY		21	0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
ASBURY PARK HIGH SCHOOL	4/1/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FOUL BALL HIT CLMTS VEHICLE WINDSHIELD				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Claim Number: 15GL03239D										
15GL03239D	ROMANO, ISRAEL		22	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
CARTERET E.S. (ESSEX)	4/16/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CHILD FELL OFF JUNGLE GYM				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 15GL03241L										
15GL03241L	BENDER, PATRICIA KATHLEEN		21	0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
ALEXANDRIA TWP BOE	4/23/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FOUL BASEBALL GAME SHATTERED WINDOW				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Total by Major Coverage 9 Claims			20,000.00	0.00	4,004.95	0.00	0.00	0.00	5,000.00	29,004.95
			0.00	0.00	804.95	0.00	0.00	0.00	0.00	804.95
			20,000.00	0.00	3,200.00	0.00	0.00	0.00	5,000.00	28,200.00

Major Coverage: 30 - AUTO LIABILITY

Claim Number: 15AL03167Q

15AL03167Q	GARCIA, CARLOS	31	0.00	0.00	2,000.00	0.00	0.00	0.00	0.00	2,000.00
TRANSPORTATION DEPT	4/1/2015	4/2/2015	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV				0.00	0.00	2,000.00	0.00	0.00	0.00	2,000.00
Total by Claim Number 1 Claim			0.00	0.00	2,000.00	0.00	0.00	0.00	0.00	2,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	2,000.00	0.00	0.00	0.00	0.00	2,000.00

Claim Number: 15AL03173Q/01

15AL03173Q/01	ENYEGUE, ZANG	31	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
WEST ORANGE BOE	4/13/2015	4/13/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 Claim			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00

Claim Number: 15AL03179L

15AL03179L	SHAW, JOHN	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
VINELAND BOE OFFICE	4/1/2015	4/16/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV MAKING LEFT STRUCK OV				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03188L





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 30 - AUTO LIABILITY

Claim Number: 15AL03188L

15AL03188L	RENTALS, AUTOMOTIVE	31	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
BRICK TWP. BOARD OF EDUCATIOI	4/1/2015	4/21/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV SIDESWIPE PARKED VEHICLE				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00

Claim Number: 15AL03192L

15AL03192L	VANN, VANESSA	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
SOMERSET CNTY ED.SERVICES CC	4/9/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV BACKING UP STRUCK OV				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03193L

15AL03193L	ZLOTNIK, REBECCA	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
HUDSON CNTY VO-TECH	4/21/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03194L

15AL03194L	MAZZERELLA, ANTHONY	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
WESTWOOD REG BOE	4/16/2015	4/23/2015	4/28/2015	0.00	0.00	500.00	0.00	0.00	0.00	500.00
IV STRUCK PARKED VEHICLE				0.00	0.00	0.00	0.00	0.00	0.00	0.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 30 - AUTO LIABILITY										
Total by Claim Number 1 Claim				0.00	0.00	500.00	0.00	0.00	0.00	500.00
				0.00	0.00	500.00	0.00	0.00	0.00	500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 15AL03198L										
15AL03198L	SANTOS, NAIDELYN	32		0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
CLIFFSIDE PARK BOARD OF EDUC	4/25/2015	4/27/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV HIT IN REAR, STUDENT INJURED WITH BACK INJURY				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 15AL03199L										
15AL03199L	SANTIAGO, ANTHONY	31		0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
HUDSON CNTY VO-TECH	4/2/2015	4/27/2015	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV LODGED BETWEEN CONSTRUCTION & A VEHICLE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Claim Number: 15AL03199L/01										
15AL03199L/01	CABRAL, ALEXIS	31		0.00	0.00	2,500.00	0.00	0.00	0.00	2,500.00
HUDSON CNTY VO-TECH	4/2/2015	4/27/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV LODGED BETWEEN CONSTRUCTION & A VEHICLE				0.00	0.00	2,500.00	0.00	0.00	0.00	2,500.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	0.00	2,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	0.00	2,500.00
Claim Number: 15AL03200L										



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 30 - AUTO LIABILITY

Claim Number: 15AL03200L

15AL03200L	BALOG, PERRY	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
MATAWAN-ABERDEEN REG	4/15/2015	4/27/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK REAR OF PARKED VEHICLE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03203L

15AL03203L	MACMULLEN, JOAN	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
LITTLE FALLS TWP BOE	4/27/2015	4/28/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03206L

15AL03206L	DESIDERIO, ANTHONY	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
BRICK TWP. BOARD OF EDUCATIOI	4/21/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNOCCUPIED IV ROLLED INTO PARKED VEHICLE				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15AL03210Q

15AL03210Q	FIRETTO, PAUL	31	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00
SOMERDALE PARK E. S.	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE				1,000.00	0.00	0.00	0.00	0.00	0.00	1,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 30 - AUTO LIABILITY										
Total by Claim Number 1 Claim				1,000.00	0.00	0.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				1,000.00	0.00	0.00	0.00	0.00	0.00	1,000.00
Total by Major Coverage 14 Claims				1,000.00	0.00	22,000.00	0.00	0.00	5,000.00	28,000.00
				0.00	0.00	500.00	0.00	0.00	0.00	500.00
				1,000.00	0.00	21,500.00	0.00	0.00	5,000.00	27,500.00
Major Coverage: 40 - AUTO PHYSICAL DAMAGE										
Claim Number: 15AL03162L										
15AL03162L	PENNSAUKEN TWP BOE		40	0.00	225.00	4,867.15	0.00	0.00	0.00	5,092.15
PENNSAUKEN BOARD OF EDUCATI	4/1/2015	4/2/2015	4/21/2015	0.00	225.00	4,867.15	0.00	0.00	0.00	5,092.15
OV STRUCK IV				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				0.00	225.00	4,867.15	0.00	0.00	0.00	5,092.15
				0.00	225.00	4,867.15	0.00	0.00	0.00	5,092.15
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 15AL03163L										
15AL03163L	BRIDGETON BOE		40	0.00	195.00	7,500.00	0.00	0.00	0.00	7,695.00
TRANSPORTATION	4/2/2015	4/2/2015	Open	0.00	195.00	370.60	0.00	0.00	0.00	565.60
OV STRUCK IV				0.00	0.00	7,129.40	0.00	0.00	0.00	7,129.40
Total by Claim Number 1 Claim				0.00	195.00	7,500.00	0.00	0.00	0.00	7,695.00
				0.00	195.00	370.60	0.00	0.00	0.00	565.60
				0.00	0.00	7,129.40	0.00	0.00	0.00	7,129.40
Claim Number: 15AL03171Q										
15AL03171Q	BRIDGETON BOE		40	0.00	90.00	3,000.00	0.00	0.00	0.00	3,090.00
BRIDGETON	4/2/2015	4/9/2015	Open	0.00	90.00	810.25	0.00	0.00	0.00	900.25
OV BACKING OUT OF PARKING SPACE STRUCK IV				0.00	0.00	2,189.75	0.00	0.00	0.00	2,189.75



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total	
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	
Major Coverage: 40 - AUTO PHYSICAL DAMAGE											
Total by Claim Number 1 Claim				0.00	90.00	3,000.00	0.00	0.00	0.00	0.00	3,090.00
				0.00	90.00	810.25	0.00	0.00	0.00	0.00	900.25
				0.00	0.00	2,189.75	0.00	0.00	0.00	0.00	2,189.75
Claim Number: 15AL03173Q											
15AL03173Q	WEST ORANGE, BOE	40		0.00	0.00	7,500.00	0.00	0.00	0.00	0.00	7,500.00
WEST ORANGE BOE	4/13/2015	4/13/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV				0.00	0.00	7,500.00	0.00	0.00	0.00	0.00	7,500.00
Total by Claim Number 1 Claim				0.00	0.00	7,500.00	0.00	0.00	0.00	0.00	7,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	7,500.00	0.00	0.00	0.00	0.00	7,500.00
Claim Number: 15AL03205L											
15AL03205L	WOODBRIIDGE TWP BOE	40		0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
WOODBRIIDGE BOARD OF EDUCAT	4/28/2015	4/29/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV WAS REARENDED				0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Total by Claim Number 1 Claim				0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Claim Number: 15AL03214L											
15AL03214L	HUNTERDON CTY ESC BOE,	40		0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
HUNTERDON TRANSPORTATION D	4/30/2015	5/1/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV HIT DEBRIS IN ROADWAY				0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
Total by Claim Number 1 Claim				0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total	
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	
Total by Major Coverage 6 Claims				0.00	510.00	47,867.15	0.00	0.00	0.00	0.00	48,377.15
				0.00	510.00	6,048.00	0.00	0.00	0.00	0.00	6,558.00
				0.00	0.00	41,819.15	0.00	0.00	0.00	0.00	41,819.15
Major Coverage: 50 - ERRORS AND OMISSIONS											
Claim Number: 15EO03089E											
15EO03089E	NBC UNIVERSAL (E. Bruns),	50		0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
EAST BRUNSWICK TWP. BOARD OF	4/3/2015	4/3/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGED OPRA VIOLATION				0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
Total by Claim Number 1 Claim				0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
				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	2,500.00	0.00	2,500.00
Claim Number: 15EO03090E											
15EO03090E	NBC UNIVERSAL (Perth Amboy),	50		0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
PERTH AMBOY	4/2/2015	4/2/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPRA DISPUTE				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Claim Number: 15EO03092E											
15EO03092E	NBC UNIVERSAL (S. Plainfield),	50		0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
SOUTH PLAINFIELD	4/3/2015	4/3/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPRA DISPUTE				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Claim Number: 15EO03095D											



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid	Inurred Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 50 - ERRORS AND OMISSIONS

Claim Number: 15EO03095D

15EO03095D	SICO, MICHAEL	50	0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
METS CHARTER BOE	4/3/2015	4/3/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES VIOLATED THE TERMS OF HIS SEPARATION AGREEMENT				0.00	0.00	1.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 Claim			0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 15EO03097E

15EO03097E	CHARNUSKA, KIM	50	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
BOUND BROOK BORO BOE	4/7/2015	4/7/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES DEFAMATION & WRONGFUL TERMINATION				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 Claim			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00

Claim Number: 15EO03098H

15EO03098H	ELSHERIF, EMRY	50	0.00	0.00	10.00	0.00	0.00	10.00	0.00	20.00
WESTFIELD BOE	4/9/2015	4/9/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DUE PROCESS				0.00	0.00	10.00	0.00	0.00	10.00	20.00
Total by Claim Number 1 Claim			0.00	0.00	10.00	0.00	0.00	10.00	0.00	20.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	10.00	0.00	0.00	10.00	0.00	20.00

Claim Number: 15EO03101E

15EO03101E	NBC UNIVERSAL (Little Falls),	50	0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
LITTLE FALLS TWP BOE	4/10/2015	4/10/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGED OPRA VIOLATION				0.00	0.00	2,500.00	0.00	0.00	2,500.00	5,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total	
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	
Major Coverage: 50 - ERRORS AND OMISSIONS											
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Claim Number: 15EO03102Q											
15EO03102Q	BIELSA, ANGELIQUE	50		0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
EAST WINDSOR REGIONAL	4/13/2015	4/13/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DUE PROCESS HEARING				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
Claim Number: 15EO03103H											
15EO03103H	SABORIDO, LUCAS	50		0.00	0.00	10,000.00	0.00	0.00	10,000.00	0.00	20,000.00
MONROE TWP. BOARD OF EDUCAT	4/13/2015	4/13/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DUE PROCESS				0.00	0.00	10,000.00	0.00	0.00	10,000.00	0.00	20,000.00
Total by Claim Number 1 Claim				0.00	0.00	10,000.00	0.00	0.00	10,000.00	0.00	20,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	10,000.00	0.00	0.00	10,000.00	0.00	20,000.00
Claim Number: 15EO03110E											
15EO03110E	NBC UNIVERSAL (Boonton),	50		0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
BOONTON TOWN BOE	4/16/2015	4/16/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGED OPRA VIOALTION				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Claim Number: 15EO03111E											



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 50 - ERRORS AND OMISSIONS

Claim Number: 15EO03111E

15EO03111E	NBC UNIVERSAL (Morris Hills),	50		0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
MORRIS HILLS/KNOLLS REG BRD C	4/17/2015	4/17/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGED OPRA VIOALTION				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00

Claim Number: 15EO03112E

15EO03112E	NBC UNIVERAL (FLORHAM PARK)	50		0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
FLORHAM PARK BOE	4/17/2015	4/17/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGED OPRA VIOALTION				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00

Claim Number: 15EO03114L

15EO03114L	FELIX, LIAN	50		0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
PISCATAWAY TWP BOE	4/17/2015	4/17/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DUE PROCESS				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00

Claim Number: 15EO03118H

15EO03118H	KOTEEN ASSOCS, GEORGE	50		0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
ROSELLE AVENUE	4/22/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CONTRACT DISPUTE				0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 50 - ERRORS AND OMISSIONS

Total by Claim Number 1 Claim				0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 15EO03120S

15EO03120S	VALENTIN, TONY		50	0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
EDISON TWP BOE	4/23/2015	4/23/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLTF WANTS RELEASE OF FUNDS				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	5,000.00

Claim Number: 15EO03126Q

15EO03126Q	K. S.		50	0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
FRANKLIN TWP BOE (SOMERSET)	4/24/2015	4/24/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DUE PROCESS				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	1,000.00	0.00	2,000.00

Claim Number: 15EO03128E

15EO03128E	MASSE, CAMOSE		50	0.00	0.00	5,000.00	0.00	0.00	5,000.00	0.00	10,000.00
EAST BRUNSWICK TWP. BOARD OF	4/28/2015	4/28/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES RACE DISCRIMINATION				0.00	0.00	5,000.00	0.00	0.00	5,000.00	0.00	10,000.00
Total by Claim Number 1 Claim				0.00	0.00	5,000.00	0.00	0.00	5,000.00	0.00	10,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	5,000.00	0.00	0.00	5,000.00	0.00	10,000.00

Claim Number: 15EO03129S





NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 50 - ERRORS AND OMISSIONS

Claim Number: 15EO03129S

15EO03129S	JACKSON, JUSTIN	50	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
STERLING H.S.	4/29/2015	4/29/2015	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CONTRACT VIOLATION				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00

Claim Number: 15EO03129S/01

15EO03129S/01	SOLUTIONS, ADVANCED COMPL	50	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
STERLING H.S.	4/29/2015	4/29/2015	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CONTRCT VIOLATION				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	1,000.00
Total by Major Coverage 19 Claims				0.00	0.00	42,512.00	0.00	0.00	38,010.00	80,522.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	42,512.00	0.00	0.00	38,010.00	80,522.00

Major Coverage: 70 - PROPERTY

Claim Number: 15PR03082Q

15PR03082Q	OCEAN CTY VOC BOE	70	0.00	0.00	150,000.00	0.00	0.00	0.00	0.00	150,000.00
BRICKTOWN SCHOOL	4/13/2015	4/14/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES DRYER FIRE AT BRICK CENTER CAUSED SMOKE TO ENTER HVAC S				0.00	0.00	150,000.00	0.00	0.00	0.00	150,000.00
Total by Claim Number 1 Claim				0.00	0.00	150,000.00	0.00	0.00	0.00	150,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	150,000.00	0.00	0.00	0.00	150,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Location	Loss Date	Rpt Date	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid
Description of Loss	Status		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv

Major Coverage: 70 - PROPERTY

Claim Number: 15PR03083Q

15PR03083Q	PLEASANTVILLE BOE	70	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
WASHINGTON SCHOOL	4/17/2015	4/21/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES BLOOD PRESSURE CUFF EXPLODED				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 Claim				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00

Claim Number: 15PR03084Q

15PR03084Q	OCEAN TWP BOE	70	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
TRANSPORTATION	4/20/2015	4/21/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES EMPLOYEE DAMAGED FRONT GATE OF BUS YARD WITH HER VEHIC				0.00	0.00	10,000.00	0.00	0.00	0.00	10,000.00
Total by Claim Number 1 Claim				0.00	0.00	10,000.00	0.00	0.00	0.00	10,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	10,000.00	0.00	0.00	0.00	10,000.00

Claim Number: 15PR03085Q

15PR03085Q	SOUTH ORANGE/MAPLEWOOD E	70	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
COLUMBIA HIGH SCHOOL	4/2/2015	4/22/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES DAMAGE TO BOILER				0.00	0.00	30,000.00	0.00	0.00	0.00	30,000.00
Total by Claim Number 1 Claim				0.00	0.00	30,000.00	0.00	0.00	0.00	30,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	30,000.00	0.00	0.00	0.00	30,000.00

Claim Number: 15PR03092Q

15PR03092Q	DEAL BOE	70	0.00	0.00	60,000.00	0.00	0.00	0.00	0.00	60,000.00
DEAL E.S.	4/24/2015	4/24/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES GENERATOR DAMAGED				0.00	0.00	60,000.00	0.00	0.00	0.00	60,000.00



NEW CLAIMS

APRIL 2015

Claim Number	Claimant Name	Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total	
Location	Loss Date	Rpt Date	Status	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	Incurring Paid	
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	
Major Coverage: 70 - PROPERTY											
Total by Claim Number 1 Claim				0.00	0.00	60,000.00	0.00	0.00	0.00	0.00	60,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	60,000.00	0.00	0.00	0.00	0.00	60,000.00
Claim Number: 15PR03094Q											
15PR03094Q	EAST ORANGE BOE		70	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
ECOLE TOUSSAINT LOUVERTURE	4/29/2015	4/30/2015	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FISH TANK CAUGHT FIRE				0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number 1 Claim				0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Major Coverage 6 Claims				0.00	0.00	280,000.00	0.00	0.00	0.00	0.00	280,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	280,000.00	0.00	0.00	0.00	0.00	280,000.00
Grand Totals: 356 Claims				1,281,048.00	106,692.00	1,132,828.10	0.00	0.00	38,010.00	10,000.00	2,568,578.10
				21,691.87	79,089.00	34,632.19	0.00	0.00	0.00	0.00	135,413.06
				1,259,356.13	27,603.00	1,098,195.91	0.00	0.00	38,010.00	10,000.00	2,433,165.04