



NEW CLAIMS

April 2017

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: 17WC02310Y

17WC02310Y	WALENTUKONIS, JOANN	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	4/3/2017	4/3/2017	Open	350.60	243.00	0.00	0.00	0.00	0.00	0.00	593.60
WALKING WITH STUDENT, FOOT GOT TANGLED WITH STUDENTS FOOT SHE F				2,149.40	2.00	0.00	0.00	0.00	0.00	0.00	2,151.40
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				350.60	243.00	0.00	0.00	0.00	0.00	0.00	593.60
				2,149.40	2.00	0.00	0.00	0.00	0.00	0.00	2,151.40

Claim Number: 17WC02313B

17WC02313B	APGAR, GLORIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FM BURD E.S.	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIED TO GET STUDENT TO STAND STILL, STUDENT GRABBED HAND AND BIT				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: 17WC02314K

17WC02314K	EDGERTON, BROOKE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO ASSIST CHILD HAVING BEHAVIORAL ISSUE STUDENT SCRATCHEE				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: 17WC02316W





NEW CLAIMS

April 2017

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: 17WC02316W

17WC02316W	CALABRESE, CHERYL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROSA INTERNATIONAL MS	4/1/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTED HEAVY BOX OF PROGRAMS STRAINED 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: 17WC02317Y

17WC02317Y	KANEASTER, BRENDA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCMANUS MIDDLE SCHOOL	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP STUDENT FIGHTING INJURED L THUMB, ARM, 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: 17WC02321M

17WC02321M	JONES, JASON		10	2,500.00	1,193.00	2,944.00	0.00	0.00	0.00	0.00	6,637.00
GARFIELD HS	4/3/2017	4/3/2017	Reopened	42.44	1,193.00	2,944.00	0.00	0.00	0.00	0.00	4,179.44
ATTEMPTING TO SUBDUE STUDENT LEG BECAME CAUGHT BETWEEN DOOR I				2,457.56	0.00	0.00	0.00	0.00	0.00	0.00	2,457.56
Total by Claim Number 1 Claim				2,500.00	1,193.00	2,944.00	0.00	0.00	0.00	0.00	6,637.00
				42.44	1,193.00	2,944.00	0.00	0.00	0.00	0.00	4,179.44
				2,457.56	0.00	0.00	0.00	0.00	0.00	0.00	2,457.56

Claim Number: 17WC02322W





NEW CLAIMS

April 2017

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: 17WC02322W

17WC02322W	BEECHER, BIANCA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MARLBORO EARLY LEARNING CEN	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT WAS BITTEN ON 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: 17WC02323Y

17WC02323Y	LACY, NICOLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE WAS KICKED IN FACE				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: 17WC02326B

17WC02326B	KHOMUSI, MARYAM	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GREATER BRUNSWICK CHARTER S	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING WITH STUDENTS ON SIDEWALK, STUDENT STOPPED SHORT SHE TI				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: 17WC02327B





NEW CLAIMS

April 2017

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: 17WC02327B

17WC02327B	MODESTO, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH TRANSPORTATIO	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE SCRATCHED HER ON HER CHEST				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: 17WC02329B

17WC02329B	SHAW, WILLIAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SALT BROOK SCHOOL	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING FOAM NOODLES FOR CLASS CUT L INDEX FINGER WITH SCISSORS				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: 17WC02330W

17WC02330W	ADEGESIN, ADEBISI	11	2,500.00	245.00	863.22	0.00	0.00	0.00	0.00	3,608.22
WARREN DEVELOP. LEARNING CTI	4/3/2017	4/3/2017	Open	1,300.03	243.00	863.22	0.00	0.00	0.00	2,406.25
STUDENT HAVING A BEHAVIORAL KICKED HER IN THE LT KNEE				1,199.97	2.00	0.00	0.00	0.00	0.00	1,201.97
Total by Claim Number 1 Claim			2,500.00	245.00	863.22	0.00	0.00	0.00	0.00	3,608.22
			1,300.03	243.00	863.22	0.00	0.00	0.00	0.00	2,406.25
			1,199.97	2.00	0.00	0.00	0.00	0.00	0.00	1,201.97

Claim Number: 17WC02333R





NEW CLAIMS

April 2017

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: 17WC02333R

17WC02333R	SPRUILL, ALTHEA	11		9,000.00	245.00	14,336.00	0.00	0.00	0.00	0.00	23,581.00
GREGORY SCHOOL (NEW)	4/3/2017	4/3/2017	Open	217.46	243.00	0.00	0.00	0.00	0.00	0.00	460.46
SLIPPED ON MATH CUBE AND FELL INJURED RANKLE, L KNEE, BOTH HIPS, BL				8,782.54	2.00	14,336.00	0.00	0.00	0.00	0.00	23,120.54
Total by Claim Number 1 Claim				9,000.00	245.00	14,336.00	0.00	0.00	0.00	0.00	23,581.00
				217.46	243.00	0.00	0.00	0.00	0.00	0.00	460.46
				8,782.54	2.00	14,336.00	0.00	0.00	0.00	0.00	23,120.54

Claim Number: 17WC02334K

17WC02334K	YOXHEIMER, TAYLOR	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS E. BOWE E.S.	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE STRUCK HER IN ABDOMEN				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: 17WC02335W

17WC02335W	JONG, JI YOON	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/3/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT HER 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: 17WC02337K





NEW CLAIMS

April 2017

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: 17WC02337K

17WC02337K	LUPPINO, JEAN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 3 ES	4/3/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO FREE A JAM IN PRINTER CUTF R FOREARM ON DOOR OF PRINTEF				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: 17WC02338K

17WC02338K	OLDHAM, MICHAEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST FREEHOLD E.S.	4/3/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING APPROX 14 TABLES WHEN HE FELT A PULL IN R SIDE OF GROIN				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: 17WC02339B

17WC02339B	ROCCO, ANDREW		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE VALLEY H.S.	4/4/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING ON WOODEN SHELF UNIT WHEN PARTICLES FROM SHELF GOT INT				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: 17WC02342Y





NEW CLAIMS

April 2017

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: 17WC02342Y

17WC02342Y	WILLMAN, WILLIAM	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HAMMONTON HS	4/4/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS PICKING UP PIECE OF PAPER AND HIT HEAD ON EDGE OF CHALKBOARD				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: 17WC02343B

17WC02343B	CABRERA, ALEXANDER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON AVENUE SCHOOL	4/4/2017	4/4/2017	Open	274.89	243.00	0.00	0.00	0.00	0.00	517.89
PUTTING AWAY GYM EQUIPMENT HE DROPPED A METAL PLATE ON L FOOT				2,225.11	2.00	0.00	0.00	0.00	0.00	2,227.11
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				274.89	243.00	0.00	0.00	0.00	0.00	517.89
				2,225.11	2.00	0.00	0.00	0.00	0.00	2,227.11

Claim Number: 17WC02345Z

17WC02345Z	MAGENHEIM, FRANCES	10		2,500.00	1,193.00	0.00	0.00	0.00	0.00	3,693.00
RIKER HILL ES	4/3/2017	4/4/2017	Open	1,852.15	1,193.00	0.00	0.00	0.00	0.00	3,045.15
WALKING IN BLDG, SLIPPED ON UNKNOWN SUBSTANCE AND FELL INJURED L				647.85	0.00	0.00	0.00	0.00	0.00	647.85
Total by Claim Number 1 Claim				2,500.00	1,193.00	0.00	0.00	0.00	0.00	3,693.00
				1,852.15	1,193.00	0.00	0.00	0.00	0.00	3,045.15
				647.85	0.00	0.00	0.00	0.00	0.00	647.85

Claim Number: 17WC02346Z





NEW CLAIMS

April 2017

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: 17WC02346Z

17WC02346Z	COSENTINO, MARIA	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
COLUMBUS SCHOOL #8	4/4/2017	4/4/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
STUDENT HAVING BEHAVIORAL ISSUE KICKED HER R HAND, R SHOULDER, R			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
Total by Claim Number 1 Claim			2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00

Claim Number: 17WC02347W

17WC02347W	RUSSELL, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORMANDY PARK SCHOOLS	4/4/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ON BUS DUTY MONITORING STUDENTS STEPPED ON A STUDENT MUSICAL IN			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: 17WC02351W

17WC02351W	PITTAR, ALVARO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON SCHOOL	4/4/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS GOING TO SIT IN HIS DEAT WHEN A STUDENT PULLED CHAIR AWAY HE 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: 17WC02352B





NEW CLAIMS

April 2017

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: 17WC02352B

17WC02352B	HAMED, RANA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH STAR ACADEMY BOE	4/4/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING A FOOD CART FOR FOOD DISTRIBUTION CART TIPPED LOOSING ITS				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: 17WC02353K

17WC02353K	PANETTA-HAGAN, LENORA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/4/2017	4/4/2017	Open	104.00	243.00	0.00	0.00	0.00	0.00	0.00	347.00
STUDENT HAVING BEHAVIORAL ISSUE BIT L FOREARM				2,396.00	2.00	0.00	0.00	0.00	0.00	0.00	2,398.00
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				104.00	243.00	0.00	0.00	0.00	0.00	0.00	347.00
				2,396.00	2.00	0.00	0.00	0.00	0.00	0.00	2,398.00

Claim Number: 17WC02354B

17WC02354B	GONZALEZ, CESARINA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND TRANSPORTATION	4/4/2017	4/4/2017	Open	28.25	243.00	0.00	0.00	0.00	0.00	0.00	271.25
INVOLVED IN MVA, STRAINED NECK FROM IMPACT				2,471.75	2.00	0.00	0.00	0.00	0.00	0.00	2,473.75
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				28.25	243.00	0.00	0.00	0.00	0.00	0.00	271.25
				2,471.75	2.00	0.00	0.00	0.00	0.00	0.00	2,473.75

Claim Number: 17WC02355B





NEW CLAIMS

April 2017

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: 17WC02355B

17WC02355B	PAINCHAUD, DOREEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT TRANSPORTATION	4/3/2017	4/4/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING READY TO PUT FUEL IN BUS, LOST HER BALANCE REACHING FOR K				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: 17WC02356B

17WC02356B	HALL, BRIANA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROSEVILLE COMMUNITY CHARTER	4/4/2017	4/4/2017	Open	124.22	243.00	0.00	0.00	0.00	0.00	0.00	367.22
STUDENT HAVING BEHAVIORAL ISSUE KICKED HER FACE AND BOTH LOWER				2,375.78	2.00	0.00	0.00	0.00	0.00	0.00	2,377.78
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				124.22	243.00	0.00	0.00	0.00	0.00	0.00	367.22
				2,375.78	2.00	0.00	0.00	0.00	0.00	0.00	2,377.78

Claim Number: 17WC02359B

17WC02359B	TERPOLILLI, ANTOINETTE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLOUCESTER CO. TECH & VOC HS	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING OUT OF COMPUTER ROOM WHEN SHE SLIPPED AND FELL INJURED				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: 17WC02360B





NEW CLAIMS

April 2017

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: 17WC02360B

17WC02360B	HULLIHEN, KATHLEEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN H. WINSLOW E.S.	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT HER L HAND, SCRATCHED HER FO				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: 17WC02361Y

17WC02361Y	LOPREATO, DEBRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODROW WILSON SCOOOL	4/4/2017	4/5/2017	Open	280.66	243.00	0.00	0.00	0.00	0.00	0.00	523.66
STUDENT HAVING BEHAVIORAL ISSUE SHOVED HER INJURING HER L ARM				2,219.34	2.00	0.00	0.00	0.00	0.00	0.00	2,221.34
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				280.66	243.00	0.00	0.00	0.00	0.00	0.00	523.66
				2,219.34	2.00	0.00	0.00	0.00	0.00	0.00	2,221.34

Claim Number: 17WC02362Y

17WC02362Y	REILLY, DEBORAH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NAVASINK ES	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT R 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: 17WC02363B





NEW CLAIMS

April 2017

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: 17WC02363B

17WC02363B	LOTANO, ROSEMARY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHEESEQUAKE ES	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE TRIPPED FROM A CHILD BOOK BAG STRING AND FELL INJUREI				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: 17WC02364R

17WC02364R	HERMAN, MICHAEL	10		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	4/5/2017	4/5/2017	Open	546.94	243.00	0.00	0.00	0.00	0.00	0.00	789.94
PUTTING AWAY WEIGHTS IN WEIGHT ROOM FELT A POP IN LOWER BACK				1,953.06	2.00	0.00	0.00	0.00	0.00	0.00	1,955.06
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				546.94	243.00	0.00	0.00	0.00	0.00	0.00	789.94
				1,953.06	2.00	0.00	0.00	0.00	0.00	0.00	1,955.06

Claim Number: 17WC02365B

17WC02365B	MAURO, DANIELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MILDRED B. MOSS E.S.	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORAL BIT ON HER RT FOREARM. SKIN NOT BROK				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: 17WC02366V





NEW CLAIMS

April 2017

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: 17WC02366V

17WC02366V	CARCHI, LUIS		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY OLD TAPPAN F	4/3/2017	4/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP TABLES, 1 OF THE HINGES STARTED CLOSING, TIRED TO CATCH				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: 17WC02368Y

17WC02368Y	SHIVERS, KRISTIN		11	286.96	243.00	0.00	0.00	0.00	0.00	0.00	529.96
WARREN DEVELOP. LEARNING CTI	4/5/2017	4/5/2017	4/28/2017	286.96	243.00	0.00	0.00	0.00	0.00	0.00	529.96
HELPING A CHILD WHEN SHE WAS STRUCK FROM BEHIND BY ANOTHER STUI				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				286.96	243.00	0.00	0.00	0.00	0.00	0.00	529.96
				286.96	243.00	0.00	0.00	0.00	0.00	0.00	529.96
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 17WC02369G

17WC02369G	LANTIGUA, EDUVIGIS		10	17,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	43,693.00
HUDSON SCHOOL	4/5/2017	4/5/2017	Open	284.87	1,193.00	0.00	0.00	0.00	0.00	0.00	1,477.87
PLAYING WITH HER ONE-ON-ONE SHE TRIPPED FEELING A POP IN HER LT FC				17,215.13	0.00	25,000.00	0.00	0.00	0.00	0.00	42,215.13
Total by Claim Number 1 Claim				17,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	43,693.00
				284.87	1,193.00	0.00	0.00	0.00	0.00	0.00	1,477.87
				17,215.13	0.00	25,000.00	0.00	0.00	0.00	0.00	42,215.13

Claim Number: 17WC02370Y





NEW CLAIMS

April 2017

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: 17WC02370Y

17WC02370Y	BARUTI, RACHEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GRABBING A BOX FROM TOP SHELF WHEN ANOTHER BOX FELL STRIKING 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: 17WC02372B

17WC02372B	MONTE, LAURA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON SCHOOL	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORAL THREW A CHAIR @ HER INJURING HER LT I				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: 17WC02373K

17WC02373K	MONTICOLLO, CHRISTOPHER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLONIA HIGH SCHOOL	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUNNING WITH STUDENTS DURING CLASS HE FELT A POP IN HIS LT LOWER I				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: 17WC02374W





NEW CLAIMS

April 2017

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: 17WC02374W

17WC02374W	SAVAGE-RENSHALL, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING MIDDLE SCH	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT ATTEMPTING TO HURT OTHERS PUSHED HER TO THE GROUND CA				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: 17WC02375K

17WC02375K	COFONE, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RYERSON E.S.	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CLMT BENT DOWN TO GET A PIECE OF PAPER OFF THE FLOOR STOOD UP AN				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: 17WC02376Z

17WC02376Z	BROCK, VANCE	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
MAINTENANCE DEPARTMENT	4/4/2017	4/5/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
WAS REMOVING A DOOR WHEN HE TRIPPED OVER BOXES AS HE WAS TRYIN				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	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00

Claim Number: 17WC02377K





NEW CLAIMS

April 2017

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: 17WC02377K

17WC02377K	GREGER, KATHLEEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUNNING AFTER A SPEC STUDENT THAT RAN OUT OF CLASSROOM WHEN SH				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: 17WC02378Y

17WC02378Y	MARTIN, GRACE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PRINCETON HS	4/4/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS PLUGGING IN A LAPTOP WHEN RT HAND WAS SHOCKED				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: 17WC02382K

17WC02382K	LALENA, JILL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARRISON TWP. ES	4/5/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING BACK WITH STUDENTS SHE TWISTED HER RT ANKLE BETWEEN GR				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: 17WC02383K





NEW CLAIMS

April 2017

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: 17WC02383K

17WC02383K	HADLEY, GAYLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #19 MENLO PARK TERR	4/5/2017	4/5/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ACCIDENTALLY STRUCK WITH A RUBBER BALL INJURING HER HEAD & NECK				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: 17WC02386K

17WC02386K	BERMUDEZ, NANCY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PAULINE PETWAY ES	4/5/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN SPILLED MILK CAUGHT HERSELF HOLDING ONTO TABLE INJURED				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: 17WC02387B

17WC02387B	STEADY, LIZABETH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE DURING PARKS TESTING PUSHED HEF				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: 17WC02388W





NEW CLAIMS

April 2017

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: 17WC02388W

17WC02388W	MUNOZ, EVELYN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVEL LC - NEW PROVIDENCE	4/6/2017	4/6/2017	Open	18.77	243.00	0.00	0.00	0.00	0.00	0.00	261.77
STUDENT SUDDENLY STRUCK THE LT SIDE OF HER HEAD USING FIST				2,481.23	2.00	0.00	0.00	0.00	0.00	0.00	2,483.23
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				18.77	243.00	0.00	0.00	0.00	0.00	0.00	261.77
				2,481.23	2.00	0.00	0.00	0.00	0.00	0.00	2,483.23

Claim Number: 17WC02390W

17WC02390W	NOGUEIRA, GINA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CONNECTICUT FARMS SCHOOL (L	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING CHILD TO OFFICE CHILD BIT L WRIST AND SCRATCHED R ARM/W				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: 17WC02391R

17WC02391R	CURCIO, THERESA	10		6,800.00	1,193.00	0.00	0.00	0.00	0.00	0.00	7,993.00
ACADAMY LEARNING CENTER	4/6/2017	4/6/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
STUDENT HAVING BEHAVIORAL ISSUE STRUCK R SIDE OF HEAD				6,800.00	0.00	0.00	0.00	0.00	0.00	0.00	6,800.00
Total by Claim Number 1 Claim				6,800.00	1,193.00	0.00	0.00	0.00	0.00	0.00	7,993.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
				6,800.00	0.00	0.00	0.00	0.00	0.00	0.00	6,800.00

Claim Number: 17WC02392V





NEW CLAIMS

April 2017

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: 17WC02392V

17WC02392V	KOHL-BOWLES, BARBRA	10		23,000.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	31,693.00
ESSEX REGIONAL ED SVC COM	4/5/2017	4/6/2017	Open	15.94	1,193.00	0.00	0.00	0.00	0.00	0.00	1,208.94
WAS ON PLAYGROUND STUDENT THREW A BASKETBALL WHICH STRUCK HEI				22,984.06	0.00	7,500.00	0.00	0.00	0.00	0.00	30,484.06
Total by Claim Number 1 Claim				23,000.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	31,693.00
				15.94	1,193.00	0.00	0.00	0.00	0.00	0.00	1,208.94
				22,984.06	0.00	7,500.00	0.00	0.00	0.00	0.00	30,484.06

Claim Number: 17WC02393Y

17WC02393Y	SHOSTAK, WALTER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PHILIP VROOM SCHOOL	4/4/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PAINGING CLASSROOM REPOSITIONED HIMSELF ON LADDER CAUSING HIM T				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: 17WC02394W

17WC02394W	PACUCCI, ANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTHWOOD ES	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT PUTTING ARMS UP AND DOWN FOR THERAPY WAS				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: 17WC02395Z





NEW CLAIMS

April 2017

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: 17WC02395Z

17WC02395Z	POLL, RONALD		10	25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
RARITAN HS	4/5/2017	4/6/2017	Open	2,015.35	1,193.00	0.00	0.00	0.00	0.00	0.00	3,208.35
DEMONSTRATING BASKETBALL MOVES DURING GYM CLASS HE PUSHED OFF				22,984.65	0.00	25,000.00	0.00	0.00	0.00	0.00	47,984.65
Total by Claim Number 1 Claim				25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
				2,015.35	1,193.00	0.00	0.00	0.00	0.00	0.00	3,208.35
				22,984.65	0.00	25,000.00	0.00	0.00	0.00	0.00	47,984.65

Claim Number: 17WC02396K

17WC02396K	HEIST, DONNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT IN TRANSPORT HOLD, STUDENT WRAPPED HIS LEG AROUND HER I				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: 17WC02397B

17WC02397B	CHRISTIE, MIJAH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARROLL ROBBINS	4/5/2017	4/6/2017	Open	406.57	243.00	0.00	0.00	0.00	0.00	0.00	649.57
WEARING BUNNY COSTUME TO TAKE PICTURES WITH STUDENT COSTUME M				2,093.43	2.00	0.00	0.00	0.00	0.00	0.00	2,095.43
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				406.57	243.00	0.00	0.00	0.00	0.00	0.00	649.57
				2,093.43	2.00	0.00	0.00	0.00	0.00	0.00	2,095.43

Claim Number: 17WC02398Y





NEW CLAIMS

April 2017

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: 17WC02398Y

17WC02398Y	SPEARS, JACQUELYN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS EXPOSED TO CARBON MONOXIDE				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: 17WC02399K

17WC02399K	ROGERS, SCOTT	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS EXPOSED TO CARBON MONOXIDE				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: 17WC02400B

17WC02400B	SCHMUS, PATRICIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS EXPOSED TO CARBON MONOXIDE				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: 17WC02401M





NEW CLAIMS

April 2017

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: 17WC02401M

17WC02401M	MONTESANO, JANET	10	32,500.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	68,693.00
FAIRMOUNT	4/5/2017	4/7/2017	Open	0.00	1,193.00	1,792.00	0.00	0.00	0.00	2,985.00
WAS EXITING THE CLASSROOM DURING FIREDRILL WHEN SHE STRUCK R KN			32,500.00	0.00	33,208.00	0.00	0.00	0.00	0.00	65,708.00
Total by Claim Number 1 Claim			32,500.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	68,693.00
			0.00	1,193.00	1,792.00	0.00	0.00	0.00	0.00	2,985.00
			32,500.00	0.00	33,208.00	0.00	0.00	0.00	0.00	65,708.00

Claim Number: 17WC02402W

17WC02402W	MECHLOWITZ, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORAL PUNCHED HER RT FOREARM CAUSING INJI			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: 17WC02403K

17WC02403K	FUHRMANN, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIBERTY SCHOOL	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT HAVING BEHAVIORAL ISSUE, STUDENT JUMPED OF			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: 17WC02404Y





NEW CLAIMS

April 2017

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: 17WC02404Y

17WC02404Y	LAPETINA, MARIE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADELPHIA ES	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE JUMPED, SHOOK, PUSHED, AND PULLE				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: 17WC02405B

17WC02405B	SAMPSON, JENNIFER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBURY HIGH SCHOOL	4/6/2017	4/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING UP THE STAIRS, SHE SLIPPED ON APPLE JUICE & FELL INJURING 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: 17WC02406K

17WC02406K	STRAUBE, CATHERINE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02407W





NEW CLAIMS

April 2017

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: 17WC02407W

17WC02407W	SCHLOSSBERG, RACHELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MORGAN E.S.	4/7/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SITTING DOWN WITH STUDENT, STUDENT GRABBED HER HEAD SHAKING IT E				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: 17WC02408K

17WC02408K	CROWLEY, OCTAVIUS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02409R

17WC02409R	THOMPSON, FREDERICK	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
ESSEX CAMPUS ACADEMY	4/6/2017	4/7/2017	Open	170.33	243.00	0.00	0.00	0.00	0.00	413.33
BREAKING UP STUDENT ALTERCATION, A STUDENT TOOK A FIRE EXTINGUISI				2,329.67	2.00	0.00	0.00	0.00	0.00	2,331.67
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				170.33	243.00	0.00	0.00	0.00	0.00	413.33
				2,329.67	2.00	0.00	0.00	0.00	0.00	2,331.67

Claim Number: 17WC02410K





NEW CLAIMS

April 2017

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: 17WC02410K

17WC02410K	SCHWARZ, MATTHEW	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02411K

17WC02411K	VILLARREAL, PATRICIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02413K

17WC02413K	BARR, DENISE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02414B



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02414B

17WC02414B	VETRANO, GAIL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANK J DUGAN E.S.	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE STRUCK HEAD WITH SOFT LUNCH BO				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: 17WC02415K

17WC02415K	MALLARDI, SUSAN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02416K

17WC02416K	HAGERTY, TIMOTHY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02418K





NEW CLAIMS

April 2017

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: 17WC02418K

17WC02418K	BUDMEN, JENNIFER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02419Y

17WC02419Y	ZAZZARINO, CHRISTINE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RARITAN VALLEY ES	4/7/2017	4/7/2017	Open	2,321.60	243.00	0.00	0.00	0.00	0.00	0.00	2,564.60
STUDENT HAVING A BEHAVIORAL KICKED HER IN THE LT LEG AND STRUCK H				178.40	2.00	0.00	0.00	0.00	0.00	0.00	180.40
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
				2,321.60	243.00	0.00	0.00	0.00	0.00	0.00	2,564.60
				178.40	2.00	0.00	0.00	0.00	0.00	0.00	180.40

Claim Number: 17WC02420K

17WC02420K	WILLIS, MONROE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02421K



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02421K

17WC02421K	MONTANA, LISA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02422R

17WC02422R	BROTHERS, JOAN		14	6,750.00	0.00	7,947.20	0.00	0.00	0.00	0.00	14,697.20
WAYNE HILLS H.S.	4/7/2017	4/7/2017	Open	76.03	0.00	993.40	0.00	0.00	0.00	0.00	1,069.43
BENT DOWN TO PICK UP HER PERSONAL BELONGINGS FELT SHARP PAIN IN I				6,673.97	0.00	6,953.80	0.00	0.00	0.00	0.00	13,627.77
Total by Claim Number 1 Claim				6,750.00	0.00	7,947.20	0.00	0.00	0.00	0.00	14,697.20
				76.03	0.00	993.40	0.00	0.00	0.00	0.00	1,069.43
				6,673.97	0.00	6,953.80	0.00	0.00	0.00	0.00	13,627.77

Claim Number: 17WC02423Z

17WC02423Z	TOMEI, TONI		10	5,000.00	1,193.00	0.00	0.00	0.00	0.00	0.00	6,193.00
BARCLAY EARLY CHILDHOOD CTR	4/7/2017	4/7/2017	Open	386.55	1,193.00	0.00	0.00	0.00	0.00	0.00	1,579.55
TRIPPED ON UNEVEN PAVEMENT AND FELL INJURED R ELBOW, FACE, NOSE,				4,613.45	0.00	0.00	0.00	0.00	0.00	0.00	4,613.45
Total by Claim Number 1 Claim				5,000.00	1,193.00	0.00	0.00	0.00	0.00	0.00	6,193.00
				386.55	1,193.00	0.00	0.00	0.00	0.00	0.00	1,579.55
				4,613.45	0.00	0.00	0.00	0.00	0.00	0.00	4,613.45

Claim Number: 17WC02424Y





NEW CLAIMS

April 2017

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: 17WC02424Y

17WC02424Y	ZYCBAND, RACHEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN OFFICE	4/5/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED AND FELL OVER CURB INJURED 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: 17WC02426K

17WC02426K	BATTEN, SHANNON		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02427B

17WC02427B	PEPE, MICHAEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #4 & 5 AVENEL ST SCHOC	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE JOGGING SLIPPED ON WET GRASS HE FELL INTO RETAINING WALL IN.				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: 17WC02428W





NEW CLAIMS

April 2017

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: 17WC02428W

17WC02428W	RIFF, RACHEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM J.MCGINN ES	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE KICKED HER IN BOTH LEGS, SCRATCH				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: 17WC02429W

17WC02429W	MARSH, RHUBY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING BOXES WHILE LOOKING FOR DOCUMENTS FELT PAIN IN NECK, UPPE				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: 17WC02430K

17WC02430K	DICKOL, JACQUELINE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02431K





NEW CLAIMS

April 2017

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: 17WC02431K

17WC02431K	KERSEY, DEBORAH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02432B

17WC02432B	MARCUS, JACK	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM J.MCGINN ES	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE SCRATCHED AND BIT L FOREARM, L W				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: 17WC02433K

17WC02433K	TWARDZIAK, KRISTI	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02434K





NEW CLAIMS

April 2017

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: 17WC02434K

17WC02434K	BELH, STEPHEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02435Y

17WC02435Y	BETANCES, WILLIAM	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROBERT N. WILENTZ ES.	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO CALM DOWN A CHILD HAVING BEHAVIORAL ISSUE, CHILD KICKED				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: 17WC02436W

17WC02436W	WOODEN, KELLY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAMBERTVILLE PUBLIC SCHOOL	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DROPPING STUDENT OFF ON BUS HAND WAS CAUGHT BETWEEN VAN DOOR				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: 17WC02437Y





NEW CLAIMS

April 2017

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: 17WC02437Y

17WC02437Y	PUFF, JEAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
APPLEBY SCHOOL	4/3/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING AWAY VOLLEYBALL NETS FOOT CAUGHT CAUSED HER TO FALL INJ				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: 17WC02438W

17WC02438W	ROMAN, PEDRO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROBERT N. WILENTZ ES.	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT L FOREARM				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: 17WC02440B

17WC02440B	FRAUMENI, COURTNEY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CRIM E S	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN BY A STUDENT ON HER INNER L 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: 17WC02441Y





NEW CLAIMS

April 2017

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: 17WC02441Y

17WC02441Y	SALAS, GLORIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING FAST TOWARDS HER OFFICE SHE SLIPPED AND FELL INJURED R 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	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: 17WC02442K

17WC02442K	MIDDLEBROOK, DANYEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02443K

17WC02443K	CARSON, SUZANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02444W





NEW CLAIMS

April 2017

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: 17WC02444W

17WC02444W	REIS, VITELIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/10/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WATERING PLANTS STEPPED ON TILE & FELL SHOES WERE WET INJURED R				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: 17WC02445K

17WC02445K	FISCELLA, DANIELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02446B

17WC02446B	FRANCISCOVIC, LORRAINE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GEORGE WASHINGTON SCHOOL	4/4/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER A STUDENTS LEG AND FELL INJURED L HIP, R 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: 17WC02447Y





NEW CLAIMS

April 2017

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: 17WC02447Y

17WC02447Y	VELEZ, SANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCGINNIS M.S.	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STEPS READING A STUDENTS REPORT MISSED A STEP AND				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: 17WC02448K

17WC02448K	WILLIS, VALERIE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO CARBON MONOXIDE RESPIRATORY ISSUE				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: 17WC02449Z

17WC02449Z	GERCKENS, ADAM	10		25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
WESTFIELD SENIOR HS	4/10/2017	4/11/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
COACHING TENNIS PRACTICE AND TORE HIS L ACHILLES				25,000.00	0.00	25,000.00	0.00	0.00	0.00	0.00	50,000.00
Total by Claim Number 1 Claim				25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
				25,000.00	0.00	25,000.00	0.00	0.00	0.00	0.00	50,000.00

Claim Number: 17WC02450W





NEW CLAIMS

April 2017

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: 17WC02450W

17WC02450W	BOGANSKI, KRISTOPHER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E.C.S.SCHOOL	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO DIFFUSE A VERBAL ALTERCATION BETWEEN TWO STUDENTS ON				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: 17WC02451Y

17WC02451Y	MACDADE, ROBIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GERALDINE FOSTER EARLY CHILD	4/7/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PASSED OUT IN CLASS, DURING FALL STRUCK HER HEAD, 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: 17WC02452R

17WC02452R	MARCOUX, ROBERT	14		1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
GARFIELD AUXILLARY MS-HS	4/3/2017	4/10/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS IN GYM HE THREW A FOOTBALL FELT PAIN IN R SHOULDER				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: 17WC02453B





NEW CLAIMS

April 2017

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: 17WC02453B

17WC02453B	MARIN, ANGELA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	4/10/2017	4/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE SCRATCHED HER LOWER 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: 17WC02454B

17WC02454B	DONAHUE, JAMES		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/11/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTING STUDENT WHEN STUDENT BIT R WRIST THROUGH BASEBAL				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: 17WC02455Y

17WC02455Y	PETRIZZO, ANTHONY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOWNSHIP HS	4/10/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING BETWEEN WINGS CARRYING BINDER AND FOLDERS, FOLDERS FEL				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: 17WC02456R





NEW CLAIMS

April 2017

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: 17WC02456R

17WC02456R	KURTIK, MADELEINE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HERBERT N RICHARDSON	4/6/2017	4/11/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MOVING SEVERAL BOXES LEFT IN FRONT OF FRIDGE, INJURED UPPER/LOWE				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	1.00
				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	1.00

Claim Number: 17WC02457B

17WC02457B	FALCONE, JUSTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PATERSON CHARTER SCHOOL OF	4/11/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
AFTER ADMINISTERED INSULIN INJECTION TO STUDENT RECAPPING NEEDLE				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: 17WC02458Z

17WC02458Z	DRISCOLL, MICHELLE	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
CLIFFSIDE PARK HIGH SCHOOL	4/11/2017	4/11/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
PAINTING INSIDE SCHOOL, SHE FELL INJURED R SHOULDER, R HIP				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	1,193.00	0.00	0.00	0.00	0.00	3,693.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	1,193.00
				2,500.00	0.00	0.00	0.00	0.00	0.00	2,500.00

Claim Number: 17WC02459W





NEW CLAIMS

April 2017

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: 17WC02459W

17WC02459W	ORSINO, NICHOLAS		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARY ETHEL COSTELLO	4/11/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT INJURED R 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: 17WC02460Y

17WC02460Y	HENCHEY, CARL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SUMMERFIELD SCHOOL INCLUDIN	4/10/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUNNING WITH STUDENTS ON FOOTBALL FIELD DURING RECESS FELT PAIN				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: 17WC02461W

17WC02461W	DAVIDSON, DONNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	4/11/2017	4/11/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT L FOREARM				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: 17WC02463Y





NEW CLAIMS

April 2017

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: 17WC02463Y

17WC02463Y	CARTER, ZACHARY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MILTON AVE ES	4/12/2017	4/12/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
IN GYM LIFTING A WOODEN BENCH TO MOVE FELT A PULL IN LOWER BACK				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: 17WC02464W

17WC02464W	OBRIEN, JAMES	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
DEANE-PORTER ES	4/11/2017	4/12/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIMMING HEDGES BY POND ACCIDENTALLY CUT HIS L UPPER LEG WITH TR				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: 17WC02465B

17WC02465B	DIAZ, MOISES	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS HILLS/KNOLLS REG BRD C	4/10/2017	4/12/2017	Open	39.99	243.00	0.00	0.00	0.00	0.00	282.99
WORKING ON TRAILOR REPLACING A PIECE INSIDE FILTER STRAINED R HANI				2,460.01	2.00	0.00	0.00	0.00	0.00	2,462.01
Total by Claim Number 1 Claim				2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
				39.99	243.00	0.00	0.00	0.00	0.00	282.99
				2,460.01	2.00	0.00	0.00	0.00	0.00	2,462.01

Claim Number: 17WC02466W





NEW CLAIMS

April 2017

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: 17WC02466W

17WC02466W	WILSON, JILL		11	2,500.00	245.00	551.35	0.00	0.00	0.00	0.00	3,296.35
TRANSPORTATION DEPT	4/11/2017	4/12/2017	Open	0.00	243.00	551.35	0.00	0.00	0.00	0.00	794.35
IN ROUTE DRIVING BUS, INVOLVED IN MVA INJ NECK, L SHOULDER, LOWER/U				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	551.35	0.00	0.00	0.00	0.00	3,296.35
				0.00	243.00	551.35	0.00	0.00	0.00	0.00	794.35
				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 17WC02467Y

17WC02467Y	SANDRUE, ERICA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HATCHERY HILL ES	4/12/2017	4/12/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DIRECTING STUDENT WHERE TO SIT IN CAFETERIA STUDENT BIT HER R 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: 17WC02469B

17WC02469B	TIPTON, KATHRYN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BEVERLY ES	4/12/2017	4/12/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLING DOWN PROJECTOR SCREEN THE CHAIN ON L SIDE OF SCREEN BRC				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: 17WC02471B





NEW CLAIMS

April 2017

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: 17WC02471B

17WC02471B	BLOUNT, AUDREY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GERALDINE FOSTER EARLY CHILD	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
IN REST ROOM, LIGHTS WERE OUT HIT HER HEAD ON SHELF				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: 17WC02472Y

17WC02472Y	BASU, KRISHNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/11/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING ON SWING SEAT WHEN STUDENT SAT ON HER LAP SHE FELL BACKW				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: 17WC02473W

17WC02473W	ENOS, VIOLET		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO DUMPSTER TWISTED HER R ANKLE ON UNEVEN PAVEMENT				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: 17WC02474B





NEW CLAIMS

April 2017

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: 17WC02474B

17WC02474B	JOHNSON, CORA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING TO ANOTHER BUS, LOST FOOTING AND FELL FACE FORWARD				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: 17WC02475Y

17WC02475Y	FANFARILLO, DEBBIE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
DOROTHY L BULLOCK SCHOOL	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE STRUCK HER IN R EYE WITH LUNCHBC				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: 17WC02476W

17WC02476W	HEUSCHEL, TARA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 4 ANNEX	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING PAPER SHE ACCIDENTALLY CUT HER R MIDDLE 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: 17WC02477B





NEW CLAIMS

April 2017

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: 17WC02477B

17WC02477B	FASOLO, FRANK		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALKKILL VALLEY REG HS	4/5/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO HIS VEHICLE, ROLLED R ANKLE ON UNEVEN CURB				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: 17WC02478W

17WC02478W	GIVENS, GAYLE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WAS RUNNING AND RAN INTO HER PUSING HER INTO LOCKER 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: 17WC02479B

17WC02479B	ENGMAN, DONNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/13/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD FLOPPED TO FLOOR AND TO AVOID FALLING ON CHILD STEPPED TO T				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: 17WC02480W





NEW CLAIMS

April 2017

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: 17WC02480W

17WC02480W	ROMAN, DANIEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INDIAN AVENUE E.S.	4/13/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING COMPUTER TOWERS ON TO SHELVES FELT STRAIN IN 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: 17WC02481Y

17WC02481Y	BARNHILL, BETH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HALEDON PUBLIC SCHOOL	4/12/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE PUNCHED HER IN R 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: 17WC02482Y

17WC02482Y	DEARMAS, VIVIAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EMERSON MS	4/10/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON UNEVEN PAVEMENT, FALLING INJURING HER RT HAND & BOTH H				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: 17WC02485W





NEW CLAIMS

April 2017

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: 17WC02485W

17WC02485W	HERNANDEZ, HEATHER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
IGNACIO CRUZ EARLY CHILDHOOD	4/7/2017	4/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PUSHED HER INTO WOODEN SHELF WHERE SHE HIT HER RT LOWE				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: 17WC02486Y

17WC02486Y	SKEWES, VERONICA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS HILLS/KNOLLS REG BRD C	4/13/2017	4/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
VEHICLE REAR-ENDED SCHOOL BUS CAUSING STRAIN TO HER BACK, NECK,				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: 17WC02487W

17WC02487W	PITTS, URSULA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NATHAN HALE E.S.	4/13/2017	4/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TEACHER ACCIDENTALLY OPENED DOOR HARD HITTING HER IN THE RT WRIS				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: 17WC02488Y





NEW CLAIMS

April 2017

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: 17WC02488Y

17WC02488Y	PURFIELD, SHERI	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SUMMERFIELD SCHOOL INCLUDIN	4/12/2017	4/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIED TO TURN AROUND BUT LOST HER BALANCE FALLING ONTO A SMALL V				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: 17WC02489Y

17WC02489Y	O'DELL, MELISSA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
EARLY CHILDHOOD PROGRAM	4/12/2017	4/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER GARBAGE CAN GETTING UP FROM HER DESK INJURED L ANK				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: 17WC02490W

17WC02490W	PROCOPIO, JOHN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11	4/12/2017	4/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
MOVING FISH TANKS IN CLASSROOM FELT PAIN IN LOWER BACK				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: 17WC02491T



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02491T

17WC02491T	PARIS, DANIEL		14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
MT. PLEASANT MS	4/13/2017	4/17/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CARRYING PLYWOOD TO CUT TO SIZE IN DUMPSTER AREA FELT PAIN IN R UI				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: 17WC02492K

17WC02492K	MAHER, MARGARET		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	4/7/2017	4/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CAR PARKED BY PUDDLE TO AVOID STEPPING IN WATER STEPPED ON CURB				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: 17WC02493B

17WC02493B	EVERETT, JOSHUA		11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SMALLEY E.S.	4/17/2017	4/17/2017	4/28/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELT A PINCH ON R FOREARM BRUSHED THE AREA WITH HIS OTHER HAND, I				0.00	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: 17WC02494K





NEW CLAIMS

April 2017

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: 17WC02494K

17WC02494K	KATAT, YOUSEF		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE TWP BOE	4/18/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING HEAVY TABLE TOPS TO DUMPSTER THEY SLID HITTING HIS 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: 17WC02495R

17WC02495R	JONES, MARY		14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HACKENSACK MS	4/18/2017	4/18/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS STEPPING OUT OF HER CAR WHEN SHE FELT PAIN IN R KNEE				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: 17WC02496Y

17WC02496Y	DOUGLASS, DAVID		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING STUDENT HAVING BEHAVIORAL ISSUE INJURED R 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: 17WC02497W





NEW CLAIMS

April 2017

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: 17WC02497W

17WC02497W	SPAHR, DARLENE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE HEAD BUTTED HER L SHOULDER MUL				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: 17WC02498K

17WC02498K	QUINLAN, FREDERICK	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODLAND ES	4/12/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STOCKING THE MILK FRIDGE, THE FRONT PANEL OF FRIDGE FELL HITTING 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: 17WC02499B

17WC02499B	TRESHOCK, LAUREN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYVILLE ES	4/18/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT GAVE HER A HUG AND ACCIDENTALLY HEAD BUTTED HER IN CHIN				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: 17WC02500K





NEW CLAIMS

April 2017

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: 17WC02500K

17WC02500K	SEAMAN, DANIEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	4/18/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP FIGHT BETWEEN STUDENTS ONE STUDENT JUMPED ON HIS B/				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: 17WC02501Y

17WC02501Y	LASOCHA, MONIKA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERGEN ARTS & SCIENCE CHARTER	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING AROUND HER CLASSROOM FELT A STRAIN IN 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: 17WC02502W

17WC02502W	KAUR, BALJIT		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTER FOR LIFE LONG LEARNING	4/18/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS CHANGING STUDENTS DIAPER FELT PAIN IN HER 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: 17WC02504G





NEW CLAIMS

April 2017

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: 17WC02504G

17WC02504G	BAHRLE, PATRICIA		14	1.00	0.00	0.00	0.00	0.00	0.00	1.00
FORKED RIVER E.S.	4/18/2017	4/18/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TYPING THROUGHOUT THE DAY DEVELOPED PAIN IN L THUMB, POINTER FIN				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	1.00
				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	1.00

Claim Number: 17WC02505R

17WC02505R	NICOSIA, ANTHONY		10	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
DRIVING BUS WAS STRUCK HEAD ON BY OV, INJ NECK, MID TO LOW BACK, A				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: 17WC02506Y

17WC02506Y	HENDRICKS, MICHELINA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE HILLS H.S.	4/6/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PARTICIPATING IN VOLLEYBALL GAME WITH STUDENT, BALL STRUCK R MID 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: 17WC02507K



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02507K

17WC02507K	WILSON, LEONARD		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SCHOOL BUS WITH STUDENTS AND TEACHER INVOLVED IN MVA, INJURED NE				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: 17WC02508W

17WC02508W	RIOS, MEGAN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH WEST HS	4/17/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS TRIPPED ON FIRST STEP SHE FELL INJURED HEAD, 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: 17WC02509R

17WC02509R	GIRAU, BRIAN		14	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLESEX CO. VO-TECH	4/18/2017	4/18/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN A SPILL HEARD A POP IN R KNEE, DID NOT FALL				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: 17WC02510W





NEW CLAIMS

April 2017

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: 17WC02510W

17WC02510W	FREY, BRIAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	4/18/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE BIT HIS 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: 17WC02511B

17WC02511B	COLEMAN, MARY BETH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCE MS	4/18/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE PUSHING DOWN ON HANDLE OF LIBRARY DOOR FELT PAIN IN 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: 17WC02512A

17WC02512A	TAYLOR-WYSIEKIERSKI, SANDR	14		1.00	0.00	0.00	0.00	0.00	0.00	1.00
GREENBROOK E S	4/18/2017	4/19/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BURNING IN EYES, JITTERY, HEAD FOGGY AND CHEST PAIN DUE TO STRONG				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	1.00
				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	1.00

Claim Number: 17WC02513Y



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02513Y

17WC02513Y	DIGIACOPO, RONALD	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BOONTON HS	4/17/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SETTING UP TEMP FENCE ON BASEBALL FIELD HE TURNED FELT PAIN IN L H/				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: 17WC02514W

17WC02514W	PRATZ, THOMAS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL M S	4/18/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOING UP STAIRS CARRYING HOT TEA, MISSED A STEP AND FELL INJURED R				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: 17WC02515K

17WC02515K	MACCANICO, GAVINO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCOTCH PLAINS-FANWOOD HS	4/18/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
USING A POWER SAW CUT L INDEX AND L MIDDLE 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: 17WC02516B





NEW CLAIMS

April 2017

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: 17WC02516B

17WC02516B	DISANZO, KERRI	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MILLSTONE TWP MS	4/19/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON SLIMY SUBSTANCE AND FELL INJURED R SHOULDER, L SHOULD				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: 17WC02517W

17WC02517W	SARAO, MARYANNA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/19/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT BIT L LOWER ARM WHILE BEING SUPERVISED				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: 17WC02519B

17WC02519B	BARTRAM, NANCY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTER FOR LIFE LONG LEARNIN	4/19/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK ON L SIDE OF HER FACE BY A STUDENT				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: 17WC02520Y





NEW CLAIMS

April 2017

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: 17WC02520Y

17WC02520Y	TONNISEN, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	4/18/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVING BEHAVIORAL ISSUE STUDENT KICKED HER I			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: 17WC02521M

17WC02521M	CHIARIELLO, CYNTHIA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
MORRISTOWN H.S.	4/17/2017	4/19/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FEELING HOT IN FACE, ALSO ITCHY DOWN TO NECK, BACK OF LEGS AND ELE			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: 17WC02522Y

17WC02522Y	KALUCKI, MARYJO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP H.S.	4/7/2017	4/19/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PLAYING WITH STUDENT IN GYM TURNED TO RUN, COLLIDED WITH ANOTHEF			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: 17WC02523Y





NEW CLAIMS

April 2017

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: 17WC02523Y

17WC02523Y	GITTINGS, LINDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMONTON MS	4/20/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON A PIECE OF WRAPPED CHEWING GUM AND FELL INJURED L FOO				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: 17WC02524K

17WC02524K	CARUSO, BRENDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	4/19/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXITING BUS, FELL BACKWARDS ONTO R SIDE INJURED R HAND, L PALM, R K				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: 17WC02526W

17WC02526W	BLACK, FRANKLIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADULT REGIONAL HS	4/19/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER HOSE AND FELL INJURED L SHOULDER, L TRUNK AREA, R HAI				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: 17WC02527B





NEW CLAIMS

April 2017

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: 17WC02527B

17WC02527B	HERRERA, MARYANN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH JUNCTION E S	4/19/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT OPENED DOOR WIDE IT ACCIDENTALLY STRUCK HER R FOOT, R KI				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: 17WC02528Y

17WC02528Y	AYZANOVA, JENNY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	4/18/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT RUNNING BUMPED INTO HER WITH BACKPACK CAUSED HER TO WI				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: 17WC02529W

17WC02529W	GERWALD, WERNER	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
GROUNDS OFFICE	4/20/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
THROWING WOODEN PALETTE OVER GARBAGE CONTAINER INJURED L SHOI				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: 17WC02531Y





NEW CLAIMS

April 2017

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: 17WC02531Y

17WC02531Y	PANE, CATERINA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE MS	4/20/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER RAISED SIDEWALK AND FELL INJURED BOTH KNEES, BOTH H/				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: 17WC02532K

17WC02532K	FRIEDMAN, DONNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEHOLD LEARNING CENTER ES	4/19/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LOST HER FOOTING WHEN STANDING UP FROM DESK SHE FELL INJURED L K				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: 17WC02533V

17WC02533V	KNAPP, KAREN		10	12,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	18,693.00
CEDAR CREEK E.S.	4/20/2017	4/20/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
GOING AFTER STUDENT THAT WAS RUNNING AWAY L HIP GAVE OUT SHE TW				12,500.00	0.00	5,000.00	0.00	0.00	0.00	0.00	17,500.00
Total by Claim Number 1 Claim				12,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	18,693.00
				0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
				12,500.00	0.00	5,000.00	0.00	0.00	0.00	0.00	17,500.00

Claim Number: 17WC02534Y





NEW CLAIMS

April 2017

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: 17WC02534Y

17WC02534Y	PURCELL, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	4/17/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS ON BUS INVOLVED IN MVA INJ R SHOULDER, R UPPER ARM, R 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: 17WC02535B

17WC02535B	WEINER, WENDY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURNET HILL ES	4/17/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO STAND ON CHAIR LOST BALANCE AND FELL INJURED R ELB			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: 17WC02536K

17WC02536K	MEYERS, JUSTIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROSA INTERNATIONAL MS	4/20/2017	4/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SEPERATING TWO STUDENTS WHEN ONE STUDENT FLUNG HIS ARM BACK S			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: 17WC02537B





NEW CLAIMS

April 2017

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: 17WC02537B

17WC02537B	PICCOLO, PHILIP		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
APPLEGARTH MS	4/21/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING FURNITURE TOGETHER USING SCREW GUN, SCREW CAME OUT GU				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: 17WC02538W

17WC02538W	KING, GEORGE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMILTON WEST WATSON H.S.	4/17/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MISSED A STEP AND FELL WALKING UP STAIRS INJURED L SHOULDER, L RIB,				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: 17WC02539B

17WC02539B	HOPKINS, BETH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADAMSVILLE E S	4/21/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING ON CHAIR TO OPEN WINDOW CHAIR SLID SHE SCRAPED HER R FC				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: 17WC02540B





NEW CLAIMS

April 2017

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: 17WC02540B

17WC02540B	PENA, CONRADO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	4/18/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SCRUBBING DOWN WALLS FELT A PULL 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: 17WC02541Z

17WC02541Z	FERNANDEZ, NEICY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING CTI	4/20/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SQUATTING DOWN HELPING STUDENT CHANGE IN RESTROOM FELT 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: 17WC02542Y

17WC02542Y	CZIMCHARO, JOSEPH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFWOOD AVENUE ES	4/10/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKING FROM PLAYGROUND STEPPED IN HOLE ROLLED 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: 17WC02543Y



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02543Y

17WC02543Y	LAMBUSTA, MEAGAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	4/21/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING STUDENT IN TIME OUT STUDENT KICKED DOOR SLAMMING ON L MII				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: 17WC02544B

17WC02544B	BROWN, WARREN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RUMS-FAIR HAVEN REG. HIGH SCH	4/20/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUSHING CART THROUGH DOOR WAY L MIDDLE FINGER BECAME CAUGHT IN				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: 17WC02545W

17WC02545W	BRUNO, KATLYN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MANCHESTER TWP. ES	4/21/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUT HER L INDEX FINGER WHILE CUTTING BAGELS				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: 17WC02546B





NEW CLAIMS

April 2017

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: 17WC02546B

17WC02546B	WILWOHL, KARI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KINGSTON ES	4/20/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED AND FELL ON L SIDE HER, SHOULDER, HIP, KNEE CUSTODIAN JUST			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: 17WC02547Y

17WC02547Y	CARUSO, CABRINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAYMOND E VOORHEES ES	4/20/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WAS HIT IN MOUTH BY A FRISBEE			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: 17WC02548Y

17WC02548Y	ZELEZNOK, RUSSELL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOMS RIVER CENTER	4/20/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WASHING COFFEE MUGS, 1 BROKE CUTTING HIS RT PINKY 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: 17WC02549K





NEW CLAIMS

April 2017

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: 17WC02549K

17WC02549K	JOHNSON-KANE, YVONNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CUMBERLAND CAMPUS	4/21/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUNNING AFTER STUDENT WHO RAN OUT OF CLASSROOM STRAINED 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: 17WC02550W

17WC02550W	WITTER, ANTHONY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP H.S.	4/11/2017	4/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DEMONSTRATING A DRILL HE ATTEMPTED TO JUMP OVER A HURDLE INJURIE				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: 17WC02551B

17WC02551B	BLOM, KRISTEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARION P THOMAS CHARTER SCH	4/21/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING ON CHAIR HANGING PAPERS CAME DOWN FROM CHAIR ROLLED 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: 17WC02552W





NEW CLAIMS

April 2017

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: 17WC02552W

17WC02552W	GOSCINSKI, MICHAEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN TWP. BOE	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND TWISTED 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: 17WC02553K

17WC02553K	SMALL, DEVERE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOJOURN HS	4/20/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD VERBALLY ABUSED HIM TOOK PENS AND PULLED COMPUTER OFF DE				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: 17WC02554B

17WC02554B	LEUNG, ANGELA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREENBROOK E S	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS STRUCK IN THE LT EYE WITH A BLOCK THAT A SPEC ED STUDENT				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: 17WC02555Y





NEW CLAIMS

April 2017

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: 17WC02555Y

17WC02555Y	HERNANDEZ, ANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC ARTS & SCIENCES CHAR	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WHILE TEACHING HER CLASS WENT TO SIT DOWN A SPEC ED STUDENT PULI				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: 17WC02556W

17WC02556W	LEONE, PAMELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE HS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
A FORMER STUDENT RAN AND JUMPED ON HER CAUSED HER TO TWIST HER				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: 17WC02557Y

17WC02557Y	MUNN, HEIDI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COPELAND MS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING PAPERS IN COPY ROOM ACCIDENTALLY CUT R INDEX FINGER ON P				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: 17WC02559B





NEW CLAIMS

April 2017

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: 17WC02559B

17WC02559B	CROWE, EVELYN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN SOUTH HS	4/24/2017	4/24/2017	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: 17WC02560W

17WC02560W	JIMENEZ, ISMAEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LAKESIDE MS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO BREAK UP FIGHT HE FELL WITH THE STUDENTS TRIED TO 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: 17WC02561W

17WC02561W	LOFTON, KENNETH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE HS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
REARRANGING TABLES FELT A POP IN LOWER BACK				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: 17WC02562B





NEW CLAIMS

April 2017

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: 17WC02562B

17WC02562B	GIBB, MAEGEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORAL FLIPPED A DESK OVER LANDING ON HER R				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: 17WC02563K

17WC02563K	SCHWARTZ, MICHELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
JOHN F. KENNEDY E.S.	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PUTTING PAPAERS IN BOXES ON SHELF BELOW A CABINET STRUCK HER 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: 17WC02564Y

17WC02564Y	HARNETT, MARYANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE MS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
GOING DOWN STAIRS LOST HER BALANCE AND FELL INJURED NECK, HEAD, 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: 17WC02565W





NEW CLAIMS

April 2017

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: 17WC02565W

17WC02565W	STONE, ROCHELLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
PARKVIEW SCHOOL	4/13/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON YOGURT AND FELL INJURED L ANKLE, 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: 17WC02567K

17WC02567K	MEEHAN, SANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION OFFICE	4/19/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STEPPING OFF BUS STEPPED DOWN TWISTING HER BODY INJ L HIP, L UPPEF				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: 17WC02568Y

17WC02568Y	HENDERSON, NICOLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #1 E.S.	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE JUMPED FROM DESK TO BOOKSHELF				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: 17WC02569W





NEW CLAIMS

April 2017

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: 17WC02569W

17WC02569W	BET, BRYAN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOMERSET SECONDARY ACADEM	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO BREAK UP 2 STUDENT'S FIGHTING HE WAS EXPOSED TO ST				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: 17WC02570B

17WC02570B	RAY, CHERYL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT CHOKED HER FROM BEHIND SCRATCHING CHEST AND BACK OF NI				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: 17WC02571B

17WC02571B	DEITRICK, MICHAEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL MS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REACHING FOR A BOX ON SHELF ACCIDENTALLY STRUCK HIS R FOREARM O				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: 17WC02572W





NEW CLAIMS

April 2017

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: 17WC02572W

17WC02572W	YOBS, TIMOTHY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN E.S.	4/21/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SCRAPING OFF OLD WAX FROM SCRAPPER CUT HIS L 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: 17WC02573K

17WC02573K	GRAY, ROBYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	4/24/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT OFF COURT TO SAVE VOLLEYBALL ACCIDENTALLY RAN INTO HER I			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: 17WC02574Y

17WC02574Y	VAIMAN, RONNIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	4/21/2017	4/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
WALKED UP BLEACHERS WITH A BAG ON ONE ARM LOST BALANCE AND FELL			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: 17WC02576W





NEW CLAIMS

April 2017

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: 17WC02576W

17WC02576W	SCHILLING, CANDACE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVEL LC - NEW PROVIDENCE	4/24/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BRHAVIORAL ISSUE HEAD BUTTED HER ON L HAND/THUME				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: 17WC02577Y

17WC02577Y	DRISKILL, CHRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	4/25/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
PREPARING FOR AN ART PROJECT CAUGHT AND SLICED R MIDDLE FINGER 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	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: 17WC02579K

17WC02579K	WRIGHT, VICKI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAKWOOD AVENUE SCHOOL	4/14/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON UNEVEN SIDEWALK AND FELL INJURED R SHOULDER, 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	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: 17WC02580B





NEW CLAIMS

April 2017

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: 17WC02580B

17WC02580B	LABARBARA, ALEXANDRA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LAURA DONOVAN E.S.	4/24/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL ISSUE KICKED HER IN BOTH SHINS, SCRATCH				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: 17WC02581Y

17WC02581Y	CLAY, ALLISON	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
HAMMARSKJOLD M.S.	4/21/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
COORDINATING A FIELD TRIP TO YMCA CAMPS NOTICED A TICK BITE ON L LC				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: 17WC02582K

17WC02582K	DAILY, JASON	11		2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SENIOR HS	4/11/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
COACHING STUDENTS BEHIND 3RD BASE WAS HIT IN R EYE, FOREHEAD WITI				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: 17WC02583W





NEW CLAIMS

April 2017

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: 17WC02583W

17WC02583W	HISTING, ERNEST	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN CO. VOC-TECH V.S. (GLO.	4/24/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WALKING OPPOSITE DIRECTION BRUSHED PASS HIM AT FULL FOR				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: 17WC02584R

17WC02584R	NUEL, WENDY	14		1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
EMILY C. REYNOLDS M.S.	4/24/2017	4/25/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RETURNING FROM LUNCH BREAK SHOE BROKE CAUSING HER TO FALL INJUF				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: 17WC02585B

17WC02585B	HOUSTON, VAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY COUNTY BRD OF VOC E	4/24/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNAWARE KEY RING HAD TWO BROKEN KEYS WHEN SHE HOOKED THEM TO				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: 17WC02586W





NEW CLAIMS

April 2017

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: 17WC02586W

17WC02586W	SULESKI, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E BRUNSWICK H. S.	4/25/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN WATER AND FELL INJURED LOWER BACK, R UPPER THIGH, BUTT			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: 17WC02587Y

17WC02587Y	GARCIA-PEREZ, VASTY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COUNTY PREP HS	4/24/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CUTTING A LOAF OF BREAD SHE BECAME DISTRACTED AND ACCIDENTALLY I			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: 17WC02588W

17WC02588W	JAWORSKI, ALICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS PLAINS SCHOOL DIST	4/25/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	243.00
CHILD PUSHED A ROLLING CHAIR IN WALK AREA TRIPPED OVER CHAIR AND I			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: 17WC02589B



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02589B

17WC02589B	DOYLE, NORMA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAKTREE ES	4/25/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON CARPET TWISTED L KNEE, DID NOT FALL				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: 17WC02591Y

17WC02591Y	TREEN, GEORGEANNA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAURICE RIVER TWP. ELEMENTAR	4/13/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO GET ON BUS SHE TRIPPED OVER STEP SHE FELL BACKWAR				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: 17WC02592B

17WC02592B	DAVIDSON, ALEXIS		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER HIGH SCHOOL	4/25/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING GYM CLASS WAS ACCIDENTALLY STRUCK BY A BASKETBALL IN HEA				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: 17WC02593B





NEW CLAIMS

April 2017

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: 17WC02593B

17WC02593B	NAPOLITANO, TARA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PEOPLE'S PREP CHARTER	4/19/2017	4/25/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO DIFFUSE AN ARGUMENT BETWEEN TWO STUDENTS, A STU				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: 17WC02595J

17WC02595J	LINDIA, TRACY	14		8,001.00	0.00	0.00	0.00	0.00	0.00	0.00	8,001.00
MAYS LANDING CAMPUS	4/14/2017	4/25/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING AND MOVING FURNITURE BECAME LIGHT HEADED AND PASSED OUT				8,001.00	0.00	0.00	0.00	0.00	0.00	0.00	8,001.00
Total by Claim Number 1 Claim				8,001.00	0.00	0.00	0.00	0.00	0.00	0.00	8,001.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				8,001.00	0.00	0.00	0.00	0.00	0.00	0.00	8,001.00

Claim Number: 17WC02596K

17WC02596K	BADGLEY, GEORGE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	4/10/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CUT HIS RT THUMB ON PIPE				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: 17WC02597B



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02597B

17WC02597B	COLEMAN, RONALD		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH WEST HS	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE WEED WHACKING THE GRASS, GRASS FLEW INTO HIS R EYE				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: 17WC02599K

17WC02599K	WAGNER, JENNIFER		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
BIRCHWOOD ES	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRUGGLING WITH STUDENT WHILE TAKING TO PRINCIPALS OFFICE INJUREI				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: 17WC02601W

17WC02601W	CHEESEMAN, DEBORAH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS TURNING AROUND WHEN SHE STEPPED ON THE LEG OF A ROLLIN				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: 17WC02602Y





NEW CLAIMS

April 2017

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: 17WC02602Y

17WC02602Y	SCHLESINGER, JUDITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
M SCOTT CARPENTER ES	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IN STORAGE ROOM WHEN A BULLETIN BOARD PAPER DISPENSER FELL ON 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: 17WC02603B

17WC02603B	MASSA, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EUGENE WILLEY SCHOOL	4/21/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLEANING OUT BUSHES WAS PRICKED BY A THORN INJURED L RING FINGER				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: 17WC02604Y

17WC02604Y	STEWART, LOUISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BEDMINSTER TWP E.S.	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UPSET SPEC ED STUDENT GOING AFTER ANOTHER STUDENT TRYING TO ST				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: 17WC02605W





NEW CLAIMS

April 2017

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: 17WC02605W

17WC02605W	BLUSTEIN, LYNN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOLMDEL H.S.	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS IN CLASSROOM TRIPPED OVER CORDS FELL ON LT KNEE ALSO IN				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: 17WC02606Y

17WC02606Y	HAWKINS, SHAMIRA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOUNDATION ACADEMY CHAR SCH	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE STANDING ON A CHAIR TAPING WORDS TO THE WALL IN CLASSROOM				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: 17WC02607K

17WC02607K	MCKEE, NANCY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN E.S.	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ASSISTING STUDENT WITH CUTTING PAPER, STUDENT ACCIDENTALLY CUT F				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: 17WC02608K





NEW CLAIMS

April 2017

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: 17WC02608K

17WC02608K	WESNER, MARLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCE INTERMEDIATE SCHO	4/25/2017	4/25/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BASKETBALL COMING TOWARDS HER HEAD, SHE BLOCKED THE BALL INJURE				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: 17WC02609B

17WC02609B	JOHNSTON, ANGELICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BUCKSHUTEM ROAD E.S.	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIORAL BIT ON HER LT LOWER ARM, BREAKING THI				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: 17WC02610B

17WC02610B	HIGHLEY, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
J. HARVEY RODGERS E.S.	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING WITH STUDENTS AT RECESS HIT HER CHIN ON ANOTHER EMPLOYE				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: 17WC02611B





NEW CLAIMS

April 2017

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: 17WC02611B

17WC02611B	ROZNER, LINDA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBIDGE VOCATIONAL	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REMOVING A PAIRING KNIFE GUARD THE GUARD SLIPPED AND CUT HIS R TH				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: 17WC02612B

17WC02612B	HERNANDEZ, DOMINGO		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCE HS	4/25/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS REMOVING A BOX BLADE OUT OF SLEEVE TO PLACE IN BOX CUTT				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: 17WC02613W

17WC02613W	HOPKINS, MARY JANE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #4 ES	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHEN COMING DOWN STAIRS CLMT MISSED LAST FEW STEPS CAUSED HER				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: 17WC02614Y





NEW CLAIMS

April 2017

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: 17WC02614Y

17WC02614Y	CHATMA, MELINDA		11	2,500.00	0.00	0.00	0.00	0.00	0.00	2,500.00
DEPT OF TRANSPORTATION	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DRIVING TO BUS YARD, SEAT GAVE OUT & DROPPED, INJURED HER LOWER E				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	2,500.00
				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	2,500.00

Claim Number: 17WC02615Y

17WC02615Y	MCGINLEY, ISABEL		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
WEBSTER SCHOOL	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS WALKING IN THE HALLWAY WHEN SHE SLIPPED AND FELL ON WET FLOO				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: 17WC02616K

17WC02616K	GAYO, BETH		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
THEUNIS DEY E.S.	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN THE CLASSROOM FEEDING A SPEC ED STUDENT THE CHILD BIT LO'				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: 17WC02617W





NEW CLAIMS

April 2017

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: 17WC02617W

17WC02617W	ENRIQUE, ROLANDO	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAREER DEVELOPMENT CTR	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE USING A VAC MACHINE TO PICK UP WATER SLIPPED DIDN'T FALL FELT				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: 17WC02618W

17WC02618W	CHANEY, SCOTT	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAINTENANCE DEPT	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE WALKING IN THE MAINTENANCE GARAGE TRIPPED OVER A HOSE CAU				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: 17WC02619W

17WC02619W	PISTOIA, VERONICA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARION P THOMAS CHARTER SCH	4/24/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN CLASSROOM IN A CHAIR THE CHAIR BROKE FELL ON RT ARM INJ R1				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: 17WC02620K





NEW CLAIMS

April 2017

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: 17WC02620K

17WC02620K	SEVERANCE, SHERYL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PRINCETON HS	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE PLAYING TENNIS IN HER CLASS LOST BALANCE FELL INJ LT WRIST				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: 17WC02621Y

17WC02621Y	WEYRICK, KRISTIN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCGINNIS M.S.	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS DISPOSING A MOUSE IN A TRAP THE MOUSE BIT LT POINTER FINC				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: 17WC02622W

17WC02622W	CONCEPCION-MCGRATH, SABRI	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIORAL SQUEEZED HER HANDS, FEELS NUMBNESS				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: 17WC02623K





NEW CLAIMS

April 2017

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: 17WC02623K

17WC02623K	LYNCH, CHRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
M SCOTT CARPENTER ES	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TALKING TO PRINCIPAL WHEN SHE FELL OFF SIDEWALK CURB & ROLLED RT				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: 17WC02624K

17WC02624K	ENGLISH, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH CO. CAREER CENTER	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED ON UNEVEN GROUND & FELL INJURING LT ANKLE & RT WRIST				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: 17WC02626B

17WC02626B	ALBRECHT, CHARLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONROE TWP TRAILER MS	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING PAST A BULLETIN BOARD, THE STAND LEDGE CUT HER RT UPPER I				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: 17WC02627W





NEW CLAIMS

April 2017

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: 17WC02627W

17WC02627W	MORRIS, MONICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRENTON CENTRAL HS MAIN CAMI	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTED A BOX IN CLASSROOM THE BOX FELL INJ LT HAND AND STRUCK LT IN			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: 17WC02628W

17WC02628W	BILGER, CRYSTAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT HAVING A BEHAVIORAL OUTBURST SCRATCHED CLMT'S F			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: 17WC02629K

17WC02629K	MARTINEZ, ASHLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LEAP ACADEMY CHARTER SCHOOL	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MAINTENANCE WAS WORKING ON THE ROOF CLMT INHALED A STRONG CHE			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: 17WC02630W





NEW CLAIMS

April 2017

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: 17WC02630W

17WC02630W	SZMYHOL, FELICIA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JAMES GARFIELD EARLY CHILDHO	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ESCORTING A BEHAVIORAL STUDENT SHE INJURED HER LT THUMB & FOREA				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: 17WC02631K

17WC02631K	KELLY, MARTHA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK REGIONAL HS	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS PUTTING TOGETHER A METAL RACK CUT RT POINTER FINGER				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: 17WC02632B

17WC02632B	LEMPA, NICOLE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRIEBLING SCHOOL	4/24/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT WAS KICKING AND PUNCHING CLMT INJ RT THUMB				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: 17WC02633W





NEW CLAIMS

April 2017

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: 17WC02633W

17WC02633W	JAMES, BRIDGET	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEPTUNE HIGH SCHOOL	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WENT TO PLACE A BOX OF ENVELOPES ON SHELF WHEN SHE TOOK A STEP I				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: 17WC02634B

17WC02634B	SOBIN, RYAN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MADISON PARK ES	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT HAVING A BEHAVIORAL OUTBURST SCRATCHED CLMT'S I				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: 17WC02635Y

17WC02635Y	PIOMBO, LAUREN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY HEIGHTS CHARTER S	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT EXCITEDLY JUMPING UP & DOWN LANDED ON HER LT FOOT				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: 17WC02636Y



The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at ivers@summitrisk.com



NEW CLAIMS

April 2017

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: 17WC02636Y

17WC02636Y	REED, NICHOLAS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POND ROAD MIDDLE SCHOOL	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
JUMPING 25 FT AT THE TOP OF FREE FALL GAME REACHED FOR HANGING S/			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: 17WC02637W

17WC02637W	POWELSON, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH WEST HS	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REMOVING LAB ASSIGNMENTS FROM FRIDGE, GLASS HOOKED & FELL CAUSI			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: 17WC02638W

17WC02638W	GREGG, SCOTT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOMS RIVER CENTER	4/20/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
THROWING BOXES OUT IN LOADING DOCK AREA, TRIPPED & FELL INJURING I			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: 17WC02639K





NEW CLAIMS

April 2017

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: 17WC02639K

17WC02639K	BAKER, MISTY		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOWLTON TWP ES	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPENING THE DOOR, THE BOTTOM PART OF DOOR SCRAPED THE TOP OF HI				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: 17WC02640B

17WC02640B	MARRERO, MELISSA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KUSER E.S.	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIORAL PUNCHED HER IN HER LT 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: 17WC02641B

17WC02641B	GRIFFITH, SUSAN		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLD SPRINGS ES	4/26/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HOLDING A STUDENT'S HAND DURING AN OUTBURST, STUDENT MOVED FOR				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: 17WC02642W





NEW CLAIMS

April 2017

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: 17WC02642W

17WC02642W	LINANE, CATHY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGHLAND HS	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FELT PAIN IN HER BACK AFTER LIFTING STUDENT'S LEGS TO GET ON SCHO			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: 17WC02643T

17WC02643T	ARRIZON, MARTHA	15	0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
ORANGE BOARD OF EDUCATION	4/3/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MOTOR VEHICLE ACCIDENT WITH CO-EMPLOYEE			0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
Total by Claim Number 1 Claim			0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
			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	3,500.00	0.00	3,500.00

Claim Number: 17WC02644R

17WC02644R	LYNCH, ANN	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HOWARD B.BRUNNER ES	4/26/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HER RT LT FELL ASLEEP, WENT TO STAND UP HER RT LEG BUCKLED TWISTE			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: 17WC02646K





NEW CLAIMS

April 2017

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: 17WC02646K

17WC02646K	BRITO, MARIA		11	1.00	0.00	0.00	0.00	0.00	0.00	1.00
MORRIS UNION JC TRANSPORTATI	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DRIVING BACK TO SCHOOL FROM SCHOOL TRIP AS SHE WAS DRIVING HAD T				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	1.00
				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	1.00

Claim Number: 17WC02647B

17WC02647B	HAGAN, JENNIFER		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
M SCOTT CARPENTER ES	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIOR HEADBUTTED HER ON HER JAW				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: 17WC02648B

17WC02648B	AINSWORTH, ANDREW		11	2,500.00	245.00	0.00	0.00	0.00	0.00	2,745.00
MORRISTOWN H.S.	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FOREIGN BODY IN LT EYE AFTER CHANGING CEILING TILES				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: 17WC02649Y





NEW CLAIMS

April 2017

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: 17WC02649Y

17WC02649Y	OSTERING, TIFFANY	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHORE REG HS	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE WALKING DOWN THE BLEACHERS IN THE GYM LOST FOOTING FELL IN				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: 17WC02650W

17WC02650W	BRUMMITT, SUZANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAKESIDE MS	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT HAVING A BEHAVIORAL OUTBURST TOSSED A CHAIR AT C				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: 17WC02651K

17WC02651K	MICHELSON, ANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WANAMASSA E.S.	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE OUTSIDE ON PLAYGROUND CLMT WAS STRUCK IN THE HEAD BY A KIC				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: 17WC02652B





NEW CLAIMS

April 2017

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: 17WC02652B

17WC02652B	EAKINS, JOANNE	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PINES LAKE E.S.	4/27/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIORAL BIT ON HER LT WRIST BREAKING THE SKIN				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: 17WC02653W

17WC02653W	WALLING, LINDA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MATAWAN REGIONAL HS	4/25/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GOING TO MAKE A BANK DEPOSIT WHILE DRIVING WAS IN AN MVA VEHICLE F				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: 17WC02654K

17WC02654K	LIPESKY, JOSEPH	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINWOOD MIDDLE SCHOOL	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE LIFTING LUNCH TABLES HE FELT PAIN IN HIS LOWER BACK				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: 17WC02655B





NEW CLAIMS

April 2017

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: 17WC02655B

17WC02655B	NOBLE, ILISA		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO INTERMEDIATE	4/6/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS EVACUTED FROM THE CLASSROOM DUE TO A CARBON MONOXID				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: 17WC02656K

17WC02656K	JODICE, RIANNE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEBSTER SCHOOL	4/27/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LINING UP FOR A FIRE DRILL, STUDENT STOPPED SHORT SHE FELL OVER ST				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: 17WC02657K

17WC02657K	BEGONJA, MICHELLE		11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOTT SCHOOL (NEW)	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SEPERATING 2 STUDENTS FROM FIGHTING, TWISTED HER LT WRIST IN THE F				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: 17WC02658Y





NEW CLAIMS

April 2017

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: 17WC02658Y

17WC02658Y	RUBINSON, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EAST BRUNSWICK CAMPUS	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAIR ROLLED OUT FROM UNDER HER CAUSING HER TO FALL, INJURING NE			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: 17WC02659K

17WC02659K	ROCHE, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REMOVING A TIRE, DEBRIS FLEW IN HIS EYE & HE RECEIVED A SMALL CUT OI			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: 17WC02660Y

17WC02660Y	KELLY, BRIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST FREEHOLD E.S.	4/20/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FLIPPED OVER A 6 FT TABLE TO PUT AWAY FELT TIGHTENING IN LOWER BAC			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: 17WC02661B





NEW CLAIMS

April 2017

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: 17WC02661B

17WC02661B	FORD, SHARAE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOLLWOOD E.S.	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT PULLED ON HER HAND CAUSING HER TO FALL OVER JAMMING HEF			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: 17WC02662W

17WC02662W	CLIFFORD, KELLI LYNN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODSTOWN MS	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN INTO HER CAUSING HER TO TRIP & FALL INJURING HER LT AN			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: 17WC02663K

17WC02663K	EDMOND, KEITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	4/28/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD WAS RUNNING, THE CHILD COLLAPSED IN AN ATTEMPT TO HELP THE (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: 17WC02664Y





NEW CLAIMS

April 2017

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: 17WC02664Y

17WC02664Y	NATALE, JACLYN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMENT.	4/25/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT HAVING A BEHAVIORIAL ISSUE INJURED L HAND, L RI				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: 17WC02665B

17WC02665B	JORGE, BELKIS	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SUSSEX AVENUE ES	4/26/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE OUTSIDE WAS STRUCK ON L SIDE OF FACE BY A BALL KICKED BY STU				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: 17WC02666W

17WC02666W	BITTNER, STEPHEN	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLOUCESTER COUNTY TECH & VC	4/28/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN THE CLASSROOM HE WAS BIT BY A SPIDER ON HIS LT UPPER 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: 17WC02667Y





NEW CLAIMS

April 2017

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: 17WC02667Y

17WC02667Y	HARRINGTON, THERESA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW REPAIR & TRANSPORTATION	4/28/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP FIGHT BETWEEN STUDENTS, STUDENT STRUCK HER IN R SIDE				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: 17WC02669B

17WC02669B	DABROWSKI, DONNA	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	4/28/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT WHO WAS HAVING BEHAVIORAL ISSUE INJURED LOV				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: 17WC02670W

17WC02670W	SANTIAGO, MICHAEL	11		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM R. SATZ I.S.	4/27/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING AN ORGANIZED STAFF AND STUDENT DODGEBALL GAME STEPPED				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





NEW CLAIMS

April 2017

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 309 Claims			883,847.96	84,595.00	149,141.77	0.00	0.00	3,500.00	0.00	1,121,084.73
			11,144.60	67,997.00	7,143.97	0.00	0.00	0.00	0.00	86,285.57
			872,703.36	16,598.00	141,997.80	0.00	0.00	3,500.00	0.00	1,034,799.16

Major Coverage: 20 - GENERAL LIABILITY

Claim Number: 17GL01225D

17GL01225D	BUBBA, MICHAEL	21	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
WAYNE TWP BOE	4/12/2017	4/12/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TITLE 18A				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: 17GL01233Q

17GL01233Q	GUZMAN, ANTONIO	20	5,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	6,500.00
CAMDEN CITY SCHOOL DISTRICT	4/19/2017	4/19/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CLMT STRUCK BY CAR IN PARKING LOT				5,000.00	1,500.00	0.00	0.00	0.00	0.00	6,500.00
Total by Claim Number 1 Claim			5,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	6,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			5,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	6,500.00

Claim Number: 17GL01243N

17GL01243N	TESORIERO, CATHERINE	22	0.00	0.00	0.00	0.00	0.00	0.00	3,500.00	3,500.00
INDIAN HILL E.S.	4/26/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES RAN INTO A WALL BROKE WRIST				0.00	0.00	0.00	0.00	0.00	3,500.00	3,500.00





NEW CLAIMS

April 2017

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	0.00	0.00	0.00	3,500.00	3,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	3,500.00	3,500.00
Claim Number: 17GL01245L										
17GL01245L	VILLA-CHAUVIN, BRANDEN	22		0.00	0.00	0.00	0.00	0.00	1,000.00	1,000.00
PISCATAWAY TWP H.S.	4/24/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS HIT IN THE EYE WITH A TENNIS BALL				0.00	0.00	0.00	0.00	0.00	1,000.00	1,000.00
Total by Claim Number 1 Claim				0.00	0.00	0.00	0.00	0.00	1,000.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	1,000.00	1,000.00
Claim Number: 17GL01248H										
17GL01248H	PAGE, AUDREY	21		0.00	0.00	285.00	0.00	0.00	0.00	285.00
PS 15	4/27/2017	4/28/2017	Open	0.00	0.00	285.00	0.00	0.00	0.00	285.00
BASKETBALL STRUCK TEACHER'S VEHICLE DAMAGING WINDSHIELD				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				0.00	0.00	285.00	0.00	0.00	0.00	285.00
				0.00	0.00	285.00	0.00	0.00	0.00	285.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17GL01250N										
17GL01250N	MARTINE, MAUVE	20		1.00	0.00	0.00	0.00	0.00	0.00	1.00
SHORE REGIONAL BOARD OF EDU	4/28/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT FELL PLAYING SOCCER AT RECESS				1.00	0.00	0.00	0.00	0.00	0.00	1.00





NEW CLAIMS

April 2017

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				1.00	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
				1.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Major Coverage 6 Claims				5,001.00	1,500.00	5,285.00	0.00	0.00	4,500.00	16,286.00
				0.00	0.00	285.00	0.00	0.00	0.00	285.00
				5,001.00	1,500.00	5,000.00	0.00	0.00	4,500.00	16,001.00

Major Coverage: 30 - AUTO LIABILITY

Claim Number: 17AL01159H

17AL01159H	BATISTA, MELVIN		31	0.00	0.00	1,622.79	0.00	0.00	0.00	1,622.79
TRANSPORTATION DEPT	4/10/2017	4/11/2017	4/13/2017	0.00	0.00	1,622.79	0.00	0.00	0.00	1,622.79
IV BACKED INTO OV				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				0.00	0.00	1,622.79	0.00	0.00	0.00	1,622.79
				0.00	0.00	1,622.79	0.00	0.00	0.00	1,622.79
				0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 17AL01160H

17AL01160H	LUGO, ALVIN		31	0.00	0.00	750.00	0.00	0.00	0.00	750.00
SOUTH BRUNSWICK BOE	4/12/2017	4/13/2017	Open	0.00	0.00	750.00	0.00	0.00	0.00	750.00
IV STRUCK PARKED VEHICLE				0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim				0.00	0.00	750.00	0.00	0.00	0.00	750.00
				0.00	0.00	750.00	0.00	0.00	0.00	750.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 17AL01174N





NEW CLAIMS

April 2017

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

Claim Number: 17AL01174N

17AL01174N	DOUNTS, DUNKIN	31		0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
WARREN CTY SPEC SVCS BOE	4/19/2017	4/20/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK BLDG				0.00	0.00	2,500.00	0.00	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	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	2,500.00	0.00	0.00	0.00	0.00	2,500.00

Claim Number: 17AL01179H

17AL01179H	JOHNSTONE, KATHLEEN	31		0.00	0.00	154.97	0.00	0.00	0.00	0.00	154.97
LACEY TWP BOE	4/18/2017	4/21/2017	4/27/2017	0.00	0.00	154.97	0.00	0.00	0.00	0.00	154.97
IV BACKING UP STRUCK OV				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	154.97	0.00	0.00	0.00	0.00	154.97
				0.00	0.00	154.97	0.00	0.00	0.00	0.00	154.97
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 17AL01184N

17AL01184N	DASILVA, CARLOS	31		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
ROSELLE BORO BOE	4/15/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV CHANGING LANES STRUCK OV				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
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	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00

Claim Number: 17AL01186H





NEW CLAIMS

April 2017

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

Claim Number: 17AL01186H

17AL01186H	LAO, ANTONIO		31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
EAST ORANGE COMMUNITY CHAR	4/25/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV HIT PARKED OV				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
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	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00

Claim Number: 17AL01187H

17AL01187H	LELLI, PAUL		31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
VINELAND BOE OFFICE	4/7/2017	4/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
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	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00

Claim Number: 17AL01188L

17AL01188L	MOLYNEUX, KATHLEEN		31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
LACEY TWP BOE	4/26/2017	4/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK CLMT'S MAILBOX				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
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	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00





NEW CLAIMS

April 2017

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 8 Claims				0.00	0.00	7,027.76	0.00	0.00	0.00	0.00	7,027.76
				0.00	0.00	2,527.76	0.00	0.00	0.00	0.00	2,527.76
				0.00	0.00	4,500.00	0.00	0.00	0.00	0.00	4,500.00
Major Coverage: 40 - AUTO PHYSICAL DAMAGE											
Claim Number: 17AL01155H											
17AL01155H	JERSEY CITY BOE		40	0.00	0.00	1,123.20	0.00	0.00	0.00	0.00	1,123.20
JERSEY CITY PUBLIC SCHOOLS	4/1/2017	4/6/2017	4/11/2017	0.00	0.00	1,123.20	0.00	0.00	0.00	0.00	1,123.20
IV HIT A TREE CAUSING DAMAGE				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	1,123.20	0.00	0.00	0.00	0.00	1,123.20
				0.00	0.00	1,123.20	0.00	0.00	0.00	0.00	1,123.20
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL01167N											
17AL01167N	MORRIS HILLS REG BOE		40	0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
MORRIS HILLS/KNOLLS REG BRD C	4/13/2017	4/18/2017	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV IN REAR				0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
Total by Claim Number 1 Claim				0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
Claim Number: 17AL01168N											
17AL01168N	BELLEVILLE BOE		40	0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
BELLEVILLE BOARD OF EDUCATIOI	4/17/2017	4/18/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV CAUSED TO LOSE CONTROL CRASHED THROUGH FENCE & PA				0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00





NEW CLAIMS

April 2017

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	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00	
Claim Number: 17AL01169L											
17AL01169L	CAMDEN CITY BOE		40	5,000.00	500.00	0.00	0.00	0.00	0.00	5,500.00	
CAMDEN CITY SCHOOL DISTRICT	4/15/2017	4/18/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
SCHOOL VAN WAS VANDALIZED				5,000.00	500.00	0.00	0.00	0.00	0.00	5,500.00	
Total by Claim Number 1 Claim				5,000.00	500.00	0.00	0.00	0.00	0.00	5,500.00	
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				5,000.00	500.00	0.00	0.00	0.00	0.00	5,500.00	
Claim Number: 17AL01172H											
17AL01172H	DELAWARE VALLEY REG BOE		40	0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
DELAWARE VALLEY REG BOE	4/19/2017	4/20/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
OV STRUCK STANDING IV				0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
Total by Claim Number 1 Claim				0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
Claim Number: 17AL01173L											
17AL01173L	SHORE REG BOE		40	0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
SHORE REGIONAL BOARD OF EDU	4/19/2017	4/19/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
OV STRUCK IV IN REAR				0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	





NEW CLAIMS

April 2017

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	550.00	5,000.00	0.00	0.00	0.00	0.00	5,550.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	550.00	5,000.00	0.00	0.00	0.00	5,550.00	
Claim Number: 17AL01175H											
17AL01175H	CAMDEN CITY BOE		40	0.00	550.00	2,500.00	0.00	0.00	0.00	3,050.00	
CAMDEN CITY SCHOOL DISTRICT	4/19/2017	4/20/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
OV STRUCK IV IN REAR				0.00	550.00	2,500.00	0.00	0.00	0.00	3,050.00	
Total by Claim Number 1 Claim				0.00	550.00	2,500.00	0.00	0.00	0.00	3,050.00	
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	550.00	2,500.00	0.00	0.00	0.00	3,050.00	
Claim Number: 17AL01183N											
17AL01183N	HUNTERDON CTY ESC BOE		40	2,500.00	0.00	0.00	0.00	0.00	0.00	2,500.00	
HUNTERDON COUNTY ED. SERVICE	4/24/2017	4/26/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
DEER HIT IV				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	2,500.00	
				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	2,500.00	
Claim Number: 17AL01185H											
17AL01185H	PISCATAWAY TWP BOE		40	0.00	234.00	2,500.00	0.00	0.00	0.00	2,734.00	
PISCATAWAY TWP BOE	4/18/2017	4/26/2017	Open	0.00	234.00	1,426.81	0.00	0.00	0.00	1,660.81	
OV STRUCK IV IN REAR				0.00	0.00	1,073.19	0.00	0.00	0.00	1,073.19	





NEW CLAIMS

April 2017

Claim Number	Claimant Name		Cov	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation	Reinsurance	Legal	Rehab/Pmp/Pip	Total
	Location	Loss Date		Rpt Date	Status	Incurring	Incurring	Incurring	Incurring	Incurring	
Description of Loss				Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring	Incurring
				Out Rsv	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	234.00	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,734.00
	0.00	234.00	1,426.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,660.81
	0.00	0.00	1,073.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,073.19

Claim Number: 17AL01190Q

17AL01190Q	BAYONNE BOE		40	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
BAYONNE BOARD OF EDUCATION	4/25/2017	5/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV AND OV COLLIDED WHILE TURNING				0.00	0.00	2,500.00	0.00	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	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	2,500.00	0.00	0.00	0.00	0.00	2,500.00

Total by Major Coverage 10 Claims	7,500.00	3,884.00	25,123.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,507.20
	0.00	234.00	2,550.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,784.01
	7,500.00	3,650.00	22,573.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,723.19

Major Coverage: 70 - PROPERTY

Claim Number: 17PR01046E

17PR01046E	SOUTH RIVER BOE		71	0.00	0.00	0.00	0.00	0.00	0.00	221.40	221.40
SOUTH RIVER HIGH SCHOOL	4/1/2017	4/3/2017	4/27/2017	0.00	0.00	0.00	0.00	0.00	0.00	221.40	221.40
POWER OUTAGE - POSS. DAMAGE				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	0.00	0.00	0.00	0.00	221.40	221.40
				0.00	0.00	0.00	0.00	0.00	0.00	221.40	221.40
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 17PR01048Q





NEW CLAIMS

April 2017

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: 70 - PROPERTY

Claim Number: 17PR01048Q

17PR01048Q	ELIZABETH BOE	70	0.00	1,500.00	60,000.00	0.00	0.00	0.00	0.00	61,500.00
MONSIGNOR JOAO S ANTAO #31	4/7/2017	4/10/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES PIPE BURST IN CHILD STUDY TEAM OFFICE				0.00	1,500.00	60,000.00	0.00	0.00	0.00	61,500.00
Total by Claim Number 1 Claim				0.00	1,500.00	60,000.00	0.00	0.00	0.00	61,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	1,500.00	60,000.00	0.00	0.00	0.00	61,500.00

Claim Number: 17PR01051Q

17PR01051Q	EAST ORANGE BOE	70	0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
ECOLE TOUSSAINT LOUVERTURE	4/24/2017	4/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES THEFT OF COMPUTERS AT TWO LOCATIONS				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00
Total by Claim Number 1 Claim				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00

Claim Number: 17PR01052Q

17PR01052Q	ATLANTIC CITY BOE	70	0.00	1,500.00	25,000.00	0.00	0.00	0.00	0.00	26,500.00
DR ML KING JUNIOR SCH COMP	4/21/2017	4/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES HOT WATER HEATER CASUED WATER LEAK				0.00	1,500.00	25,000.00	0.00	0.00	0.00	26,500.00
Total by Claim Number 1 Claim				0.00	1,500.00	25,000.00	0.00	0.00	0.00	26,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	1,500.00	25,000.00	0.00	0.00	0.00	26,500.00

Claim Number: 17PR01053N





NEW CLAIMS

April 2017

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: 70 - PROPERTY											
Claim Number: 17PR01053N											
17PR01053N	FARMINGDALE BORO BOE	70		0.00	1,000.00	5,000.00	0.00	0.00	0.00	6,000.00	
FARMINGDALE E.S.	4/24/2017	4/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ALLEGES NETWORKING BOX FELL OFF WALL HITTING COPIER & DAMAGED C				0.00	1,000.00	5,000.00	0.00	0.00	0.00	6,000.00	
Total by Claim Number 1 Claim				0.00	1,000.00	5,000.00	0.00	0.00	0.00	6,000.00	
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	1,000.00	5,000.00	0.00	0.00	0.00	6,000.00	
Claim Number: 17PR01054Q											
17PR01054Q	EAST ORANGE BOE	70		0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00	
SERVICE BUILDING	4/24/2017	4/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ALLEGES FENCE WAS CUT AND PARED VEHICLE				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00	
Total by Claim Number 1 Claim				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00	
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	
				0.00	1,500.00	5,000.00	0.00	0.00	0.00	6,500.00	
Total by Major Coverage 6 Claims				0.00	7,000.00	100,000.00	0.00	0.00	0.00	221.40	107,221.40
				0.00	0.00	0.00	0.00	0.00	221.40	221.40	
				0.00	7,000.00	100,000.00	0.00	0.00	0.00	107,000.00	
Grand Totals: 339 Claims				896,348.96	96,979.00	286,577.73	0.00	0.00	3,500.00	4,721.40	1,288,127.09
				11,144.60	68,231.00	12,506.74	0.00	0.00	0.00	221.40	92,103.74
				885,204.36	28,748.00	274,070.99	0.00	0.00	3,500.00	4,500.00	1,196,023.35

