

NEW CLAIMS

February 2016

. oz.iaa. y 20.0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05335Y	RAPPEPORT, FRIEDA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DAYTON E S	2/1/2016 2/1/2016 Open	196.89	243.00	0.00	0.00	0.00	0.00	0.00	439.89
PICKING UP STUDENT OFF GR	OUND FOR FIRE DRILL, PAIN IN R HIP	2,303.11	2.00	0.00	0.00	0.00	0.00	0.00	2,305.11
Total by Claim Number 1	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		196.89	243.00	0.00	0.00	0.00	0.00	0.00	439.89
		2,303.11	2.00	0.00	0.00	0.00	0.00	0.00	2,305.11
Claim Number: 16WC0	5340Z								
16WC05340Z	RIVERA, JOBINA 10	2,501.00	1,193.00	5,226.00	0.00	0.00	0.00	0.00	8,920.00
UNION HIGH SCHOOL (UNION)) 2/1/2016 2/1/2016 Open	212.94	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,889.94
SUPERVISING GYM CLASS FEL	LT STRAIN IN HEEL OF R FOOT AS SHE STEPPE	2,288.06	0.00	1,742.00	0.00	0.00	0.00	0.00	4,030.06
Total by Claim Number 1	1 Claim	2,501.00	1,193.00	5,226.00	0.00	0.00	0.00	0.00	8,920.00
		212.94	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,889.94
		2,288.06	0.00	1,742.00	0.00	0.00	0.00	0.00	4,030.06
Claim Number: 16WC0	5345T								
16WC05345T	DENNIS, JOAN 10	15,000.00	1,193.00	26,952.00	0.00	0.00	0.00	0.00	43,145.00
WESTAMPTON	2/1/2016 2/1/2016 Open	272.80	1,193.00	1,517.91	0.00	0.00	0.00	0.00	2,983.71
ATTEMPTED TO MOVE STUDE	NTS DESK, STUDENT BEGAN SWINGING HIS AR	14,727.20	0.00	25,434.09	0.00	0.00	0.00	0.00	40,161.29
Total by Claim Number 1	1 Claim	15,000.00	1,193.00	26,952.00	0.00	0.00	0.00	0.00	43,145.00
		272.80	1,193.00	1,517.91	0.00	0.00	0.00	0.00	2,983.71
		14,727.20	0.00	25,434.09	0.00	0.00	0.00	0.00	40,161.29

Claim Number: 16WC05346W





NEW CLAIMS

February 2016

1 00.1dd. y 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORK Claim Number: 16WC053									
16WC05346W	KLOUSER, AMANDA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON AVENUE SCHOOL	2/1/2016 2/1/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS SPEAKING TO ANOTHER TE	ACHER LT PINKY FINGER WAS LEANING AC	GA 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: 16WC053	348K								
16WC05348K	O'BRIEN, JILL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARLBORO M.S.	2/1/2016 2/1/2016 Open	43.22	243.00	0.00	0.00	0.00	0.00	0.00	286.22
PUNCHED IN FOR WORK AND LA	TER DISCOVERED 3 BITEMARKS ON R CHE	Eł 2,456.78	2.00	0.00	0.00	0.00	0.00	0.00	2,458.78
Total by Claim Number 1 (Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		43.22	243.00	0.00	0.00	0.00	0.00	0.00	286.22
		2,456.78	2.00	0.00	0.00	0.00	0.00	0.00	2,458.78
Claim Number: 16WC053	350K								
16WC05350K	PECORARO, FILITSA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KEANSBURG HS	2/1/2016 2/1/2016 Open	703.77	243.00	0.00	0.00	0.00	0.00	0.00	946.77
WHILE BREAKING UP A FIGHT BE	TWEEN 2 STUDENTS CLMT'S GLASSES WE	RI 1,796.23	2.00	0.00	0.00	0.00	0.00	0.00	1,798.23
Total by Claim Number 1 (Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-		703.77	243.00	0.00	0.00	0.00	0.00	0.00	946.77
		1,796.23	2.00	0.00	0.00	0.00	0.00	0.00	1,798.23

Claim Number: 16WC05351A





NEW CLAIMS

February 2016

rebruary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05351A									
16WC05351A	PUSZCZALO, VIOLETTA	10	20,000.00	3,695.00	44,000.00	0.00	0.00	0.00	0.00	67,695.00
LINDEN HIGH SCHOOL	2/1/2016 2/1/2016	Open	778.26	1,193.00	1,813.69	0.00	0.00	0.00	0.00	3,784.95
SETTING UP THE STAGE, A LO	DOSE PANEL FELL FROM THE W	/ALL & STRUCK H	19,221.74	2,502.00	42,186.31	0.00	0.00	0.00	0.00	63,910.05
Total by Claim Number	1 Claim		20,000.00	3,695.00	44,000.00	0.00	0.00	0.00	0.00	67,695.00
			778.26	1,193.00	1,813.69	0.00	0.00	0.00	0.00	3,784.95
			19,221.74	2,502.00	42,186.31	0.00	0.00	0.00	0.00	63,910.05
Claim Number: 16WC	05354Y									
16WC05354Y	RICE, KATHLEEN	11	92.16	243.00	0.00	0.00	0.00	0.00	0.00	335.16
NIXON ES	2/1/2016 2/2/2016	3/ 2/2016	92.16	243.00	0.00	0.00	0.00	0.00	0.00	335.16
TAKING OVER CARE OF A SPI	EC ED STUDENT HAVING A BEH	AVIORAL ISSUE (0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim		92.16	243.00	0.00	0.00	0.00	0.00	0.00	335.16
			92.16	243.00	0.00	0.00	0.00	0.00	0.00	335.16
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC	05356K									
16WC05356K	ORLOWSKA, MARIOLA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BAYONNE H.S. AND ADMIN. O	FFICE 2/1/2016 2/2/2016	3/ 4/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUSHING A RECYCLING BUCK	KET AND FELT A SNAP PAIN IN F	RT SHOULDER	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: 16WC05358W





NEW CLAIMS

February 2016

Township 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05358W	HOENEVELD, CHRISTINA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP M.S.	2/1/2016 2/2/2016 Open	26.42	243.00	0.00	0.00	0.00	0.00	0.00	269.42
HAD BASKETBALL THROWN DIF	RECTLY AT HER HITTING HER IN CHEST/STERN	2,473.58	2.00	0.00	0.00	0.00	0.00	0.00	2,475.58
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		26.42	243.00	0.00	0.00	0.00	0.00	0.00	269.42
		2,473.58	2.00	0.00	0.00	0.00	0.00	0.00	2,475.58
Claim Number: 16WC05	359Y								
16WC05359Y	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	2/1/2016 2/2/2016 Open	237.65	243.00	0.00	0.00	0.00	0.00	0.00	480.65
WALKING WITH STUDENT IN HA	LLWAY, STUDENT GRABBED HER ARM AND BI	2,262.35	2.00	0.00	0.00	0.00	0.00	0.00	2,264.35
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		237.65	243.00	0.00	0.00	0.00	0.00	0.00	480.65
		2,262.35	2.00	0.00	0.00	0.00	0.00	0.00	2,264.35
Claim Number: 16WC05	360W								
16WC05360W	MURRAY, ANNIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK REGIONAL HS	2/2/2016 2/2/2016 Open	304.10	243.00	0.00	0.00	0.00	0.00	0.00	547.10
WALKING IN THE HALL & STUDE	ENT OPENED THE BATHROOM DOOR & STRUC	2,195.90	2.00	0.00	0.00	0.00	0.00	0.00	2,197.90
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		304.10	243.00	0.00	0.00	0.00	0.00	0.00	547.10
		2,195.90	2.00	0.00	0.00	0.00	0.00	0.00	2,197.90

Claim Number: 16WC05361Z





NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05361Z								
16WC05361Z	ASHE, JOANNE 10	39,304.00	1,193.00	39,829.20	0.00	0.00	0.00	0.00	80,326.20
MARION P THOMAS CHARTER	R SCH 2/1/2016 2/1/2016 Open	314.70	1,193.00	3,286.20	0.00	0.00	0.00	0.00	4,793.90
OPENING DESK DRAWER, DRA	AWER GOT JAMMED & SHE FELT PAIN IN LT SHC	38,989.30	0.00	36,543.00	0.00	0.00	0.00	0.00	75,532.30
Total by Claim Number	1 Claim	39,304.00	1,193.00	39,829.20	0.00	0.00	0.00	0.00	80,326.20
		314.70	1,193.00	3,286.20	0.00	0.00	0.00	0.00	4,793.90
		38,989.30	0.00	36,543.00	0.00	0.00	0.00	0.00	75,532.30
Claim Number: 16WC(05362K								
16WC05362K	CARTER, SHAVONNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREGORY SCHOOL (NEW)	2/1/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS TRYING TO KEEP A SPEC	CIAL ED STUDENT HAVING AN OUTBURST FROM	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: 16WC0	05367Z								
16WC05367Z	VEGA-MOORE, DENISE 14	2,500.00	245.00	1,742.00	0.00	0.00	0.00	0.00	4,487.00
HACKENSACK MS	2/2/2016 2/3/2016 Open	432.43	243.00	1,493.10	0.00	0.00	0.00	0.00	2,168.53
CLMT GOT OUT OF HER VEHIC	CLE STEPPED ON A PATCH OF ICE SLIPPED STR	2,067.57	2.00	248.90	0.00	0.00	0.00	0.00	2,318.47
Total by Claim Number	1 Claim	2,500.00	245.00	1,742.00	0.00	0.00	0.00	0.00	4,487.00
-		432.43	243.00	1,493.10	0.00	0.00	0.00	0.00	2,168.53
		2,067.57	2.00	248.90	0.00	0.00	0.00	0.00	2,318.47

Claim Number: 16WC05368W



3/9/2016 by NISIG with the reports provided by Summit 1:43:30PM

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NEW CLAIMS

February 2016

. os. aa. y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0 16WC05368W	DRKERS' COMPENSATION 05368W SMART, MARY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIVERA SCHOOL	2/2/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE& FELL TO TH	HE GROUND INJURING HER LT HAND, LT HIP & E	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: 16WC	05369W								
16WC05369W	CASEY, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANK J DUGAN E.S.	2/2/2016 2/2/2016 Open	54.10	243.00	0.00	0.00	0.00	0.00	0.00	297.10
SLIPPED ON BALCK ICE & FEI	LL TO THE GROUND INJURING LT WRIST, LT PAI	J 2,445.90	2.00	0.00	0.00	0.00	0.00	0.00	2,447.90
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		54.10	243.00	0.00	0.00	0.00	0.00	0.00	297.10
		2,445.90	2.00	0.00	0.00	0.00	0.00	0.00	2,447.90
Claim Number: 16WC	05370G								
16WC05370G	JOHNSON, TAQUAN 10	17,500.00	1,195.00	20,000.00	0.00	0.00	0.00	0.00	38,695.00
MARION P THOMAS CHARTER	R SCH 2/1/2016 2/1/2016 Open	437.74	1,193.00	1,890.52	0.00	0.00	0.00	0.00	3,521.26
CARRYING BOXES UP THE ST	TAIRS WHEN A BOX FELL, HE LOST HIS BALACE	ξ 17,062.26	2.00	18,109.48	0.00	0.00	0.00	0.00	35,173.74
Total by Claim Number	1 Claim	17,500.00	1,195.00	20,000.00	0.00	0.00	0.00	0.00	38,695.00
		437.74	1,193.00	1,890.52	0.00	0.00	0.00	0.00	3,521.26
		17,062.26	2.00	18,109.48	0.00	0.00	0.00	0.00	35,173.74

Claim Number: 16WC05371B



3/9/2016
You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM

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NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION C05371B								
16WC05371B	CLARK, MELISSA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCE MS	2/2/2016 2/2/2016 Open	348.15	243.00	0.00	0.00	0.00	0.00	0.00	591.15
PREPARING FOR A MUSICAL	ON TEMPORARY PLATFORM SHE FELL LANDING	2,151.85	2.00	0.00	0.00	0.00	0.00	0.00	2,153.85
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		348.15	243.00	0.00	0.00	0.00	0.00	0.00	591.15
		2,151.85	2.00	0.00	0.00	0.00	0.00	0.00	2,153.85
Claim Number: 16WC	C05373B								
16WC05373B	LAURINO, LESLIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HIGH SCHOOL (UNIO	N) 2/2/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE ON SCHOOL BUS ON	A FIELD TRIP BUS WAS INVOLVED IN MVA INJ RT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	C05374Z								
16WC05374Z	STILES, CINDY 14	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER	SCH V 2/2/2016 2/2/2016 Open	255.00	243.00	0.00	0.00	0.00	0.00	0.00	498.00
SPEC ED STUDENT RAN OUT	T OF ROOM WENT AFTER STUDENT WAS PULLED	2,245.00	2.00	0.00	0.00	0.00	0.00	0.00	2,247.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		255.00	243.00	0.00	0.00	0.00	0.00	0.00	498.00
		2,245.00	2.00	0.00	0.00	0.00	0.00	0.00	2,247.00

Claim Number: 16WC05375Y





NEW CLAIMS

February 2016

Testuary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05375Y								
16WC05375Y	HAVENS, MARYANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CEDAR CREEK E.S.	2/2/2016 2/2/2016 Open	520.43	243.00	0.00	0.00	0.00	0.00	0.00	763.43
WASHING A PAN SQUIRTED D	ISH SOAP IN PAN AND SOME HIT HER R EYE	1,979.57	2.00	0.00	0.00	0.00	0.00	0.00	1,981.57
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		520.43	243.00	0.00	0.00	0.00	0.00	0.00	763.43
		1,979.57	2.00	0.00	0.00	0.00	0.00	0.00	1,981.57
Claim Number: 16WC0	05376M								
16WC05376M	AFRICANO, ANNA 10	537.36	1,193.00	1,773.60	0.00	0.00	0.00	0.00	3,503.96
FRANKLIN SCHOOL (UNION)	2/2/2016 2/2/2016 3/ 8/2016	537.36	1,193.00	1,773.60	0.00	0.00	0.00	0.00	3,503.96
STUDENT GOT INTO A FIGHT	TRIED TO RESTRAIN INJURED R INDEX FINGER	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim	537.36	1,193.00	1,773.60	0.00	0.00	0.00	0.00	3,503.96
		537.36	1,193.00	1,773.60	0.00	0.00	0.00	0.00	3,503.96
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	95377Z								
16WC05377Z	HEMMINGWAY, STEVEN 10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
HEYWOOD AVENUE SCHOOL	2/2/2016 2/3/2016 Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
PUTTING BUS SIGNS UP IN FR	ONT OF SCHOOL, SLIPPED ON ICE AND FELL IN	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: 16WC05378F



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NEW CLAIMS

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rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - W	ORKERS' COMPENSATION C05378F								
16WC05378F	TKACS, STEPHEN 10	12,000.00	1,193.00	26,000.00	0.00	0.00	0.00	0.00	39,193.00
MAINTENANCE DEPT	2/1/2016 2/3/2016 Open	4,263.28	1,193.00	0.00	0.00	0.00	0.00	0.00	5,456.28
UNLOADING THE PICKUP TO	RUCK STEPPED ON BUMPER AND FELL ON L ELBO	7,736.72	0.00	26,000.00	0.00	0.00	0.00	0.00	33,736.72
Total by Claim Number	er 1 Claim	12,000.00	1,193.00	26,000.00	0.00	0.00	0.00	0.00	39,193.00
		4,263.28	1,193.00	0.00	0.00	0.00	0.00	0.00	5,456.28
		7,736.72	0.00	26,000.00	0.00	0.00	0.00	0.00	33,736.72
Claim Number: 16W	C05379Y								
16WC05379Y	SLACK, CHRISTINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOUNDATION ACADEMY CH	HAR SCI 2/2/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL TO THE GR	ROUND FROM ICE INJRING THE RT SIDE OF HER RI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	er 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W	C05380W								
16WC05380W	SINGH, MARIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 5	2/2/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED GETTING OUT OF	HER CAR HITTING CAR DOOT LATCH DIDN'T FALL I	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	er 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05381K





NEW CLAIMS

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-		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05381K	O'HARA, CARRIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOUNTAIN WOODS E.S.	2/1/2016 2/3/2016 Open	238.54	243.00	0.00	0.00	0.00	0.00	0.00	481.54
MOVING A STOOL TO SIT BETV	VEEN TWO STUDENTS MISSED AND FELL ON L	2,261.46	2.00	0.00	0.00	0.00	0.00	0.00	2,263.46
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		238.54	243.00	0.00	0.00	0.00	0.00	0.00	481.54
		2,261.46	2.00	0.00	0.00	0.00	0.00	0.00	2,263.46
Claim Number: 16WC0	5382K								
16WC05382K	FERNANDEZ-CARRANDA, MARIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/2/2016 2/2/2016 Open	350.22	243.00	0.00	0.00	0.00	0.00	0.00	593.22
JAMMED HER RT HAND RING F	INGER IN DESK AS SHE TRIED TO PREVENT IT	2,149.78	2.00	0.00	0.00	0.00	0.00	0.00	2,151.78
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		350.22	243.00	0.00	0.00	0.00	0.00	0.00	593.22
		2,149.78	2.00	0.00	0.00	0.00	0.00	0.00	2,151.78
Claim Number: 16WC0	5383G								
16WC05383G	HICKS, JANICE 10	17,500.00	1,195.00	15,000.00	0.00	0.00	0.00	0.00	33,695.00
DEPT OF TRANSPORTATION (UNIC 2/2/2016 2/3/2016 Open	662.96	1,193.00	1,192.72	0.00	0.00	0.00	0.00	3,048.68
DRIVING BUS INVOLVED IN MV	A INJURED LOW BACK, CHEST, L LEG	16,837.04	2.00	13,807.28	0.00	0.00	0.00	0.00	30,646.32
Total by Claim Number 1	Claim	17,500.00	1,195.00	15,000.00	0.00	0.00	0.00	0.00	33,695.00
-		662.96	1,193.00	1,192.72	0.00	0.00	0.00	0.00	3,048.68
		16,837.04	2.00	13,807.28	0.00	0.00	0.00	0.00	30,646.32

Claim Number: 16WC05384B



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NEW CLAIMS

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. os.aa.y 2 0.0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05384B								
16WC05384B	PORRINO, DONNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 3 ES	2/3/2016 2/3/2016 Open	32.31	243.00	0.00	0.00	0.00	0.00	0.00	275.31
SLIPPED ON WET FLOOR AND	FELL HITTING HEAD ON WALL, L KNEE, SPLIT	TI 2,467.69	2.00	0.00	0.00	0.00	0.00	0.00	2,469.69
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		32.31	243.00	0.00	0.00	0.00	0.00	0.00	275.31
		2,467.69	2.00	0.00	0.00	0.00	0.00	0.00	2,469.69
Claim Number: 16WC0	05386Y								
16WC05386Y	FALLOWS, KELLY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAURICE RIVER TWP. ELEME	NTAF 2/1/2016 2/3/2016 Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
WHILE DOING A BULLETIN BO	ARD, STAPLED R THUMB	2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
		2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Claim Number: 16WC0	05389K								
16WC05389K	JOHNSON, ELAINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLAYTON HS	2/1/2016 2/3/2016 Open	166.95	243.00	0.00	0.00	0.00	0.00	0.00	409.95
ATTEMPTED TO OPEN DOOR,	DOOR SLAMMED SHUT HITTING HER FACE/MG	OL 2,333.05	2.00	0.00	0.00	0.00	0.00	0.00	2,335.05
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		166.95	243.00	0.00	0.00	0.00	0.00	0.00	409.95
		2,333.05	2.00	0.00	0.00	0.00	0.00	0.00	2,335.05

Claim Number: 16WC05391B



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NEW CLAIMS

February 2016

Todauly 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05391B	ARENA, ADRIENNE 1	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER SC	H V 2/2/2016 2/2/2016 Open	140.57	243.00	0.00	0.00	0.00	0.00	0.00	383.57
PUT HER LT WRIST OUT TO PRE	EVENT STUDENT FROM DAMAGING DESK	(& IN. 2,359.43	2.00	0.00	0.00	0.00	0.00	0.00	2,361.43
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		140.57	243.00	0.00	0.00	0.00	0.00	0.00	383.57
		2,359.43	2.00	0.00	0.00	0.00	0.00	0.00	2,361.43
Claim Number: 16WC05	392Y								
16WC05392Y	KELLNER, RHODA 1	1 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #5 E.S.	2/3/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER DESK DRAWERS	S THAT DON'T STAY CLOSED INJURING H	ER L1 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: 16WC05	393Z								
16WC05393Z	SBRISCIA, ANTHONY 1	12,124.00	1,193.00	29,590.00	0.00	0.00	0.00	0.00	42,907.00
WARREN HILLS REG HS	2/2/2016 2/2/2016 Open	167.94	1,193.00	1,742.00	0.00	0.00	0.00	0.00	3,102.94
BENDING & TWISTING SPRINKLI	NG SALT IN PARKING LOT HE FELT PAIN	IN HI: 11,956.06	0.00	27,848.00	0.00	0.00	0.00	0.00	39,804.06
Total by Claim Number 1	Claim	12,124.00	1,193.00	29,590.00	0.00	0.00	0.00	0.00	42,907.00
		167.94	1,193.00	1,742.00	0.00	0.00	0.00	0.00	3,102.94
		11,956.06	0.00	27,848.00	0.00	0.00	0.00	0.00	39,804.06

Claim Number: 16WC05394W



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NEW CLAIMS

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Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORI Claim Number: 16WC05									
16WC05394W	MARTINEZ, SARESKA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EARLY CHILDHOOD PROGRAM	2/2/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL INJURING HER	LT KNEE, LT SHOULDER & 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: 16WC05	395Y								
16WC05395Y	PERINOTTI, CASSI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
STONY BROOK ES	2/2/2016 2/2/2016 Open	275.04	243.00	0.00	0.00	0.00	0.00	0.00	518.04
STUDENT HAVING A BEHAVIORA	AL HEAD BUTTED & KICKED HER IN HER LEGS	2,224.96	2.00	0.00	0.00	0.00	0.00	0.00	2,226.96
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		275.04	243.00	0.00	0.00	0.00	0.00	0.00	518.04
		2,224.96	2.00	0.00	0.00	0.00	0.00	0.00	2,226.96
Claim Number: 16WC05	396W								
16WC05396W	JENSEN, MARIANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LADY LIBERTY ACADEMY CHAR	TEF 2/2/2016 2/2/2016 Open	195.34	243.00	0.00	0.00	0.00	0.00	0.00	438.34
STUDENT HAVING A BEHAVIORA	AL PUSHED HER CAUSING HER TO FALL FRAC	2,304.66	2.00	0.00	0.00	0.00	0.00	0.00	2,306.66
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		195.34	243.00	0.00	0.00	0.00	0.00	0.00	438.34
		2,304.66	2.00	0.00	0.00	0.00	0.00	0.00	2,306.66

Claim Number: 16WC05397B



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Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05397B								
16WC05397B	DIAZ, SANDRA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN NO. 5 ELEM.	2/1/2016 2/1/2016 Open	648.16	243.00	0.00	0.00	0.00	0.00	0.00	891.16
STUDENT HAVING A BEHAVIO	RAL SCRATCHED HER & TWISTER HER RT WRIS	1,851.84	2.00	0.00	0.00	0.00	0.00	0.00	1,853.84
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		648.16	243.00	0.00	0.00	0.00	0.00	0.00	891.16
		1,851.84	2.00	0.00	0.00	0.00	0.00	0.00	1,853.84
Claim Number: 16WC0	95398K								
16WC05398K	KELLY, ROBIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANNAH CALDWELL E.S. (UNI	ON) 2/1/2016 2/4/2016 Open	526.65	243.00	0.00	0.00	0.00	0.00	0.00	769.65
WALKING DOWN HALLWAY SL	IPPED AND FELL ON WET FLOOR INJ LT KNEE A	1,973.35	2.00	0.00	0.00	0.00	0.00	0.00	1,975.35
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		526.65	243.00	0.00	0.00	0.00	0.00	0.00	769.65
		1,973.35	2.00	0.00	0.00	0.00	0.00	0.00	1,975.35
Claim Number: 16WC0	95399Y								
16WC05399Y	REECE, STACEY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIVERA SCHOOL	2/2/2016 2/2/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REPORTING TO WORK SHE SL	IPPED & FELL INJURING HER RT HAND, ARM & 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: 16WC05400W



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NEW CLAIMS

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1 edition y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05400W	INKROTE, JANICE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	2/3/2016 2/3/2016 Open	106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
STOPPED SHORT @ A RED LIG	HT & WAS REAR ENDED FROM THE BACK & INJ	2,393.92	2.00	0.00	0.00	0.00	0.00	0.00	2,395.92
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
		2,393.92	2.00	0.00	0.00	0.00	0.00	0.00	2,395.92
Claim Number: 16WC0	5402B								
16WC05402B	LOMBARDI, TONI ANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #4 ES	2/3/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL ON WET FLOO	R INJURING LT KNEE, RT FOOT & 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: 16WC0	5404B								
16WC05404B	MARDEKIAN, STEPHANIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONTGOMERY UPPER MS	2/3/2016 2/4/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE MOVING THE FURNITUR	E AROUND A CHAIR FELL FROM TOP OF DESK	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: 16WC05405B



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NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05405B	CUTILLO, MICHAEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
REGIONAL ALTERNATIVE SCH	2/2/2016 2/4/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT HAVING A B	EHAVIORAL ISSUE IN CLASSROOM STRUCK C	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: 16WC05	406W								
16WC05406W	MARANGELLI, JAIME 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BETTY MCELMON ES	2/3/2016 2/4/2016 Open	321.36	243.00	0.00	0.00	0.00	0.00	0.00	564.36
WORKING WITH SPEC ED STUD	ENT THAT THREW HIMSELF ON THE FLOOR CI	2,178.64	2.00	0.00	0.00	0.00	0.00	0.00	2,180.64
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		321.36	243.00	0.00	0.00	0.00	0.00	0.00	564.36
		2,178.64	2.00	0.00	0.00	0.00	0.00	0.00	2,180.64
Claim Number: 16WC05	4407Y								
16WC05407Y	MOSES, BRANDEE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	2/3/2016 2/4/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A SPEC ED STUDENT OPENED	THE DOOR TO THE CLASSROOM DOOR STRUC	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: 16WC05408Z



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	RKERS' COMPENSATION 05408Z								
16WC05408Z	MORREALE, VITO 11	10,260.00	1,193.00	1,392.00	0.00	0.00	0.00	0.00	12,845.00
MONTAGUE ES	2/3/2016 2/3/2016 Open	78.19	243.00	762.28	0.00	0.00	0.00	0.00	1,083.47
STRUCK BY A PARENT DRIVIN	IG THEIR CAR, INJURING LT KNEE, SHIN, BOTH F	10,181.81	950.00	629.72	0.00	0.00	0.00	0.00	11,761.53
Total by Claim Number	1 Claim	10,260.00	1,193.00	1,392.00	0.00	0.00	0.00	0.00	12,845.00
		78.19	243.00	762.28	0.00	0.00	0.00	0.00	1,083.47
		10,181.81	950.00	629.72	0.00	0.00	0.00	0.00	11,761.53
Claim Number: 16WC0	05409W								
16WC05409W	VARGA, MARIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BATTLE HILL SCHOOL (UNION	I) 2/3/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PLAYING AROUND S	STRUCK HER IN HER LT EYE CAUSING BRUISING	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: 16WC0	95410W								
16WC05410W	KASMER, JAMES 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OF	FFICE 2/3/2016 2/3/2016 Open	5.63	243.00	0.00	0.00	0.00	0.00	0.00	248.63
CARRYING 2 BAGS AS HE WEN	NT THRU THE DOOR, WIND BLEW THE DOOR & \$	2,494.37	2.00	0.00	0.00	0.00	0.00	0.00	2,496.37
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		5.63	243.00	0.00	0.00	0.00	0.00	0.00	248.63
		2,494.37	2.00	0.00	0.00	0.00	0.00	0.00	2,496.37

Claim Number: 16WC05411K



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NEW CLAIMS

February 2016

1 oz. daily 2010		М	ed/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Sta	tus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05411K	TARDIFF, DANETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/3/2016 2/3/2016 Ope	en	246.05	243.00	0.00	0.00	0.00	0.00	0.00	489.05
STUDENT PUNCHED HER IN THE	RT HAND (TOP PART BETWEEN TH	HUMB & INI	2,253.95	2.00	0.00	0.00	0.00	0.00	0.00	2,255.95
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			246.05	243.00	0.00	0.00	0.00	0.00	0.00	489.05
			2,253.95	2.00	0.00	0.00	0.00	0.00	0.00	2,255.95
Claim Number: 16WC05	413K									
16WC05413K	STIRNWEISS, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FORREST DALE MS	2/3/2016 2/3/2016 Ope	en	1,316.76	243.00	0.00	0.00	0.00	0.00	0.00	1,559.76
TRIED TO PREVENT A BALL FRO	M HITTING HER FACE WITH HER RT	Γ HAND WF	1,183.24	2.00	0.00	0.00	0.00	0.00	0.00	1,185.24
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,316.76	243.00	0.00	0.00	0.00	0.00	0.00	1,559.76
			1,183.24	2.00	0.00	0.00	0.00	0.00	0.00	1,185.24
Claim Number: 16WC05	415K									
16WC05415K	CEFOLO, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SCHOOL (UNION)	2/3/2016 2/4/2016 Ope	en	124.08	243.00	0.00	0.00	0.00	0.00	0.00	367.08
ATTEMPTED TO SIT ON A CHAIR	AND THE CHIAR SLIPPED SHE FELI	L INJURED	2,375.92	2.00	0.00	0.00	0.00	0.00	0.00	2,377.92
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			124.08	243.00	0.00	0.00	0.00	0.00	0.00	367.08
			2,375.92	2.00	0.00	0.00	0.00	0.00	0.00	2,377.92

Claim Number: 16WC05416Y



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NEW CLAIMS

February 2016

1 ebituary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05416Y								
16WC05416Y	CUGINO, SANDRA 11	100.92	243.00	0.00	0.00	0.00	0.00	0.00	343.92
MAX LEUCHTER E.S.	2/1/2016 2/4/2016 2/26/2016	100.92	243.00	0.00	0.00	0.00	0.00	0.00	343.92
TAKING STUDNETS TO BUS, S	STUDENTS RAN BACK IN AFTER HIS NAME WAS E	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim	100.92	243.00	0.00	0.00	0.00	0.00	0.00	343.92
		100.92	243.00	0.00	0.00	0.00	0.00	0.00	343.92
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC	05417W								
16WC05417W	EINSBRUCH, JANICE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MT. PLEASANT MS	2/3/2016 2/4/2016 Open	635.78	243.00	0.00	0.00	0.00	0.00	0.00	878.78
STUDENT WRAPPED HIS WHO	OLE BODY AROUND HER LEGS SHE FELL INJURE	1,864.22	2.00	0.00	0.00	0.00	0.00	0.00	1,866.22
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		635.78	243.00	0.00	0.00	0.00	0.00	0.00	878.78
		1,864.22	2.00	0.00	0.00	0.00	0.00	0.00	1,866.22
Claim Number: 16WC	05418B								
16WC05418B	GODFREY, SARA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE PREP ACADEMY	2/3/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	DRAL PUSHED HER INJURING RT KNEE, DID NOT	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: 16WC05419B



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NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0										
16WC05419B	GILROY, GERARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN CITY HS	2/3/2016 2/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BACKED UP INTO A STOOL CA	USING HIM TO STUMBLE OVER S	TOOL HITTING	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5420B									
16WC05420B	GALIOTO, LESLIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLV (OUR LADY OF VICTORIES	8) 2/3/2016 2/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS HEAD BUTTED BY STUDE	NT 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: 16WC0	5421B									
16WC05421B	TASKIN, YASIR	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERGEN ARTS & SCIENCE CHA	ARTE 2/4/2016 2/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING ON SCIENCE PROJE	CT AND CUT R HAND PINKY FING	ER ON A META	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: 16WC05423J



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NEW CLAIMS

February 2016

1 00.1dd. y 20.10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO										
16WC05423J	DONAHUE, JAMES	10	6,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	12,693.00
WESTAMPTON	2/2/2016 2/2/2016	Open	160.00	1,193.00	1,131.00	0.00	0.00	0.00	0.00	2,484.00
SLIPPED ON ICE & HIT HIS HEA	AD ON THE GROUND		6,340.00	0.00	3,869.00	0.00	0.00	0.00	0.00	10,209.00
Total by Claim Number	l Claim		6,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	12,693.00
			160.00	1,193.00	1,131.00	0.00	0.00	0.00	0.00	2,484.00
			6,340.00	0.00	3,869.00	0.00	0.00	0.00	0.00	10,209.00
Claim Number: 16WC0	5424K									
16WC05424K	TRAPHAGEN, JANET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLINTON ES	2/4/2016 2/4/2016	Open	94.70	243.00	0.00	0.00	0.00	0.00	0.00	337.70
SLIPPED & FELL CAUSING INJU	JRY TO LT KNEE		2,405.30	2.00	0.00	0.00	0.00	0.00	0.00	2,407.30
Total by Claim Number	l Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			94.70	243.00	0.00	0.00	0.00	0.00	0.00	337.70
			2,405.30	2.00	0.00	0.00	0.00	0.00	0.00	2,407.30
Claim Number: 16WC0	5425Y									
16WC05425Y	MOORE, LESSIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH MAIN STREET SCHOOL	2/3/2016 2/5/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PAYING FOR LUNCH STU	DENT RAN INTO HER CAUSING	BOTH TO FALL (2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	l Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05426W



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NEW CLAIMS

February 2016

1 ebidary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05426W									
16WC05426W	EVANS, IRENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GARFIELD MS	2/3/2016 2/5/2016	Open	13.21	243.00	0.00	0.00	0.00	0.00	0.00	256.21
STEPPING OFF MUSIC ROOM	PLATFORM TWISTED R ANKLE		2,486.79	2.00	0.00	0.00	0.00	0.00	0.00	2,488.79
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			13.21	243.00	0.00	0.00	0.00	0.00	0.00	256.21
			2,486.79	2.00	0.00	0.00	0.00	0.00	0.00	2,488.79
Claim Number: 16WC0	95427B									
16WC05427B	CRANE, TIFFANY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	2/4/2016 2/5/2016	Open	432.86	243.00	0.00	0.00	0.00	0.00	0.00	675.86
DRIVING SCHOOL BUS INVOLV	/ED IN MVA INJURED R CALF, N	IECK, BOTH SHOI	2,067.14	2.00	0.00	0.00	0.00	0.00	0.00	2,069.14
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			432.86	243.00	0.00	0.00	0.00	0.00	0.00	675.86
			2,067.14	2.00	0.00	0.00	0.00	0.00	0.00	2,069.14
Claim Number: 16WC0	95428B									
16WC05428B	GOLEY, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MANCHESTER TWP. HS	2/4/2016 2/5/2016	Open	106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
REMOVING STOOLS FROM TA	BLES FOR CLASS SHE DROPPE	ED ON R FOOT & I	2,393.92	2.00	0.00	0.00	0.00	0.00	0.00	2,395.92
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
			2,393.92	2.00	0.00	0.00	0.00	0.00	0.00	2,395.92

Claim Number: 16WC05429K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05429K	TORCHIANO, NANCY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUSTIN SCHOENLY SCHOOL	2/4/2016 2/5/2016 Open	804.72	243.00	0.00	0.00	0.00	0.00	0.00	1,047.72
SPEC ED STUDENT WAS HAVIN	G A MELTDOWN THREW A GLASS JAR AT CLM	1,695.28	2.00	0.00	0.00	0.00	0.00	0.00	1,697.28
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		804.72	243.00	0.00	0.00	0.00	0.00	0.00	1,047.72
		1,695.28	2.00	0.00	0.00	0.00	0.00	0.00	1,697.28
Claim Number: 16WC05	5430B								
16WC05430B	GOLDING, KATIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIELLE E. S.	2/2/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WENT TO GRAB A TO	Y WENT TO STOP STUDENT FROM HARMING A	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: 16WC05	5431B								
16WC05431B	CLONTS, DIANE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/3/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SELLING TICKETS FOR WRESTI	LING MATCH WENT TO MOVE TABLE, TABLE CO	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: 16WC05432Z





NEW CLAIMS

February 2016

Tebluary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF									
16WC05432Z	STEVENSON, STEVEN 10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
CHATSWORTH ES	2/3/2016 2/5/2016 Open	255.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,448.00
CLEANING AFTER LUNCH FOLD	DING UP TABLE CHILDRED PLAYING BALL WAS	2,245.00	0.00	0.00	0.00	0.00	0.00	0.00	2,245.00
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
		255.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,448.00
		2,245.00	0.00	0.00	0.00	0.00	0.00	0.00	2,245.00
Claim Number: 16WC0	5433K								
16WC05433K	GLICK, REBECCA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADEMY SCI, MATH, & ENGN	2/3/2016 2/3/2016 Open	322.02	243.00	0.00	0.00	0.00	0.00	0.00	565.02
SLIPPED ON A PUDDLE OF WA	TER CAUSING STRAIN TO RT FOOT/ANKLE, DI	2,177.98	2.00	0.00	0.00	0.00	0.00	0.00	2,179.98
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		322.02	243.00	0.00	0.00	0.00	0.00	0.00	565.02
		2,177.98	2.00	0.00	0.00	0.00	0.00	0.00	2,179.98
Claim Number: 16WC0	5434K								
16WC05434K	AUSTIN, RACHAEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKETTSTOWN MS	2/4/2016 2/5/2016 Open	63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
SLIPPED AND FELL ON THE ST	AIRS GRABBING ONTO RAILING INJURED R SH	1(2,436.78	2.00	0.00	0.00	0.00	0.00	0.00	2,438.78
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
		2,436.78	2.00	0.00	0.00	0.00	0.00	0.00	2,438.78

Claim Number: 16WC05435B



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	ov Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Statu		Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05435B	FREVERT, KATELYN	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JAMES J. FLYNN E.S.	2/4/2016 2/4/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT GRABBED HER WITH	HA PENCIL INJURING LT FOREARM, BR	EAKING 2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5436W								
16WC05436W	PERRAPATO, JENNIFER	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JAMES MADISON SCHOOL	2/3/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PUNCHED HER IN R	BREAST	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: 16WC0	5437W								
16WC05437W	SHEIL, MAUREEN	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN ES	2/4/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING CIRCLE TIME HOLDING	G STUDENTS HAND, WAS BITTEN ON R	HAND 2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05438B



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NEW CLAIMS

February 2016

1 op. da. y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05438B	LOZADA-SHAW, LISA 11	315.50	243.00	0.00	0.00	0.00	0.00	0.00	558.50
BANKBRIDGE REG DEVELOPM	ENT. 2/2/2016 2/5/2016 3/ 9/2016	315.50	243.00	0.00	0.00	0.00	0.00	0.00	558.50
RESTRAINING STUDENT AND V	VAS BITTEN ON L HAND STUDENT ALSO SPIT IN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim	315.50	243.00	0.00	0.00	0.00	0.00	0.00	558.50
		315.50	243.00	0.00	0.00	0.00	0.00	0.00	558.50
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	5439B								
16WC05439B	RUSSO, TREVOR 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLARA B. WORTH ES	2/2/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BACKED INTO A PARTITION DC	OR WHEN HE WENT TO PICK UP RAG OFF FLO	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: 16WC0	5440W								
16WC05440W	MAHONEY, GERALDINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/4/2016 2/4/2016 Open	175.50	243.00	0.00	0.00	0.00	0.00	0.00	418.50
BUILDING SCENERY IN HER CL	ASSROOM, USING A POWER DRILL SHE PUNCT	2,324.50	2.00	0.00	0.00	0.00	0.00	0.00	2,326.50
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		175.50	243.00	0.00	0.00	0.00	0.00	0.00	418.50
		2,324.50	2.00	0.00	0.00	0.00	0.00	0.00	2,326.50

Claim Number: 16WC05442B





NEW CLAIMS

February 2016

1 ebidary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05442B									
16WC05442B	LAWLER, LYNDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VOTECH VS	2/2/2016 2/2/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUTTING THE WRAPPING OF	THE TURKEY & CUT HER LT THU	JMB	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: 16WC0	95443Y									
16WC05443Y	GARCIA, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIGHT BEGINNINGS LEARNING	NG CI 2/4/2016 2/5/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK IN FACE BY STU	IDENT HAVING AN OUTBURST		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: 16WC0)5444K									
16WC05444K	DELANEY, ELLEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREENWICH TWP ES	2/4/2016 2/5/2016	Open	259.63	243.00	0.00	0.00	0.00	0.00	0.00	502.63
WAS CRAWLING UNDER TABL	E TO PICK UP TRASH INJURED	R KNEE	2,240.37	2.00	0.00	0.00	0.00	0.00	0.00	2,242.37
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			259.63	243.00	0.00	0.00	0.00	0.00	0.00	502.63
			2,240.37	2.00	0.00	0.00	0.00	0.00	0.00	2,242.37

Claim Number: 16WC05445K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05445K	O'DONNELL, JILL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS RICHARDS SCHOOL	2/3/2016 2/5/2016 Open	443.44	243.00	0.00	0.00	0.00	0.00	0.00	686.44
PLAYING KICKBALL WITH STUD	ENTS WAS RUNNING INJURED L KNEE	2,056.56	2.00	0.00	0.00	0.00	0.00	0.00	2,058.56
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		443.44	243.00	0.00	0.00	0.00	0.00	0.00	686.44
		2,056.56	2.00	0.00	0.00	0.00	0.00	0.00	2,058.56
Claim Number: 16WC05	3448C								
16WC05448C	WILLIAMS, ALFREDA 10	2,500.00	1,543.00	6,000.00	0.00	0.00	0.00	0.00	10,043.00
TRENTON HS WEST	2/5/2016 2/8/2016 Open	0.00	1,193.00	996.06	0.00	0.00	0.00	0.00	2,189.06
GOING DOWN STAIRS CARRYIN	IG SMALL SPEAKERS SHE FELL CUTTING L EYI	2,500.00	350.00	5,003.94	0.00	0.00	0.00	0.00	7,853.94
Total by Claim Number 1	Claim	2,500.00	1,543.00	6,000.00	0.00	0.00	0.00	0.00	10,043.00
		0.00	1,193.00	996.06	0.00	0.00	0.00	0.00	2,189.06
		2,500.00	350.00	5,003.94	0.00	0.00	0.00	0.00	7,853.94
Claim Number: 16WC05	6449M								
16WC05449M	BERNSTEIN, LYNN 10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TERRILL MS	2/5/2016 2/8/2016 Open	133.97	243.00	0.00	0.00	0.00	0.00	0.00	376.97
SLIPPED ON ICE INJURED R HIP	P, R SHOULDER, PAIN IN L SIDE NECK	2,366.03	2.00	0.00	0.00	0.00	0.00	0.00	2,368.03
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
- -		133.97	243.00	0.00	0.00	0.00	0.00	0.00	376.97
		2,366.03	2.00	0.00	0.00	0.00	0.00	0.00	2,368.03

Claim Number: 16WC05450B





NEW CLAIMS

February 2016

1 oz. da. y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid [:] Out Rsv
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out RSV
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05450B	SANOQUET, PAULA 11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WASHINGTON SCHOOL	2/5/2016 2/8/2016 3/ 4/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENT IN BATHR	OOM WAS BITTEN ON R LOWER ARM	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: 16WC05	6451C								
16WC05451C	DAMOLFETTA, MAURO 10	43,900.00	1,695.00	73,478.84	0.00	0.00	0.00	0.00	119,073.84
NORTH BERGEN HIGH SCHOOL	. 2/5/2016 2/5/2016 Open	450.00	1,193.00	2,948.56	0.00	0.00	0.00	0.00	4,591.56
BREAKING DOWN ICE WITH A S	HOVEL HE FELT PAIN IN HIS LOWER BACK	43,450.00	502.00	70,530.28	0.00	0.00	0.00	0.00	114,482.28
Total by Claim Number 1	Claim	43,900.00	1,695.00	73,478.84	0.00	0.00	0.00	0.00	119,073.84
		450.00	1,193.00	2,948.56	0.00	0.00	0.00	0.00	4,591.56
		43,450.00	502.00	70,530.28	0.00	0.00	0.00	0.00	114,482.28
Claim Number: 16WC05	5452W								
16WC05452W	MONTAGNA, RACHEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/8/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GUIDING STUDENT OUT OF VAN	N, STRUCK HER HEAD ON TOP OF VAN	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: 16WC05453K



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NEW CLAIMS

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		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05453K	DELLANO, STEPHANIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION TOWNSHIP BOARD OF E	EDU(2/5/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING OUT OF CAR SLIPPED	D ON ICE AND FELL INJURED L HIP	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: 16WC0	5454Y								
16WC05454Y	MONDANARO, MARGARET 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN M. BAILEY SCHOOL	2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER CHILDS FOOT	SITTING ON FLOOR AND FELL INJURED 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: 16WC0	5455K								
16WC05455K	LEDFORD, GERI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOT UP FROM DESK TO WALK	OVER TO PRINTER FOOT CAUGHT ON CARPET	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: 16WC05456W





NEW CLAIMS

February 2016

rebluary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05456W								
16WC05456W	KERR, NATHAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON TRANSPORTAT	ION D 2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS WORKING ON VEHICLE,	HE SLIPPED ON WOODEN STOOL STRUCK L 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: 16WC	05457Y								
16WC05457Y	JONES, CRAIG 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARSONS SCHOOL	2/8/2016 2/8/2016 Open	18.40	243.00	0.00	0.00	0.00	0.00	0.00	261.40
FIXING A PIPE & A PIECE OF I	METAL GOT INTO HIS RT EYE	2,481.60	2.00	0.00	0.00	0.00	0.00	0.00	2,483.60
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		18.40	243.00	0.00	0.00	0.00	0.00	0.00	261.40
		2,481.60	2.00	0.00	0.00	0.00	0.00	0.00	2,483.60
Claim Number: 16WC	05458B								
16WC05458B	BISCHOFF, JACQUELINE 11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PINELANDS JR HIGH SCHOOL	2/4/2016 2/8/2016 3/ 9/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING STUDENTS CHAIR, S	SHE BENT HER KNEES TO LIFT CHAIR INJURED LO	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: 16WC05460W



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NEW CLAIMS

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rebluary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - Wo	ORKERS' COMPENSATION C05460W								
16WC05460W	GIORDANO, ELENA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FAIR LAWN H.S.	2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLEANING OFF TABLES AND	SLIPPED ON CARROTS AND FELL INJURED MID E	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05461B								
16WC05461B	SINGALEWITCH, ROSEMARIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLONIA HIGH SCHOOL	2/2/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON MAT AT ENTRA	NCE AND FELL ON BOTH KNEES	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05462W								
16WC05462W	FEULNER, JULIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VALLEY PROGRAM	2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING MATERIALS OFF TA	ABLE STUDENT REACHED OVER AND BIT R FORE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05463K



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NEW CLAIMS

February 2016

. oz.iaa. y 20.10		Med/BI	/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov In	curred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Stat		Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		O	ut Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0										
16WC05463K	QUINLAN, FREDERICK	11 2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNT HOREB ES	2/4/2016 2/5/2016 Ope	n	100.35	243.00	0.00	0.00	0.00	0.00	0.00	343.35
LIFTING UP A LUNCH TABLE, T	HE TABLE JAMMED CAUSING HIM TO	INJURE HI 2,	399.65	2.00	0.00	0.00	0.00	0.00	0.00	2,401.65
Total by Claim Number 1	Claim	2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			100.35	243.00	0.00	0.00	0.00	0.00	0.00	343.35
		2,	399.65	2.00	0.00	0.00	0.00	0.00	0.00	2,401.65
Claim Number: 16WC0	5464Y									
16WC05464Y	SULLIVAN, JOANN	11 2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/8/2016 2/8/2016 Ope	n :	299.47	243.00	0.00	0.00	0.00	0.00	0.00	542.47
STUDENT HAVING A BEHAVIOR	RAL GRABBED HER RT PINKY FINGER	, CAUSING 2,	200.53	2.00	0.00	0.00	0.00	0.00	0.00	2,202.53
Total by Claim Number 1	Claim	2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			299.47	243.00	0.00	0.00	0.00	0.00	0.00	542.47
		2,	200.53	2.00	0.00	0.00	0.00	0.00	0.00	2,202.53
Claim Number: 16WC0	5465K									
16WC05465K	SALAS, GLORIA	11 2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	2/4/2016 2/4/2016 Ope	n	976.98	243.00	0.00	0.00	0.00	0.00	0.00	1,219.98
SLIPPED & FELL INJURING RT	SHOULDER, RT KNEE, HEAD & RT SID	E OF BOD 1,	523.02	2.00	0.00	0.00	0.00	0.00	0.00	1,525.02
Total by Claim Number 1	Claim	2,	500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			976.98	243.00	0.00	0.00	0.00	0.00	0.00	1,219.98
		1.	523.02	2.00	0.00	0.00	0.00	0.00	0.00	1,525.02

Claim Number: 16WC05466W





NEW CLAIMS

February 2016

1 editially 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05466W	BRYANT, ANTONETT 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THUR GOOD MARSHALL ES	2/9/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS DOING CIRCLE TIME WITH	SPEC ED STUDENT AND THE STUDENT ST	AR 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: 16WC05	5467W								
16WC05467W	SCHWAILIK, PATRECIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAKESIDE MS	2/5/2016 2/5/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HER FOOT GOT CAUGHT ON A	BOX OF PAPER CAUSING HER TO FALL, IN	JURI 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: 16WC05	5468Y								
16WC05468Y	GERMADNIG, TANIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAND O PINES SCHOOL	2/9/2016 2/9/2016 Open	1,154.93	243.00	0.00	0.00	0.00	0.00	0.00	1,397.93
HELPING STUDENT OFF FLOOR	HAVING A TANTRUM INJURED BACK AND	GRC 1,345.07	2.00	0.00	0.00	0.00	0.00	0.00	1,347.07
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
•		1,154.93	243.00	0.00	0.00	0.00	0.00	0.00	1,397.93
		1,345.07	2.00	0.00	0.00	0.00	0.00	0.00	1,347.07

Claim Number: 16WC05469Y



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NEW CLAIMS

February 2016

. osrauly 2 010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORI Claim Number: 16WC05										
16WC05469Y	HORSEMAN, IRENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HALEYVILLE-MAURICETOWN E.S.	S. 2/5/2016 2/9/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKED ON EDGE OF SIDEWAL	K FOOT SLIPPED OFF SIDEW	ALK TWISTED 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: 16WC054	470K									
16WC05470K	ZAHN, ROBIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTION	2/8/2016 2/9/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DRIVING BUS WHEN STUDENT V	ALKED UP AND BIT HER L H	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: 16WC054	471W									
16WC05471W	KANN, JESSICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	2/8/2016 2/9/2016	Open	79.03	243.00	0.00	0.00	0.00	0.00	0.00	322.03
WAS SCRATCHED ON R SIDE OF	FACE BY STUDENT		2,420.97	2.00	0.00	0.00	0.00	0.00	0.00	2,422.97
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			79.03	243.00	0.00	0.00	0.00	0.00	0.00	322.03
			2,420.97	2.00	0.00	0.00	0.00	0.00	0.00	2,422.97

Claim Number: 16WC05472Y



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NEW CLAIMS

February 2016

Testuary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - W Claim Number: 16W	ORKERS' COMPENSATION C05472Y								
16WC05472Y	VASSELL, LIONEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INDIAN HILL E.S.	2/5/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE SHOVELING SNOW F	ELT PAIN IN R SHOULDER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Numbe	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W	C05473K								
16WC05473K	BELLINA, LOUIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	2/9/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS IN CAR ACCIDENT WHI	ILE DRIVING WORK VEHICLE INJURED NECK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Numbe	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W	C05474W								
16WC05474W	DOMBROWSKI, LOUIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH HS	2/5/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING 50 LB BAGS, PLACIN	NG 2 @ A TIME INTO THE SALTER, REPEATED ACT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Numbe	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05475M





NEW CLAIMS

February 2016

1 editally 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05475M								
16WC05475M	KEEFE, MARGARET 10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
BANKBRIDGE REG DEVELOPMENT	MENT. 2/5/2016 2/9/2016 Open	166.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,359.95
BENT DOWN TO ASSIST STUD	DENT ON BUS, STUDENT GRABBED HER HAIR AN	2,333.05	0.00	0.00	0.00	0.00	0.00	0.00	2,333.05
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
		166.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,359.95
		2,333.05	0.00	0.00	0.00	0.00	0.00	0.00	2,333.05
Claim Number: 16WC	05477Y								
16WC05477Y	CASTELLANO, JENNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN HILL ES	2/8/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO STOP A STUDENT	FROM BITING HIMSELF, SHE WAS BIT ON LT TH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	05478Y								
16WC05478Y	RAULINABICH, DONALD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAINTENANCE BUILDING	2/8/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REPAIRING A STEAM LEAK HE	E HIT HIS HEAD ON THE PIPE CAUSING A LACERA	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: 16WC05480B



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NEW CLAIMS

February 2016

. ozradiy 2 010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05480B	SKINNER, STEPHEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	2/2/2016 2/9/2016 Open	12.10	243.00	0.00	0.00	0.00	0.00	0.00	255.10
SLIPPED ON ICE AND FELL INJ	URY HEAD, BACK, R LEG, R KNEE	2,487.90	2.00	0.00	0.00	0.00	0.00	0.00	2,489.90
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		12.10	243.00	0.00	0.00	0.00	0.00	0.00	255.10
		2,487.90	2.00	0.00	0.00	0.00	0.00	0.00	2,489.90
Claim Number: 16WC0	5481Y								
16WC05481Y	MADARIAGA, TERESA 11	3,500.00	243.00	0.00	0.00	0.00	0.00	0.00	3,743.00
ROOSEVELT SCHOOL	2/5/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LEAVING BLDG FELL DOWN ST	TAIRS INJURED R KNEE, BACK, L FOREARM, L O	3,500.00	0.00	0.00	0.00	0.00	0.00	0.00	3,500.00
Total by Claim Number 1	Claim	3,500.00	243.00	0.00	0.00	0.00	0.00	0.00	3,743.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		3,500.00	0.00	0.00	0.00	0.00	0.00	0.00	3,500.00
Claim Number: 16WC0	5482V								
16WC05482V	FINERAN, MELISSA 10	14,000.00	1,193.00	31,000.00	0.00	0.00	0.00	0.00	46,193.00
TRANSPORTATION	2/3/2016 2/9/2016 Open	265.91	1,193.00	2,223.88	0.00	0.00	0.00	0.00	3,682.79
WALKING DOWN BUS STEPS S	LIPPED ON WET STEP AND FELL INJURED L FO	13,734.09	0.00	28,776.12	0.00	0.00	0.00	0.00	42,510.21
Total by Claim Number 1	Claim	14,000.00	1,193.00	31,000.00	0.00	0.00	0.00	0.00	46,193.00
		265.91	1,193.00	2,223.88	0.00	0.00	0.00	0.00	3,682.79
		13,734.09	0.00	28,776.12	0.00	0.00	0.00	0.00	42,510.21

Claim Number: 16WC05483K



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NEW CLAIMS

February 2016

. ozradny 20 10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	Cov Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date State		Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION 05483K								
16WC05483K	PETERS, LISA	11 0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ROBBINSVILLE HS	2/8/2016 2/9/2016 3/ 7/2	2016 0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DOOR SLAMMED ON R RING	FINGER ENTERING BATHROOM	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: 16WC	05484K								
16WC05484K	PFAU, BRENDA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL HS	2/5/2016 2/10/2016 Oper	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHARERONING SKI TRIP WA	S CUT OFF BY STUDENT ON SNOW BOA	RD AND 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: 16WC	05485W								
16WC05485W	TAURIELLO, DIANA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTE	R 2/8/2016 2/10/2016 Oper	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR	RAL ISSUE BIT HER R POINTER 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: 16WC05486W



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NEW CLAIMS

February 2016

1 001441		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05486W								
16WC05486W	ADAMS, THERESA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARK AVENUE SCHOOL	2/9/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING OVER TO CLOSE W	INDOW IT SLAMMED DOWN ON R HAND INDEX FI	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: 16WC	05488W								
16WC05488W	TOTO, ERICA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHATHAM MS	2/9/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WENT TO OPEN DOOR NAIL V	VAS STICKING OUT OF DOOR CUT R PINKY FING	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: 16WC	05490B								
16WC05490B	VANAMAN, EDWARD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN FENWICK E S	2/4/2016 2/5/2016 Open	205.25	243.00	0.00	0.00	0.00	0.00	0.00	448.25
CARRYING A STUDENT THAT	WAS HAVING A BEHAVIORAL, HE FELT PAIN IN H	2,294.75	2.00	0.00	0.00	0.00	0.00	0.00	2,296.75
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		205.25	243.00	0.00	0.00	0.00	0.00	0.00	448.25
		2,294.75	2.00	0.00	0.00	0.00	0.00	0.00	2,296.75

Claim Number: 16WC05491Y



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NEW CLAIMS

February 2016

. os.aa.y 2 0.0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	RKERS' COMPENSATION 05491Y								
16WC05491Y	HALBRUNER, COLBY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GEORGE E BAILEY M.S.	2/8/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING A STUDENT HA	VING A BEHAVIORAL PULLING & KICKING INJU	RI 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: 16WC	05492K								
16WC05492K	ROSA, DEBORAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 9	2/9/2016 2/9/2016 Open	21.39	243.00	0.00	0.00	0.00	0.00	0.00	264.39
REPORTING TO WORK SHE FI	ELL ON ICE INJURING HER LT HAND, ELBOW, S	H 2,478.61	2.00	0.00	0.00	0.00	0.00	0.00	2,480.61
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		21.39	243.00	0.00	0.00	0.00	0.00	0.00	264.39
		2,478.61	2.00	0.00	0.00	0.00	0.00	0.00	2,480.61
Claim Number: 16WC	05493B								
16WC05493B	MECHLOWITZ, SHARON 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	R 2/9/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT KNOCKED	OVER A BIG TABLE CAUSING CLMT TO FALL 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: 16WC05494K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out Rsv	Out RSV	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05494K	GALLO, MARYLU 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARK AVENUE SCHOOL	2/9/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO BUS IN THE HALL	WAY SPEC ED STUDENT BIT CLMT'S RT THUN	1E 2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	l Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5495K								
16WC05495K	TRUAX, NANCI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MULLICA TWP MS	2/5/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS WALKING TOWARD	S THE BLDG SLIPPED AND FELL ON WET SLU	Sł 2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	l Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5496K								
16WC05496K	BROOKS, MONTY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN HIGH SCHOOL	2/9/2016 2/9/2016 Open	467.64	243.00	0.00	0.00	0.00	0.00	0.00	710.64
SLIPPED ON ICE CAUSING HIS	RT KNEE TO TWIST WHILE WALKING DOWN T	H 2,032.36	2.00	0.00	0.00	0.00	0.00	0.00	2,034.36
Total by Claim Number	I Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		467.64	243.00	0.00	0.00	0.00	0.00	0.00	710.64
		2,032.36	2.00	0.00	0.00	0.00	0.00	0.00	2,034.36

Claim Number: 16WC05497W



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NEW CLAIMS

February 2016

Tebluary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out Rsv	Out RSV	Out RSV	Out Rsv	Out Rsv	Out RSV	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05497W	DEJESUS, ROSSI 11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
IGNACIO CRUZ EARLY CHILDH	OOE 2/8/2016 2/8/2016 3/ 4/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A HEAVY BAG FELL FROM A HI	GH SHELF & HIT HER ON HER RT WRIST	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: 16WC0	5498K								
16WC05498K	JAEGER, KATI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROXBURY HS	2/10/2016 2/10/2016 Open	170.33	243.00	0.00	0.00	0.00	0.00	0.00	413.33
OPENING A CABINET DOOR PA	PER CUTTER WAS ON TOP AND FELL HITTING	2,329.67	2.00	0.00	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	0.00	2,745.00
		170.33	243.00	0.00	0.00	0.00	0.00	0.00	413.33
		2,329.67	2.00	0.00	0.00	0.00	0.00	0.00	2,331.67
Claim Number: 16WC0	5499W								
16WC05499W	LONERGAN, KATHERINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN HILLS ACADEMY	2/9/2016 2/10/2016 Open	569.42	243.00	0.00	0.00	0.00	0.00	0.00	812.42
WAS BITTEN ON R HAND BY ST	TUDENT HAVING AN OUTBURST	1,930.58	2.00	0.00	0.00	0.00	0.00	0.00	1,932.58
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		569.42	243.00	0.00	0.00	0.00	0.00	0.00	812.42
		1,930.58	2.00	0.00	0.00	0.00	0.00	0.00	1,932.58

Claim Number: 16WC05500Y



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NEW CLAIMS

February 2016

1 03.144.19 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05500Y								
16WC05500Y	ROSANIA, TERRIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FM BURD E.S.	2/9/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS HEAD BUTTED ON R PIN	KY FINGER BY STUDENT HAVING AN OUTBURST	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: 16WC0	05501B								
16WC05501B	LARSEN, KAREN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVEL LC - NEW PROVIDENCE	E 2/9/2016 2/10/2016 Open	15.88	243.00	0.00	0.00	0.00	0.00	0.00	258.88
STUDENT GRABBED HER BY 1	THE HEAD AND L ARM KNOCKED OUT DENTAL A	2,484.12	2.00	0.00	0.00	0.00	0.00	0.00	2,486.12
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		15.88	243.00	0.00	0.00	0.00	0.00	0.00	258.88
		2,484.12	2.00	0.00	0.00	0.00	0.00	0.00	2,486.12
Claim Number: 16WC0	05502Y								
16WC05502Y	NEIDIG, ALEXANDRA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TERRILL MS	2/8/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GRABBING WORK PAPERS OF	F THE PRINTER HER HAND STRUCK SIDE OF 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: 16WC05503B



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NEW CLAIMS

February 2016

1 03.144.19 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORk Claim Number: 16WC05									
16WC05503B	MAZZONE, FRANCINE 11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
POND ROAD MIDDLE SCHOOL	2/9/2016 2/9/2016 3/ 7/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT ACCIDENTALLY PUSH	ED THE DOOR HITTING HER NOSE	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: 16WC05	504Y								
16WC05504Y	WHITESCARVER, ERIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARY VOLZ SCHOOL	2/1/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING A CHILD & TWISTE	ED HER LT 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: 16WC05	505W								
16WC05505W	KATZ-BALLMAN, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JEFFERSON SCHOOL	2/9/2016 2/9/2016 Open	27.90	243.00	0.00	0.00	0.00	0.00	0.00	270.90
STUDENT PUSHED HER CAUSING	G HER TO FALL & INJURE HER LOWER BACK (2,472.10	2.00	0.00	0.00	0.00	0.00	0.00	2,474.10
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		27.90	243.00	0.00	0.00	0.00	0.00	0.00	270.90
		2,472.10	2.00	0.00	0.00	0.00	0.00	0.00	2,474.10

Claim Number: 16WC05506Y



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NEW CLAIMS

February 2016

Testuary 2010		Med/BI/Con	np Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Co	ov Incurre	ed Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Statu	s Pa Out R		Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Dut Rsv
	DRKERS' COMPENSATION 05506Y SWEARINGEN, REGINA 2/9/2016 2/11/2016 Open	11 2,500.0 0.0		0.00	0.00	0.00	0.00	0.00 0.00	2,745.00 243.00
CUTTING CUCUMBERS CUT F Total by Claim Number		2,500.0 2,500 .0		0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	2,502.00 2,745.00
		0.0 2,500.0		0.00 0.00	0.00 0.00	0.00	0.00 0.00	0.00 0.00	243.00 2,502.00
Claim Number: 16WC	05507B								
16WC05507B AMERIGO A ANASTASIA STUDENT BEHIND HER TRIPF Total by Claim Number	PANIZZI, MARIA 2/9/2016 2/11/2016 Open PED HER SHE FELL INJURED L HAND/WR 1 Claim	11 2,500.0 761.3 IST 1,738.6 2,500.0 761.3 1,738.6	243.00 32 2.00 30 245.00 38 243.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	2,745.00 1,004.38 1,740.62 2,745.00 1,004.38 1,740.62
Claim Number: 16WC	05508W								
16WC05508W SCHOOL 2 TRYING TO PUT STUDENTS O Total by Claim Number	SALES, KAREN 2/9/2016 2/10/2016 Open COAT ON WS BITTEN ON LFOREARM 1 Claim	11 2,500.0 0.0 2,500.0 2,500.0 0.0 2,500.0	243.00 2.00 2.00 245.00 243.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	2,745.00 243.00 2,502.00 2,745.00 243.00 2,502.00

Claim Number: 16WC05509B



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NEW CLAIMS

February 2016

. ozradiy 20 10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid [:] Out Rsv
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05509B	LOPEZ, DAYANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS EDISON SCHOOL	2/9/2016 2/10/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING OUTBURST	TWISTED 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: 16WC05	5510B									
16WC05510B	FERRO, TERRI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E BRUNSWICK H. S.	2/9/2016 2/10/2016	Open	34.28	243.00	0.00	0.00	0.00	0.00	0.00	277.28
CARRYING CUP FO TEA IN PAR	KING LOT SLIPPED ON BLACK	ICE BURNED HE	2,465.72	2.00	0.00	0.00	0.00	0.00	0.00	2,467.72
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			34.28	243.00	0.00	0.00	0.00	0.00	0.00	277.28
			2,465.72	2.00	0.00	0.00	0.00	0.00	0.00	2,467.72
Claim Number: 16WC05	5512Y									
16WC05512Y	GOLDBERG, ROBIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL MIDDLE SCHOOL	2/9/2016 2/10/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER HER FEET HITT	IG THE WHITEBORAD WITH HE	ER 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: 16WC05514K



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Slaims Vou must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 03.144.19 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	PRKERS' COMPENSATION 05514K								
16WC05514K	LUPO, ANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TUCKERTON ES	2/9/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS WHE	N SHE MISSED A STEP AND FELL INJURED L AN	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: 16WC0	05515Z								
16WC05515Z	MCGRAW, SHEILA 11	2,500.00	245.00	1,392.00	0.00	0.00	0.00	0.00	4,137.00
CAPE MAY CTY SPEC SERVIC	ES H: 2/10/2016 2/11/2016 Open	210.16	243.00	497.14	0.00	0.00	0.00	0.00	950.30
WAS SITTING ON MAT AND ST	TUDENT GRABBED HER BY HAIR AND PULLED B#	2,289.84	2.00	894.86	0.00	0.00	0.00	0.00	3,186.70
Total by Claim Number	1 Claim	2,500.00	245.00	1,392.00	0.00	0.00	0.00	0.00	4,137.00
		210.16	243.00	497.14	0.00	0.00	0.00	0.00	950.30
		2,289.84	2.00	894.86	0.00	0.00	0.00	0.00	3,186.70
Claim Number: 16WC0	05516Z								
16WC05516Z	EISENBERG, HENRY 10	2,500.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	5,435.00
WALTER O KRUMBIEGEL ES	2/11/2016 2/11/2016 Open	12.12	1,193.00	1,368.68	0.00	0.00	0.00	0.00	2,573.80
TRIPPED OVER A METAL STRI	IP AND FELL INJURED BOTH ELBOWS	2,487.88	0.00	373.32	0.00	0.00	0.00	0.00	2,861.20
Total by Claim Number	1 Claim	2,500.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	5,435.00
		12.12	1,193.00	1,368.68	0.00	0.00	0.00	0.00	2,573.80
		2,487.88	0.00	373.32	0.00	0.00	0.00	0.00	2,861.20

Claim Number: 16WC05517Y



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claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

. os. aa. y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05517Y								
16WC05517Y	GUIRGUIS, SAMIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRANT SCHOOL	2/2/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING FIRE DRILL SLIPPED	ON ICE AND FELL L ANKLE TWISTED	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: 16WC	05518Y								
16WC05518Y	GENEROSO, SUSAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFWOOD AVENUE ES	2/9/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE TRIPPED BY A	STUDENT AND FELL INJURED R ANKLE, 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: 16WC	05519Z								
16WC05519Z	GLOWACKI, JANUSZ 10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
MEMORIAL SCHOOL	2/10/2016 2/11/2016 Open	361.21	243.00	0.00	0.00	0.00	0.00	0.00	604.21
GOING DOWN STEPS MISSED	A STEP AND FELL INJURED LOWER BACK	2,138.79	950.00	0.00	0.00	0.00	0.00	0.00	3,088.79
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
		361.21	243.00	0.00	0.00	0.00	0.00	0.00	604.21
		2,138.79	950.00	0.00	0.00	0.00	0.00	0.00	3,088.79

Claim Number: 16WC05520K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION 05520K								
16WC05520K	BRACE, SHANNON 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT E.S.	2/10/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUTTING DUCT TAPE FOR CI	LASS PROJECT CUT L RING FINGER WITH SCISS(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: 16WC	C05521W								
16WC05521W	MEDINA, MARIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/8/2016 2/11/2016 Open	10.82	243.00	0.00	0.00	0.00	0.00	0.00	253.82
WASHING WINDOWS USING	A STEP LADDER, SHE FELL INJURED R ARM	2,489.18	2.00	0.00	0.00	0.00	0.00	0.00	2,491.18
Total by Claim Number	· 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		10.82	243.00	0.00	0.00	0.00	0.00	0.00	253.82
		2,489.18	2.00	0.00	0.00	0.00	0.00	0.00	2,491.18
Claim Number: 16WC	C05522W								
16WC05522W	LUNA, CONNIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EDMUND HMIELESKI	2/9/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING CHILD WITH THEI	IR SHOE LACES, SHE TRIPPED OVER THEIR SHOE	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: 16WC05523Y



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NEW CLAIMS

February 2016

1 editally 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	DRKERS' COMPENSATION 05523Y								
16WC05523Y	BARRY, CYNTHIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POINT PLEASANT HS	2/9/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	ORAL BIT HER ON THE RT FOREARM, BREAKING	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: 16WC	05524W								
16WC05524W	RUSSO, RENEE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAND O PINES SCHOOL	2/10/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND	D FELL INJURING R HAND, R ARM, L LEG, LOWER	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: 16WC	05525Y								
16WC05525Y	DIBENEDETTO, ARMAND 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INST	TITUT 2/9/2016 2/10/2016 Open	60.65	243.00	0.00	0.00	0.00	0.00	0.00	303.65
LIFTING & MOVING BOXES, BR	ROKE OUT IN A RASH ON HIS LT ARM, LT ELBOW	2,439.35	2.00	0.00	0.00	0.00	0.00	0.00	2,441.35
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		60.65	243.00	0.00	0.00	0.00	0.00	0.00	303.65
		2,439.35	2.00	0.00	0.00	0.00	0.00	0.00	2,441.35

Claim Number: 16WC05526K



-513/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 ob. daily 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05526K								
16WC05526K	SIMON, DARLENE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARL SANDBURG MS	2/10/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PASSING STUDENT IN H	IALLWAY STUDENT RAN INTO HER HITTING HER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	05528Y								
16WC05528Y	NAGEL, THEODORE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/10/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT GRABBED HIS LT A	RM & HAND & PUNCHED HIM IN HIS LT SHOULDE	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: 16WC	05529K								
16WC05529K	DEVINE, REBECCA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY EARLY CHILDHOOD	OCTR 2/10/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	DRAL JUMPED INTO HER & BIT HER ON THE ABD(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: 16WC05530W



-523/9/2016
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NEW CLAIMS

February 2016

. ozraci y 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05530W	VENNELL, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH EAST HS	2/10/2016 2/11/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING ON BENCH DUSTING	OFF TOP OF LOCKERS BENCH F	LIPPED UP 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: 16WC05	5531W									
16WC05531W	BRINDISI, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELAWARE VALLEY REG HS	2/8/2016 2/8/2016 C	pen	28.94	243.00	0.00	0.00	0.00	0.00	0.00	271.94
ADJUSTING A LARGE JACK & IN	JURED HIS LOWER BACK		2,471.06	2.00	0.00	0.00	0.00	0.00	0.00	2,473.06
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			28.94	243.00	0.00	0.00	0.00	0.00	0.00	271.94
			2,471.06	2.00	0.00	0.00	0.00	0.00	0.00	2,473.06
Claim Number: 16WC05	5532W									
16WC05532W	SZELINGIEWICZ, FRANK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JONATHAN DAYTON H.S.	2/10/2016 2/11/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REACHING IN BOX TO GET A PA	AIR OF GLOVES A PIECE OF GLAS	S IN BAG CUT	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: 16WC05533Y



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NEW CLAIMS

February 2016

. ozraci y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05533Y	RAPKIN, HELAINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TEANECK COMMUNTIY CHARTE	ER § 2/10/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR FROM	I SNOW AND FELL INJURING L FOOT/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: 16WC05	5534K								
16WC05534K	MORRIS, MARK 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL M S	2/11/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIDING MANHOLE OVER DUE	TO BACKED UP SEWAGE, SOME SEWAGE GOT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC05	5536Y								
16WC05536Y	PASQUA, STEPHEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	2/3/2016 2/3/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING A MOBILE ALIGMENT O	COMPUTER IN A CART ON WHEELS, HE FELT A	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: 16WC05537W



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NEW CLAIMS

February 2016

1 00.1dd. y 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05537W								
16WC05537W	RUCKI, RANDI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	G CTI 2/9/2016 2/9/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT SWUNG THEIR ARM	AROUND ACCIDENTALLY HITTING HER IN THE 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: 16WC0	05538K								
16WC05538K	ZELLERS, STEVEN 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. 2/10/2016 2/10/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP A FIGHT BETWE	EEN 2 STUDENTS WHEN HE STRAINED THE LT 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: 16WC0	05539B								
16WC05539B	HALEY, BILAR 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SILVER RUN ES	2/2/2016 2/12/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS LIFTING HEAVY BO	OXES OF COPY PAPER WHEN SHE FELT A PAIN 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: 16WC05540Z



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NEW CLAIMS

February 2016

-		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	DRKERS' COMPENSATION 05540Z								
16WC05540Z	MEDINA, IRIS 14	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	2/5/2016 2/12/2016 Open	199.50	243.00	0.00	0.00	0.00	0.00	0.00	442.50
WALKING IN CAFETERIA SLIP	PED AND FELL ON WET FLOOR INJ RT FOOT, LT	2,300.50	2.00	0.00	0.00	0.00	0.00	0.00	2,302.50
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		199.50	243.00	0.00	0.00	0.00	0.00	0.00	442.50
		2,300.50	2.00	0.00	0.00	0.00	0.00	0.00	2,302.50
Claim Number: 16WC	05541B								
16WC05541B	BIONDOLILLO, MARGHERITA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/10/2016 2/12/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A STUDENT WAS RUNNING O	UT OF THE CAFETERIA EXIT WHEN CLMT RAN AF	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: 16WC	05542K								
16WC05542K	MISURELL, MICHAEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/11/2016 2/12/2016 Open	768.34	243.00	0.00	0.00	0.00	0.00	0.00	1,011.34
WALKING DOWN STAIRS MISS	SED A STEP AND FELL INJURED L ELBOW/ARM	1,731.66	2.00	0.00	0.00	0.00	0.00	0.00	1,733.66
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		768.34	243.00	0.00	0.00	0.00	0.00	0.00	1,011.34
		1,731.66	2.00	0.00	0.00	0.00	0.00	0.00	1,733.66

Claim Number: 16WC05543K



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NEW CLAIMS

February 2016

. oblidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF									
16WC05543K	VITALE, ANTHONY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPMI	ENT. 2/11/2016 2/12/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVIN	IG AN OUTBURST STUDENT BIT HIS 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: 16WC0	5545B								
16WC05545B	O'DONNELL, BARBARA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRADLEY GARDENS E S	2/11/2016 2/12/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SAT BACK IN ROLLING CHAIR A	AS CHAIR ROLLED BACK CAUSED HER TO 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: 16WC0	5546M								
16WC05546M	MARTELLI, LUCILLE 10	2,500.00	245.00	7,000.00	0.00	0.00	0.00	0.00	9,745.00
WAYNE HILLS H.S.	2/11/2016 2/11/2016 Open	0.00	243.00	1,659.32	0.00	0.00	0.00	0.00	1,902.32
GETTING UP FROM BUS SEAT	THE SEAT BELT GOT TANGLED AROUND LT AN	2,500.00	2.00	5,340.68	0.00	0.00	0.00	0.00	7,842.68
Total by Claim Number 1	Claim	2,500.00	245.00	7,000.00	0.00	0.00	0.00	0.00	9,745.00
		0.00	243.00	1,659.32	0.00	0.00	0.00	0.00	1,902.32
		2,500.00	2.00	5,340.68	0.00	0.00	0.00	0.00	7,842.68

Claim Number: 16WC05547B



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NEW CLAIMS

February 2016

1 03.1dd. y 20.10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Major Coverage: 10 - WORKE Claim Number: 16WC05547 16WC05547B	7B CLAPP, HEATHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON CENTRAL REG HS WAS GETTING THINGS OUT OF HEF	2/12/2016 2/12/2016	Open	1,883.86 616.14	243.00 2.00	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	2,126.86 618.14
Total by Claim Number 1 Clai		ON THE FRANCE	2,500.00 1,883.86 616.14	245.00 243.00 2.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	2,745.00 2,126.86 618.14
Claim Number: 16WC05548	3J									
16WC05548J BAYONNE H.S. AND ADMIN. OFFICE WHILE MAKING A RADIATOR COVER		10 Open SLE SAW CUT TIF	22,500.00 0.00 22,500.00	1,193.00 243.00 950.00	15,000.00 2,309.62 12,690.38	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	38,693.00 2,552.62 36,140.38
Total by Claim Number 1 Clai	im		22,500.00 0.00 22,500.00	1,193.00 243.00 950.00	15,000.00 2,309.62 12,690.38	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	38,693.00 2,552.62 36,140.38
Claim Number: 16WC05549	ev .									
16WC05549V SOUTH ORANGE JUNIOR HIGH SCH CLMT WAS MOVING HEAVY BOXES Total by Claim Number 1 Clair	FROM ONE OFFICE TO AN	10 Open OTHER FELT PA	14,500.00 0.00 14,500.00 14,500.00 0.00	1,195.00 243.00 952.00 1,195.00 243.00	14,000.00 1,990.86 12,009.14 14,000.00 1,990.86	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	29,695.00 2,233.86 27,461.14 29,695.00 2,233.86
			14,500.00	952.00	12,009.14	0.00	0.00	0.00	0.00	27,461.14

Claim Number: 16WC05550V



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NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Claim Number: 16WC0 16WC05550V WINSLOW TWP M.S.	NEIRA, CARMELLA 2/11/2016 2/12/2016 'AY ENTRANCE DID NOT REALIZE	10 Open THERE WAS A	14,500.00 251.27 14,248.73 14,500.00 251.27	1,195.00 1,193.00 2.00 1,195.00 1,193.00	22,508.00 638.50 21,869.50 22,508.00 638.50	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	38,203.00 2,082.77 36,120.23 38,203.00 2,082.77
Claim Number: 16WC0	95551B		14,248.73	2.00	21,869.50	0.00	0.00	0.00	0.00	36,120.23
16WC05551B MATAWAN REGIONAL HS SAWING A PIECE OF WOOD IN Total by Claim Number	ANZANO, ALBERT 2/11/2016 2/12/2016 I WOOD SHOP CLASSROOM CUT I 1 Claim	11 Open RT THUMB ON	2,500.00 14.60 2,485.40 2,500.00	245.00 243.00 2.00 245.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	2,745.00 257.60 2,487.40 2,745.00
			14.60 2,485.40	243.00 2.00	0.00 0.00	0.00 0.00	0.00 0.00	0.00	0.00 0.00	257.60 2,487.40
Claim Number: 16WC0	95552Y									
16WC05552Y WARREN DEVELOP. LEARNING CLMT WAS ASSISTING STUDE	KOSTER, NANCY G CTI 2/11/2016 2/12/2016 NT DURING A BEHAVIOR ISSUE W	11 Open /AS HEAD BUT	2,500.00 0.00 2,500.00	245.00 243.00 2.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	2,745.00 243.00 2,502.00
Total by Claim Number	1 Claim		2,500.00 0.00 2,500.00	245.00 243.00 2.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	2,745.00 243.00 2,502.00

Claim Number: 16WC05553B



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NEW CLAIMS

February 2016

. os.aa.y 2 0.0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05553B								
16WC05553B	BANAS, CHRISTINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DONALD A QUARLES ES	2/11/2016 2/12/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT WAS ON A	SCOOTER IN THE HALLWAY RAN INTO CLMT 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: 16WC0	95554K								
16WC05554K	ROSENBERG, EVELYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FIRST BAPTIST PRE-SCHOOL	2/10/2016 2/12/2016 Open	20.07	243.00	0.00	0.00	0.00	0.00	0.00	263.07
STEPPED IN BETWEEN THE C	EMENT PATHWAY AND GRAVEL ROCKS ON THE	2,479.93	2.00	0.00	0.00	0.00	0.00	0.00	2,481.93
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		20.07	243.00	0.00	0.00	0.00	0.00	0.00	263.07
		2,479.93	2.00	0.00	0.00	0.00	0.00	0.00	2,481.93
Claim Number: 16WC0	05555Y								
16WC05555Y	LAW, HOLLY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DICKERSON ES	2/11/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ON MAIL RUN, CAUGHT FOOT	ON MAT OUTSIDE ENTRANCE AND FELL ON 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: 16WC05557B



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NEW CLAIMS

February 2016

1 02.1daily 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
		Out Nav	Out Nov	Out Nov	Out Nev	Out Nev	Out Nov	Out Nsv	- Out Nov
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05557B	STEPHEN, NICOLE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/12/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TEACHING AND COLLECTING BA	ASKETBALL WHEN A STUDENT ACCIDENTLY JA	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: 16WC05	558W								
16WC05558W	DORWARD, WILLIAM 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SALT BROOK SCHOOL	2/12/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHANGING RAZOR BLADE IN SC	CRAPER HE CUT HIS R 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: 16WC05	559K								
16WC05559K	WALKER, JEAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
METS CHARTER BOE	2/12/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING UP STAIRS SLIPPED A	ND FELL INJURED L WRIST, R KNEE, AND BAC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05560Y



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NEW CLAIMS

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. ozraci y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION C05560Y								
16WC05560Y	WESNER, MARLENE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SLACKWOOD ES	2/10/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING THROUGH PARKIN	IG LOT, TWISTED L ANKLE IN POT HOLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	C05561A								
16WC05561A	MAINIERO, CARISA 10	20,000.00	2,743.00	36,000.00	0.00	0.00	0.00	0.00	58,743.00
NUVIEW ACADEMY	2/15/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT KICKED A BALL HI	TTING HER IN HEAD	20,000.00	2,500.00	36,000.00	0.00	0.00	0.00	0.00	58,500.00
Total by Claim Number	r 1 Claim	20,000.00	2,743.00	36,000.00	0.00	0.00	0.00	0.00	58,743.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		20,000.00	2,500.00	36,000.00	0.00	0.00	0.00	0.00	58,500.00
Claim Number: 16WC	C05562W								
16WC05562W	SCHEIBAL, TRACY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HEDGEPETH-WILLIAMS MIDE	DLE SC 2/10/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTED TO BREAK UP F	FIGHT WAS KNOCKED TO GROUND INJURED LOW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05563K



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NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	PRKERS' COMPENSATION 05563K								
16WC05563K	YACCARINO, ANNMARIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH HS	2/15/2016 2/16/2016 Open	28.23	243.00	0.00	0.00	0.00	0.00	0.00	271.23
TRIPPED OVER CURB SHE FE	ELL INJURED HEAD, R KNEE AND BOTH HANDS	2,471.77	2.00	0.00	0.00	0.00	0.00	0.00	2,473.77
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		28.23	243.00	0.00	0.00	0.00	0.00	0.00	271.23
		2,471.77	2.00	0.00	0.00	0.00	0.00	0.00	2,473.77
Claim Number: 16WC	05564B								
16WC05564B	WISIAK, TARA 11	3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
UNION TOWNSHIP BOARD OF	EDU(2/11/2016 2/16/2016 Open	7.68	243.00	0.00	0.00	0.00	0.00	0.00	250.68
INVOLVED IN MVA TRAVELING	ONE STUDENT TO THE NEXT INJURED MID BAC	3,493.32	0.00	0.00	0.00	0.00	0.00	0.00	3,493.32
Total by Claim Number	1 Claim	3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
		7.68	243.00	0.00	0.00	0.00	0.00	0.00	250.68
		3,493.32	0.00	0.00	0.00	0.00	0.00	0.00	3,493.32
Claim Number: 16WC	05566Y								
16WC05566Y	PAGANO, THOMAS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK REGIONAL HS	2/6/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A CAR STOPPED TO LET HIM	PASS, HE TRIPPED AND FELL INJURED L KNEE A	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: 16WC05567V



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NEW CLAIMS

February 2016

1 estuary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05567V	INGUI, GIUSEPPE 10	15,000.00	1,195.00	10,000.00	0.00	0.00	0.00	0.00	26,195.00
PASSAIC COUNTY TECH. INSTI	TUT 2/16/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SALTING USING A SPREADER O	ON WALKWAY HE FELL INJURED HEAD, LOWE	ER 15,000.00	952.00	10,000.00	0.00	0.00	0.00	0.00	25,952.00
Total by Claim Number 1	Claim	15,000.00	1,195.00	10,000.00	0.00	0.00	0.00	0.00	26,195.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		15,000.00	952.00	10,000.00	0.00	0.00	0.00	0.00	25,952.00
Claim Number: 16WC0	5568V								
16WC05568V	ADELSON, STEPHEN 10	12,001.00	1,193.00	62,366.00	0.00	0.00	0.00	0.00	75,560.00
BLOOMFIELD V.S.	2/11/2016 2/16/2016 Open	0.00	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,677.00
TRIPPED ON A COVER/LEDGE	ON FLOOR HE FELL FRACTURED L KNEE, HIT	TI 12,001.00	0.00	58,882.00	0.00	0.00	0.00	0.00	70,883.00
Total by Claim Number 1	Claim	12,001.00	1,193.00	62,366.00	0.00	0.00	0.00	0.00	75,560.00
		0.00	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,677.00
		12,001.00	0.00	58,882.00	0.00	0.00	0.00	0.00	70,883.00
Claim Number: 16WC0	5569K								
16WC05569K	HERNANDEZ, JAMIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SCHOOL (UNION)	2/16/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLOSING A LARGE GARAGE DO	OOR AND CLOSED DOOR ON 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: 16WC05570W



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NEW CLAIMS

February 2016

1 001uui y 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0										
16WC05570W	BALESTRIERI, SANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	2/16/2016 2/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING ON SOUTH SIDEWAL	K SHE FELL ON ICE INJURED F	R KNEE, 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: 16WC0	5571Y									
16WC05571Y	MURRAY, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/16/2016 2/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR	TRYING TO RESTRAIN STUDEN	T BIT R FOREARI	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: 16WC0	5572B									
16WC05572B	RODRIGUEZ, MARISOL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCOTCH PLAINS-FANWOOD HS	S 2/16/2016 2/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJ	URED BOTH KNEES		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: 16WC05573Y



-653/9/2016
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NEW CLAIMS

February 2016

rebluary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05573Y									
16WC05573Y	JOINER, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EUGENE WILLEY SCHOOL	2/16/2016 2/16/2016 C)pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR DID	NOT FALL INJURED RINNER 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: 16WC0)5574B									
16WC05574B	OKRAGLY, JOANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 2 ES	2/16/2016 2/16/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD WAS HAVING MELTDOV	VN CHILD BENT R RING 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: 16WC0)5575K									
16WC05575K	ANDROSKO, SANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER MIDDLE SCHOOL	DL 2/16/2016 2/16/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET SNOW L KN	EE AND L SHOULDER 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: 16WC05576P



3/9/2016

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NEW CLAIMS

February 2016

1 ebidary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORI Claim Number: 16WC05										
16WC05576P	OSORIO, MARIA	10	75,000.00	1,193.00	33,000.00	0.00	0.00	0.00	0.00	109,193.00
HOPE COMMUNITY CHARTER	2/16/2016 2/17/2016	Open	843.00	1,193.00	576.26	0.00	0.00	0.00	0.00	2,612.26
TEACHING AND SKIPPING WITH	STUDENTS FELT PAIN AND POP	IN L LOWER I	74,157.00	0.00	32,423.74	0.00	0.00	0.00	0.00	106,580.74
Total by Claim Number 1	Claim		75,000.00	1,193.00	33,000.00	0.00	0.00	0.00	0.00	109,193.00
			843.00	1,193.00	576.26	0.00	0.00	0.00	0.00	2,612.26
			74,157.00	0.00	32,423.74	0.00	0.00	0.00	0.00	106,580.74
Claim Number: 16WC05	577W									
16WC05577W	DUMAS, TARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON AVENUE SCHOOL	2/17/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO LOWER BACK V	VHILE RESTRAINING STUDENT F	IAVING AN IS	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: 16WC05	578K									
16WC05578K	VAN-AHNEN, JOHN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUVIEW ACADEMY	2/16/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJU	RED L KNEE GETTING OUT OF C	AR	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: 16WC05579Y



-673/9/2016
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NEW CLAIMS

February 2016

. 05.144.) 20.10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05579Y									
16WC05579Y	POVELL, TRACEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL E.S.	2/16/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLEARING STUDENTS BACKP	ACK OFF STAGE, TRIPPED OVER	R A BACKPACK 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: 16WC	05580B									
16WC05580B	STILES, JASON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHATHAM MS	2/16/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING OUT CAR SLIPPED (ON ICE AND FELL INJURED LOWE	R 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: 16WC	05581W									
16WC05581W	LUKAS, CLAUDIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTFIELD SENIOR HS	2/16/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SHOVELING ICE SLIPPED AND	FELL INJURED HER LOW 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: 16WC05582Y



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NEW CLAIMS

February 2016

1 editually 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION 05582Y								
16WC05582Y	SANTANGELO, RICHARD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORIG. SCHOOL BLD SHORE F	REGIO 2/12/2016 2/17/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS COACHING AND WREST	TLING WITH STUDENT FELT PAIN AND PULL IN R 1	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: 16WC	:05584B								
16WC05584B	DAVIS, DEBORAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIVERA SCHOOL	2/16/2016 2/17/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING AROUND CLASSRO	OOM, TRIPPED OVER CHAIR AND FELL INJURED 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: 16WC	:05585Y								
16WC05585Y	LONG, JONATHAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLENWOOD ES	2/17/2016 2/17/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUNNING AFTER STUDENT S	SLIPPED AND FELL ON WET PAVEMENT 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: 16WC05586W



-693/9/2016
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NEW CLAIMS

February 2016

1 obradily 20 10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05586W	ENGLISH, LACOYA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST AVENUE E.S.	2/16/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVIN	IG BEHAVIORAL ISSUE INJURED B	ACK AND L 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: 16WC0	55871									
16WC05587I	CAAMANO, JUAN	10	13,500.00	245.00	24,640.00	0.00	0.00	0.00	0.00	38,385.00
WDBG TRANSPORTATION DEP	T 2/16/2016 2/17/2016 0	Open	0.00	243.00	626.74	0.00	0.00	0.00	0.00	869.74
WAS INVOLVED IN MVA ROADS	WERE ICY, INJURED HEAD UPPE	R/LOWER BA(13,500.00	2.00	24,013.26	0.00	0.00	0.00	0.00	37,515.26
Total by Claim Number 1	Claim		13,500.00	245.00	24,640.00	0.00	0.00	0.00	0.00	38,385.00
			0.00	243.00	626.74	0.00	0.00	0.00	0.00	869.74
			13,500.00	2.00	24,013.26	0.00	0.00	0.00	0.00	37,515.26
Claim Number: 16WC0	5588Y									
16WC05588Y	ASHED, JILLIAN	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLIFFWOOD AVENUE ES	2/16/2016 2/17/2016 3	3/ 4/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	L ISSUE BIT HER L CALF		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: 16WC05589K



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claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

. osiaa.y 20 10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out NSV	Out Nov	Out Nov	Out Nov	Out its	Out Nov	Out Nsv	
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05589K								
16WC05589K	AYERS, TERRI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLD SPRINGS ES	2/12/2016 2/17/2016 Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
PUSHING CART OUTSIDE DO	OR THE WIND BLEW DOOR AND IT SLAMMED ON	2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
		2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Claim Number: 16WC	05590В								
16WC05590B	GILMORE, MARY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK HS	2/16/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLOSING THE CUSTODIAL CL	OSET DOOR, SHE CAUGHT HER R PINKY FINGEF	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: 16WC	05591B								
16WC05591B	LASALA, AIMEE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PINES LAKE E.S.	2/16/2016 2/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING OUT OF CAR, SLIPP	PED ON ICE AND FELL AGAINST ANOTHER VEHICI	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: 16WC05592W



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NEW CLAIMS

February 2016

. os.aa., 20 .0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05592W								
16WC05592W	MOSS, DANIELLE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS KICKED ON L FOREARM	BY STUDENT HAVING AN OUTBURST	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: 16WC	05593Y								
16WC05593Y	MYERSON, LYNNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOLLWOOD ES	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING ON BENCH AS A BAL	L WAS COMING TOWARDS HER SHE TRIED TO C	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: 16WC	05594B								
16WC05594B	HACKMAN, DEBORAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOWNSHIP HS	2/8/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLING DOWN A PROJECTO	OR SCREEN WAS STRUCK IN 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: 16WC05595B



-723/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 00.1dd. y 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05595B								
16WC05595B	BRUNER, HOWARD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRE CITY ES	2/16/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COMING DOWN LADDER FROM	M ROOF, SLIPPED AND FELL INJURED R ANKLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	95596W								
16WC05596W	FASCIA, MARIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARIA L. VARISCO-ROGERS C	CHAR 2/16/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
AFTER RECESS SLIPPED ON V	NET HALLWAY AND FELL INJURED L ANKLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	95598V								
16WC05598V	FERRARI, STACEY 10	13,500.00	245.00	5,300.00	0.00	0.00	0.00	0.00	19,045.00
CUMBERLAND CAMPUS	2/16/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING STUDENT WHILE AN	OTHER TEACHER WAS PUTTING ON CHILDS SN	13,500.00	2.00	5,300.00	0.00	0.00	0.00	0.00	18,802.00
Total by Claim Number	1 Claim	13,500.00	245.00	5,300.00	0.00	0.00	0.00	0.00	19,045.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		13,500.00	2.00	5,300.00	0.00	0.00	0.00	0.00	18,802.00

Claim Number: 16WC05599Y



-733/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 oz. da. y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05599Y	PAEZ, LUZ 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/10/2016 2/18/2016 Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
STUDENT KICKED HER IN THE F	R KNEE DURING AN OUTBURST	2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
		2,340.00	2.00	0.00	0.00	0.00	0.00	0.00	2,342.00
Claim Number: 16WC05	5600G								
16WC05600G	WAGNER, DEBBIE 10	17,500.00	1,195.00	25,000.00	0.00	0.00	0.00	0.00	43,695.00
DEPT OF TRANSPORTATION (L	JNIC 2/17/2016 2/18/2016 Open	0.00	243.00	1,041.45	0.00	0.00	0.00	0.00	1,284.45
SLIPPED ON ANTI-FREEZE SPIL	L, SHE FELL INJURING R ANKLE, R KNEE, L WF	17,500.00	952.00	23,958.55	0.00	0.00	0.00	0.00	42,410.55
Total by Claim Number 1	Claim	17,500.00	1,195.00	25,000.00	0.00	0.00	0.00	0.00	43,695.00
		0.00	243.00	1,041.45	0.00	0.00	0.00	0.00	1,284.45
		17,500.00	952.00	23,958.55	0.00	0.00	0.00	0.00	42,410.55
Claim Number: 16WC05	5601W								
16WC05601W	HINES, CRYSTAL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBINE E.S.	2/10/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RESTRAIN STUDEN	T WHO WAS TRYING TO RUN OUT OF BLDG 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: 16WC05602K



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claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05602K									
16WC05602K	CRAIG, JESSICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BOUND BROOK H.S.	2/16/2016 2/18/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING ON SIDEWALK SLIPE	PED ON ICE AND LANDED ON R K	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: 16WC0	05603B									
16WC05603B	MELILLO, NINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW HANOVER TWP ES	2/17/2016 2/18/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL LA	NDING ON R HIP AND 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: 16WC0	05604Y									
16WC05604Y	DAVIS, ANGELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PLEASANTVILLE MS	2/16/2016 2/18/2016	Open	449.00	243.00	0.00	0.00	0.00	0.00	0.00	692.00
OPENING DOOR STUDENT BO	LTED INTO DOOR FROM THE OU	ITSIDE HITTING	2,051.00	2.00	0.00	0.00	0.00	0.00	0.00	2,053.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			449.00	243.00	0.00	0.00	0.00	0.00	0.00	692.00
			2,051.00	2.00	0.00	0.00	0.00	0.00	0.00	2,053.00

Claim Number: 16WC05605K



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3/9/2016
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NEW CLAIMS

February 2016

Testuary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Claim Number: 16WC0 16WC05605K SCHOOL #6 ES	CINQUE, REGINA 2/17/2016 2/19/2016 CK PACK AND FELL ON L KNEE,	11 Open R ARM	2,500.00 0.00 2,500.00 2,500.00 0.00	245.00 243.00 2.00 245.00 243.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	2,745.00 243.00 2,502.00 2,745.00 243.00
Claim Number: 16WC0	5607Y		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
16WC05607Y	MELKOWITS, VALERIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANNAH CALDWELL E.S. (UNI	•	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL IN.	IURED L LEG		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: 16WC0	5608W									
16WC05608W	FLANAGAN, THOMASINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER		Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	AL ISSUE FIT HER 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: 16WC05609B



-76- 3/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

. oz.uary 20 10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05609B	KIRALY, DEBORAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	INJURED HER L WRIST AND SCRATCHED 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: 16WC05	610F								
16WC05610F	BALDWIN, LAURA 10	2,500.00	245.00	5,500.00	0.00	0.00	0.00	0.00	8,245.00
WARREN DEVELOP. LEARNING	CTI 2/17/2016 2/18/2016 Open	0.00	243.00	881.14	0.00	0.00	0.00	0.00	1,124.14
RESTRAINING A SPEC ED STUD	ENT IN THE CLASSROOM HAVING A BEHAVIOF	2,500.00	2.00	4,618.86	0.00	0.00	0.00	0.00	7,120.86
Total by Claim Number 1	Claim	2,500.00	245.00	5,500.00	0.00	0.00	0.00	0.00	8,245.00
		0.00	243.00	881.14	0.00	0.00	0.00	0.00	1,124.14
		2,500.00	2.00	4,618.86	0.00	0.00	0.00	0.00	7,120.86
Claim Number: 16WC05	611Y								
16WC05611Y	PESCHOCK, MARGARET 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MANCHESTER TWP. ES	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A STUDENT WAS TALKING WITH	THEIR HANDS AND SCRATCHED HER LEYE	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: 16WC05612B



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claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	RKERS' COMPENSATION 05612B								
16WC05612B	MCBRIDE, ANNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTWOOD JR/SR HS	2/12/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND	FELL LANDING ON BUTTOCKS, INJURED L 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: 16WC	05613W								
16WC05613W	SILVERMAN, ABIGAIL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTHERN BLVD ES	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN PARKING LOT SL	IPPED ON ICE AND FELL ON L THUGH, BUTTOCK	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: 16WC	05614K								
16WC05614K	MANN, TARA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
J.ACKERMAN COLES ES	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON UNEVEN PAVEM	ENT AND FELL INJURED BUTTOCKS	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: 16WC05615Y



-78- 3/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05615Y	BODINE, MARIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	2/17/2016 2/17/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL FROM ICE INJU	IRING HER LT SIDE RIBS	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: 16WC05	616B								
16WC05616B	BROWN, REGINA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE DUNN MIDDLE SCHOOL	2/18/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PUSHED HER WHEN	SHE TRIED TO STOP HIM FROM WALKING DOW	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: 16WC05	617K								
16WC05617K	WALKER, YVONNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARSONS SCHOOL	2/8/2016 2/8/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL TO THE GROUN	ND INJURING HER LT HIP & LT SIDE OF BODY	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: 16WC05618W



-793/9/2016
claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 001ddiy 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	tatus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0										
16WC05618W	FORD, GERALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERGEN ARTS & SCIENCE CHA	ARTE 2/18/2016 2/19/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS HIT IN HEAD WITH WOOD	EN DOOR		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	I Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5619W									
16WC05619W	MCDONNELL, CHRISTINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARTERET H. S.	2/18/2016 2/19/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS HELPING TO PULL OUT V	OLLEYBALL NET AND BASE FELL O	N L FOOT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	I Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5620K									
16WC05620K	GROVER, DALE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TEWKSBURY ES	2/17/2016 2/19/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WS PICKING UP LUNCH TABLE	TO CLEAN INJURED BACK		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	l Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05621Y



3/9/2016

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NEW CLAIMS

February 2016

1 editary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05621Y	CRESCENZO, JENNIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALMOND ROAD PRE SCHOOL	2/18/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXPOSED TO BLOOD ON HER H	HAND, EAR & CLOTHES FROM A STUDENT THAT	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: 16WC05	5622B								
16WC05622B	SHORNOCK, JESSICA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BETTY MCELMON ES	2/18/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING STUDENT DOWN HAL	LWAY, STUDENT DROPPED TO FLOOR SHE TR	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: 16WC05	5623K								
16WC05623K	FARMER, LATOYA 11	3,743.00	243.00	0.00	0.00	0.00	0.00	0.00	3,986.00
MOUNT VERNON	2/16/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL ON I	BUTTOCKS, BOTH LEGS, BOTH ARMS, HANDS \	3,743.00	0.00	0.00	0.00	0.00	0.00	0.00	3,743.00
Total by Claim Number 1	Claim	3,743.00	243.00	0.00	0.00	0.00	0.00	0.00	3,986.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		3,743.00	0.00	0.00	0.00	0.00	0.00	0.00	3,743.00

Claim Number: 16WC05624B



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NEW CLAIMS

February 2016

1 oz. da. y 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss			Out Rsv	Out RSV	Out Rsv	Out Rsv	Out RSV	Out RSV	Out Rsv	Out RSV
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05624B	SIGMAN, MARY ELLEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH EAST HS	2/12/2016 2/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING ON UNEVEN SIDEWA	LK SHE FELL INJURING FACE,	R KNEE, LOWER	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: 16WC05	5625W									
16WC05625W	JACKSON, ANDRE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIGHT BEGINNINGS LEARNING	G CI 2/18/2016 2/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STRUCK R KNEE ON CHAIR WA	LKING STUDENT TO BATHROC	DM	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: 16WC05	5626Y									
16WC05626Y	CANNUNI, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN ADAMS SCHOOL	2/18/2016 2/18/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WIND BLEW METAL DOOR SHU	T & CLOSED ON HER RT 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: 16WC05627T



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NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05627T								
16WC05627T	TABORA, GRIZILDA 10	2,500.00	245.00	47,664.00	0.00	0.00	2,500.00	0.00	52,909.00
HIGH SCHOOL	2/16/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
INVOLVED IN MVA INJURED L	SIDE OF NECK, L SHOULDER, L SIDE OF HEAD	2,500.00	2.00	47,664.00	0.00	0.00	2,500.00	0.00	52,666.00
Total by Claim Number	1 Claim	2,500.00	245.00	47,664.00	0.00	0.00	2,500.00	0.00	52,909.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	47,664.00	0.00	0.00	2,500.00	0.00	52,666.00
Claim Number: 16WC0	05628B								
16WC05628B	INGRASSIA, MARY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL FIVE-JEFFERSON E	S (Ul 2/18/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
INFORMED STUDENTS TO PU	T TOYS AWAY A STUDENT BECAME UPSET GRA	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: 16WC0	05629Y								
16WC05629Y	MINDO, MICHAEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEHOLD TWP EARLY CHILD	DHOC 2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
AS THE DOOR WAS CLOSING,	HE WENT TO GRAB IT & THE DOOR STRUCK HIS	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: 16WC05630Y



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NEW CLAIMS

February 2016

. obliadi y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out Rsv	Out RSV	Out Rsv	Out Rsv	Out RSV	Out RSV	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05630Y	PENNELLO, EMMA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	2/17/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT CAME OFF BUS HAV	ING BEHAVIORAL GRABBED HER HANDS PULLI	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: 16WC0	5631B								
16WC05631B	MACIELAG, JENNIFER 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELSEA REG HS	2/18/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TAKING A FLASK OFF THE BUF	RNER, HER FINGER WENT INTO THE FLASK CAU	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: 16WC0	5632K								
16WC05632K	LANG, LOIS 11	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
DWIGHT D. EISENHOWER SCH	IOOL 2/4/2016 2/19/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS ASKING IF ANYONE DROP	PPED MONEY ON FLOOR, STUDENT GRABBED F	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
Total by Claim Number	1 Claim	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00

Claim Number: 16WC05633Y



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NEW CLAIMS

February 2016

rebluary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORK Claim Number: 16WC056										
16WC05633Y	EGAN, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WDBG TRANSPORTATION DEPT	2/18/2016 2/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING UNDER THE HOOD OF	A BUS, STANDING ON BUMP	PER WHEN HE SL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC056	34K									
16WC05634K	CARLIN, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROSELLE PARK M.S.	2/17/2016 2/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS ON TOP STEP OUTSIDE, TO	OK A STEP AND R HEEL CAU	JGHT ON STEP SI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC056	335Y									
16WC05635Y	BUTLER, JEANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN SOUTH HS	2/18/2016 2/18/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORA	L PUNCHED HER IN THE RT	SHOULDER & THI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05636K



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NEW CLAIMS

February 2016

. ozradiy 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05636K	MATTHEWS, DEBORAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	2/17/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELT STRAIN TO L SHOULDER A	AS SHE PULLED GARBAGE BAG OUT FROM TRA	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: 16WC05	637K								
16WC05637K	NAPRAVA, JOAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BACON ES	2/18/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO CATCH A SGN	IN THE CAFE, HER LT RING FINGER WAS PUNC	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: 16WC05	638K								
16WC05638K	VENA, DEBRA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALLACE MIDDLE SCHOOL	2/17/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WENT TO SIT DOWN THE SEAT	FLIPPED UP AND CLOSED SHE FELL ON LOW E	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: 16WC05639B



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NEW CLAIMS

February 2016

1 edition 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - Wo	ORKERS' COMPENSATION C05639B								
16WC05639B	SEHER, MELETA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARRISON TWP. ES	2/19/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON PIECE OF PAPE	R INJURED BACK OF HEAD	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05640W								
16WC05640W	STREET, RONALD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAREHOUSE	2/3/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING INTO TRUCK TRIPF	PED AND FELL INTO A CURB HITTING BOTH KNEES	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	C05641W								
16WC05641W	FARKAS, CHRISTOPHER 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADULT ED DEPT.	2/17/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STEPPED ON AN UNKNOWN	SHARP OBJECT IT WENT THROUGH SHOE PUNCT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05642Y



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NEW CLAIMS

February 2016

. oblidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Co	/ Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 10 - WOR									
16WC05642Y	LUKE, PAMELA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LADY LIBERTY ACADEMY CHAP	RTEF 2/11/2016 2/11/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	RAL PUSHED HER INTO THE DOOR INJUI	RING 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: 16WC0	5643W								
16WC05643W	MADDAN, TINA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRE CITY ES	2/9/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING A STUDENT'S HAND,	STUDENT FELL DOWN TWISTIN HER LT	WRIST 2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5644Y								
16WC05644Y	BINZ, LISA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALTER O KRUMBIEGEL ES	2/17/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COACHING FOR BASKETBALL F	PRACTICE, PRACTICING A DEFENSE DR	LL WITI 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: 16WC05645W



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NEW CLAIMS

February 2016

. 03.44.19 20.10			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Si	tatus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05645W									
16WC05645W	PATEL, BRENDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH PLAINFIELD H.S.	2/16/2016 2/22/2016 O	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE INJURED L U	PPER THIGH, KNEE, 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: 16WC0	95646T									
16WC05646T	VENDEMIA, MICHAEL	15	1.00	0.00	30,906.00	0.00	0.00	2,500.00	0.00	33,407.00
OCEAN TWP. BOARD OF EDUC	CATIC 2/17/2016 2/18/2016 O	pen	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REPETITIVE USE BENDING, LI	FTING, PROLONGED STANDING		1.00	0.00	30,906.00	0.00	0.00	2,500.00	0.00	33,407.00
Total by Claim Number	1 Claim		1.00	0.00	30,906.00	0.00	0.00	2,500.00	0.00	33,407.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	30,906.00	0.00	0.00	2,500.00	0.00	33,407.00
Claim Number: 16WC0	95647M									
16WC05647M	SKINNER, PATRICIA	10	10,000.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	26,193.00
AMERIGO A ANASTASIA	2/19/2016 2/22/2016 O	pen	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
TRIPPED ON SAFETY CONE A	ND FELL FACE FIRST FRACTURED L	ELBOW	10,000.00	0.00	15,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number	1 Claim		10,000.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	26,193.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			10,000.00	0.00	15,000.00	0.00	0.00	0.00	0.00	25,000.00

Claim Number: 16WC05648P



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NEW CLAIMS

February 2016

1 03.1dd., 2 0.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid [:] Out Rsv
		Out Nov	Out Nov	Out Nov	Out Nov	Out Nov	Out Nov	Out Nov	————
Major Coverage: 10 - WC Claim Number: 16WC	DRKERS' COMPENSATION 05648P								
16WC05648P	BYRNES, TARA 14	50,000.00	0.00	33,000.00	0.00	0.00	0.00	0.00	83,000.00
HOWELL MS SOUTH	2/18/2016 2/22/2016 Open	0.00	0.00	1,742.00	0.00	0.00	0.00	0.00	1,742.00
PARTICIPATING IN STUDENT/	FACULTY BASKETBALL GAME JUMPED UP FOR E	50,000.00	0.00	31,258.00	0.00	0.00	0.00	0.00	81,258.00
Total by Claim Number	1 Claim	50,000.00	0.00	33,000.00	0.00	0.00	0.00	0.00	83,000.00
		0.00	0.00	1,742.00	0.00	0.00	0.00	0.00	1,742.00
		50,000.00	0.00	31,258.00	0.00	0.00	0.00	0.00	81,258.00
Claim Number: 16WC	05649Y								
16WC05649Y	BROWN, SHAWN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH REGIONAL H.S.	2/18/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PERFORMING DRILL IN WRES	STLING ROOM WITH STUDENT, STUDENT ACCIDE	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: 16WC	05650Y								
16WC05650Y	ADELMAN, RACHEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTING STUDENT HA	AVING BEHAVIORAL ISSUE STUDENT DROPPED 1	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: 16WC05652B



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NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - W	ORKERS' COMPENSATION C05652B								
16WC05652B	MASSAROTTI, MARISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEANE-PORTER ES	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WS BLOCKING STUDENT FF	ROM RUNNING, STUDENT THREW HIS R ARM AND S	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	er 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W	C05653K								
16WC05653K	ROMANO, LAUREN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT CAME BEHIND HE	ER AND PULLED HER HAIR NECK JERKED BACK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	er 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W	C05654K								
16WC05654K	DAVIS, LINDA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIECK AVE ES	2/22/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WENT TO GRAB SOMETHIN	G OUT OF COLLANDER THERE WAS EMPTY TUNA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	er 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05655B



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NEW CLAIMS

February 2016

1 obradily 20 10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - Wo	ORKERS' COMPENSATION C05655B								
16WC05655B	EDWARDS, ANTONIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON PIECE OF PAPE	R AND FELL INJURED R FOOT, L HIP	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05656W								
16WC05656W	HEAGEN, DONNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COVE ROAD ES	2/19/2016 2/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLING UP THE SHADES, S	SHADE HIT A BAROMETER WHICH FELL & BROKE (2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05657W								
16WC05657W	RESTIVO, DONNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANNAH CALDWELL E.S. (U	NION) 2/18/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LEAVING IN SCHOOL IN PAR	KING LOT, WAS STRUCK BY PARENTS CAR ENTER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	r 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05658K



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NEW CLAIMS

February 2016

1 ob. daily 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORI Claim Number: 16WC05									
16WC05658K	BRUNS-MEYERS, KATHLEEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL (UNION)	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS ACCIDENTLY HIT WITH A SO	OCCER BALL IN BACK OF 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: 16WC05	659B								
16WC05659B	PAGE, KIM 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING MIDDLE S	CF 2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVING	BEHAVIORAL ISSUE WAS PUNCHED SEVERA	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: 16WC05	660B								
16WC05660B	FIELD, MATTHEW 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BUILDING	2/19/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING ON A SINK IN SQUATT	ING POSITION, HE TURNED & FELT A POP IN 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: 16WC05661Y



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Slaims Vou must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 001uui y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05661Y	ARABEA, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	2/22/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TAKING STUDENT TO NURSES	OFFICE, STUDENT PUNCHED HER ON R SIDE (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: 16WC0	5662W								
16WC05662W	MERCADO, ELSIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HILL MS	2/22/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT BUMPED INTO HER	CAUSING HER TO FALL, INJURING BACK OF 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: 16WC0	5663K								
16WC05663K	ROLLINS, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/22/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LEAVING SCHOOL SLIPPED ON	STAIRS AND HIT INNER R ARM AND FELL ON 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: 16WC05664W



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NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date St	tatus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05664W	MAZAHREH, HUSAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLOUCESTER CO. TECH & VOC	HS 2/19/2016 2/22/2016 Op	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING AT DESK ONE STUDEN	T PUSHE ANOTHER STUDENT CAL	ISING STUDI	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: 16WC05	665W									
16WC05665W	CARMICHAEL, MONICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OFFICE OF EARLY CHILDHOOD	2/3/2016 2/3/2016 Op	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING & LIFTING A CART SHE	FELT STRAIN TO THE RT WRIST		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC05	6667B									
16WC05667B	WILLIAMS, DEREL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFF	FICE 2/17/2016 2/19/2016 Op	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WHO WAS RUNNING	TRIPPED & FELL INTO HIS LT 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: 16WC05668Y



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NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05668Y	GUENZEL, AMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DWIGHT D EISENHOWER E.S.	2/22/2016 2/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT BIT ON HER RT UPPE	R ARM & BROKE THE SKIN		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: 16WC05	5669V									
16WC05669V	SANFORD, DAVID	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING E.S.	2/22/2016 2/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE LIFTING A TABLE TO SW	EEP UNDER IT, HE FELT PAIN II	N HIS LOW BACI	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: 16WC05	5670W									
16WC05670W	SAHNI, VARSHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE HILLS H.S.	2/17/2016 2/17/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON A COMPUTER COR	RD, FALLING FORWARD CATCH	ING HERSELF 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: 16WC05671Y



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO									
16WC05671Y	KING, JACLYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DR. CHARLES C. POLK ES	2/16/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING OUT OF CAR SLIPPE	D ON ICE AND FELL INJURED LOW BACK, L HIP,	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: 16WC0	5672W								
16WC05672W	BALDWIN, CAROLYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
J. MASON TOMLIN ES	2/22/2016 2/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED & FELL ON UNEVEN I	PAVEMENT INJURING RT KNEE & 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: 16WC0	5673B								
16WC05673B	SUTPHEN, MARYANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #3 E.S.	2/23/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT BECAME VIOLENT &	PUNCHED HER IN HER ABDOMEN & HER 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: 16WC05675W



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NEW CLAIMS

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1 estuary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Sta	atus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - W Claim Number: 16W0	ORKERS' COMPENSATION C05675W									
16WC05675W	GONZALEZ, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERRY L. DREW E.S.	2/22/2016 2/22/2016 Op	en	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN 3 STEPS W	ITH STUDENTS, HER FOOT GOT TANGI	LED IN STU	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Numbe	r 1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16W0	C05676Z									
16WC05676Z	HARPAUL, CELIA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HILLCREST ES	2/22/2016 2/22/2016 Op	en	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TWISTED HER RT ANKLE WI	HEN WALKING ON A CARPET		1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Numbe	r 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: 16W0	C05677J									
16WC05677J	GENEROSO, MONICA	10	27,500.00	1,193.00	22,000.00	0.00	0.00	0.00	0.00	50,693.00
GRIECO ES	2/22/2016 2/22/2016 Op	en	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STEPPING DOWN FROM BO	OKSHELS SHE MISSED A STEP & FELL	ON RT SIDE	27,500.00	950.00	22,000.00	0.00	0.00	0.00	0.00	50,450.00
Total by Claim Numbe	r 1 Claim		27,500.00	1,193.00	22,000.00	0.00	0.00	0.00	0.00	50,693.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			27,500.00	950.00	22,000.00	0.00	0.00	0.00	0.00	50,450.00

Claim Number: 16WC05678Y



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NEW CLAIMS

February 2016

1 editially 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05678Y	ROSSI, JAMIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALMOND ROAD PRE SCHOOL	2/23/2016 2/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
NOTICED HEAD LICE WHEN WIT	TH STUDENT THAT HAS DOCUME	NTED CASE C	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: 16WC05	6679B									
16WC05679B	TORRES, MODESTO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN NO. 3 ELEM.	2/23/2016 2/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
AFTER FIXING A HEATER HE SM	MELLED BURNING FUMES, CAUSI	NG SHORTNE	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: 16WC05	5681Y									
16WC05681Y	BLABOLIL, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/23/2016 2/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN BY STUDENT HAVI	ING BEHAVIORAL ISSUE ON UPPE	ER 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: 16WC05682Y



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NEW CLAIMS

February 2016

1 ob. uary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05682Y								
16WC05682Y	POLANCO, JAIRO 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEBSTER SCHOOL	2/23/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING BOXES OF BOOKS TO	O BRING TO ROOM FELT PAIN IN R GROIN AREA	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: 16WC	05683K								
16WC05683K	AZIZ, SUSAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	2/4/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL LA	ANDING ON R SHOULDER, R KNEE, 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: 16WC	05684K								
16WC05684K	KAECHELE, SUSANNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY OLD TAP	PPAN F 2/22/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL IN	IJURED L KNEE, HEAD, BACK, NECK, R ARM, BUT	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: 16WC05685W



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s claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 oz. da. y 2010		М	led/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Statu	us	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05 16WC05685W BUS GARAGE CLMT WAS INSTALLING AN EXH Total by Claim Number 1	STEVENS, MARK 2/23/2016 2/23/2016 Open AUST CLAMP AND FELT PAIN IN RT U		2,500.00 0.00 2,500.00 2,500.00 0.00 2,500.00	245.00 243.00 2.00 245.00 243.00 2.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	2,745.00 243.00 2,502.00 2,745.00 243.00 2,502.00
Claim Number: 16WC05	5686W		2,000.00	2.00	0.00	5.55	0.00	5.50	5.55	2,002.00
16WC05686W	VYAS, NAYNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY VOCATIONAL	2/22/2016 2/23/2016 Open	า	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON PIECE OF PAPER I	NJURED BUTTOCKS, LOW ABDOMEN,	, LOW BA(2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC05	687W									
16WC05687W	GERST, LEONARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	2/22/2016 2/23/2016 Open	า	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLEANING UP GARBAGE WITH	A TRASH GRABBER, OVER THE COUR	RSE OF TH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC05688I



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NEW CLAIMS

February 2016

Tebluary 2010		Med/BI/Co	mp Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	ov Incur	red Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Statu		aid Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out F	Rsv Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05688I	LOUIS, CLAUDETTE	10 2,500	.00 245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/23/2016 2/23/2016 Open	0	.00 243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUCHED ON THE BACK OF THE	HEAD & ON THE JAW BY A STUDENT	WHO WA 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
		C	.00 243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500	.00 2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5689B								
16WC05689B	GEBERT, DIANE	11 2,500	.00 245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SAMUEL YELLIN SCHOOL	2/22/2016 2/22/2016 Open	C	.00 243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING @ DESK, KEYBOARD S	SHELF FELL LANDING ON HER RT PINK	Y TOE 2,500	.00 2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim	2,500	.00 245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		C	.00 243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500	.00 2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	5690Z								
16WC05690Z	ADAMS, MOIRA	14 1	.00 0.00	0.00	0.00	0.00	0.00	0.00	1.00
HOWELL MS NORTH	2/4/2016 2/4/2016 Open	0	.00 0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED & FELL ON THE HALLY	VAY FLOOR LANDING ON HER LT FOR	EARM 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
		C	.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: 16WC05691K



-1023/9/2016
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NEW CLAIMS

February 2016

1 obruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - Wo	ORKERS' COMPENSATION 05691K								
16WC05691K	WALKER, SHERAHN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	2/23/2016 2/23/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS HEADBUTTED ON L SID	E OF FACE BY STUDENT ASSISTING STUDENT BA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	· 1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	:05692B								
16WC05692B	CLARK, EILEEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FORKED RIVER E.S.	2/18/2016 2/18/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXITINGING HER VEHICLE SI	HE SLIPPED ON ICE & FELL CAUSING INJURIES 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: 16WC	:05693I								
16WC05693I	BARAHONA, LISA 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
PLEASANTVILLE MS	2/16/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING TO HER VEHICLE S	SHE FELL WHILE STEPPING OFF CURB INJURED F	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: 16WC05694W



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NEW CLAIMS

February 2016

Tebluary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05694W	LETOWSKY, BETH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFWOOD AVENUE ES	2/23/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS PUSHED OVER A D	ESK BY A SPEC ED STUDENT HAVING AN OUTB	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: 16WC0	5695K								
16WC05695K	ABRAHAM, ALDUJON 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ABRAHAM CLARK HIGH SCHOO	DL 2/17/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FELT A STRAIN TO HIS R UPPE	R LEG AFTER CHASING A STUDENT	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: 16WC0	5696B								
16WC05696B	O'DONNELL, KATHERYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREGORY SCHOOL	2/23/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PREVENTING STUDENT FROM	EXITING ROOM HOLDING THE DOOR KNOB WA	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: 16WC05697K



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NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	RKERS' COMPENSATION 05697K								
16WC05697K	HOFFMAN, KEVIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VOORHEES H S	2/10/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOADING CRATE OF LIGHT PA	ARTS, MOVING STORAGE IN DARK AREA A BOAR	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: 16WC	D5698W								
16WC05698W	CROWE, EVELYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN SOUTH HS	2/24/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING A SPEC ED STU	JDENT HAVING A BEHAVIORAL OUTBURST THE 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: 16WC	D5699B								
16WC05699B	MORALES, JUDITH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ESSEX JR ACADEMY	2/22/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
KEEPING STUDENT FROM EN	TERING CLASSROOM, TRYING TO ATTACK TEAC	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: 16WC05700W



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NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	RKERS' COMPENSATION 05700W								
16WC05700W	GIST-RAGLAND, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DECATUR AVE	2/18/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ORGANIZING ACTIVITY GRABI	BING A CONTAINER FROM UNDER THE DESK, CF	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: 16WC	05701Y								
16WC05701Y	GEUTH, JACLYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	2/22/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTENDING COACHING MEET	ING WALKING THROUGH GRASS L ANKLE LANDI	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: 16WC	05702Y								
16WC05702Y	CARROLL-HENDERSON, TANEY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE HS	2/23/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FELT STRAIN TO L MIDDLE FIN	NGER WHILE BREAKING UP A FIGHT BETWEEN T	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: 16WC05703Y



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NEW CLAIMS

February 2016

1 001 daily 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05703Y	COPELAND, JESSICA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEDOM PREP CHARTER SC	HOC 2/24/2016 2/24/2016 Open	34.99	0.00	0.00	0.00	0.00	0.00	0.00	34.99
WAS STEPPING ONTO A CHAIR	R TO PUT BOX AWAY INJURED R KNEE	2,465.01	245.00	0.00	0.00	0.00	0.00	0.00	2,710.01
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		34.99	0.00	0.00	0.00	0.00	0.00	0.00	34.99
		2,465.01	245.00	0.00	0.00	0.00	0.00	0.00	2,710.01
Claim Number: 16WC0	5705Y								
16WC05705Y	VANHOOK, JOHN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH PLAINFIELD H.S.	2/17/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CARRYING LUMBER TO BUILD	SET FOR PLAY LOST BALANCE AND TRIPPED 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: 16WC0	5706B								
16WC05706B	CEFARO-SHALTIS, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RICHARD C. CROCKETT M.S.	2/23/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIED TO BREAK UP FIGHT BE	TWEEN STUDENTS INJURED R SHOULDER, R A	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: 16WC05707W



-1073/9/2016
s claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out RSV	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORI Claim Number: 16WC05									
16WC05707W	CUFF, FREDRICK 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERFORMING ARTS ACADEMY	2/24/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MOVING A CEILING LIGHT MACH	INE, LIFTING MACHINE INJURED R HIP, LOWE	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: 16WC05	708Y								
16WC05708Y	BURT, MARY ELIZABETH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TIMBER CREEK HIGH SCHOOL	2/22/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
POURING SOUP FOR STUDENT	AND BURNED R HAND AND FINGERS	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: 16WC05	709W								
16WC05709W	CONKLIN, MELISSA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODCREST ES	2/24/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OBSERVING CHILD WHEN CHILD	THREW A STICK SHE BLOCKED FACE STICK	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: 16WC05710K



-108- 3/9/2016
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NEW CLAIMS

February 2016

1 estuary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05710K								
16WC05710K	DANIS, SUSAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GARFIELD HS	2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON LOTION THAT WA	AS SPILT ON FLOOR STRAINED BACK TRYING N	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: 16WC0	05711Z								
16WC05711Z	JOHNSON, RANDOLF 10	12,000.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	16,193.00
SOMERSET SECONDARY ACA	DEM` 2/24/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP FIGHT BETWEE	N STUDENTS, WAS KICKED IN L KNEE	12,000.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	16,193.00
Total by Claim Number	1 Claim	12,000.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	16,193.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		12,000.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	16,193.00
Claim Number: 16WC0	05712B								
16WC05712B	ESTRADA, JOSEPHINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING MIDDLE	ESCF 2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP FIGHT AND FEL	L DOWN ON HER FACE INJURED KNEES, 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: 16WC05713Y



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NEW CLAIMS

February 2016

1 editions 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05713Y	PERRONE, JOHN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS EDISON SCHOOL	2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LEVELING THE FLOOR WHILE K	(NEELING FELT A POP IN L KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 16WC05	5714K								
16WC05714K	MAGEE, AMY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPME	ENT. 2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A WOODEN DIVIDER FELL ONTO	OP ON HER R 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: 16WC05	5715W								
16WC05715W	DAUBER, MICHAEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOUNDATION ACADEMY CHAR	SCF 2/22/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REMOVING FENCE FROM PLAY	GROUND HE CUT A TIE AND THE FENCE SWU	N 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: 16WC05716W



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05716W	RISOLA, MARK 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIGHT BEGINNINGS LEARNIN	IG CI 2/23/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HOLDING STUDENTS HAND ST	UDENT FELL DOWN AND DROPED TO FLOOR IN	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC0	5717K								
16WC05717K	VANAMAN, ASHLEY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CUMBERLAND CAMPUS	2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORA	AL ISSUE HEAD BUTTEN HER NOSE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC0	5718Y								
16WC05718Y	CHIN, VICTOR 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALAN B SHEPARD ES	2/24/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SITTING NEXT TO STUDENT W	HEN STUDENT LIFTED HIS ARM ACCIDENTLY PO	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	I 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: 16WC05719Y



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NEW CLAIMS

February 2016

Township 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05719Y	ASHLEY, MEGHAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODROW WILSON SCHOOL	2/24/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORAL	HEAD BUTTED HER IN HEAD, NECK, MOUTH	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: 16WC05	5721Y								
16WC05721Y	MAGUIRE, JOHN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTWOOD JR/SR HS	2/24/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNLOADING TRUCK LIFTING A 5	5 GALLON PAILS SPRAINED L 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: 16WC05	5722B								
16WC05722B	NIGRO, MICHELLE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER ELEMENTARY SO	CHC 2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING BOXES OF SUPPLIES S	TRUCK HER BACK ON SHELF KNOCKING A LAN	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: 16WC05723W



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NEW CLAIMS

February 2016

Townsian 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05723W	GRENNOR, RICHARD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KAWAMEEH JR. HIGH SCHOOL	(UN 2/20/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SETTING UP EQUIPMENT IN AU	IDITORIUM DRAMA PIT INJURED 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: 16WC0	5724K								
16WC05724K	JARAMILLO, JANETH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING ON WOOD PALLET P.	ALLET MOVED SHE FELL INJURED CHEST, R AF	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: 16WC0	5725W								
16WC05725W	BENNETT, JENNIFER 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TAUNTON SCHOOL	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A STUDENT STEPPED ON HER	LT FOOT, CAUSING BRUISING & SORENESS	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: 16WC05726B



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NEW CLAIMS

February 2016

Testuary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Co	v Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status		Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - W Claim Number: 16W0	ORKERS' COMPENSATION C05726B								
16WC05726B	DEMARY, PETER	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VILLA MADONNA	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A METAL HANGING FILE FOL	DER FROM WALL AND LANDED ON R GRE	AT TOE 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Numbe	r 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: 16W0	C05727W								
16WC05727W	DAVILA, MICHAEL	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BLDGS & GRDS	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
USING POWER DRILL ON CO	DNCRETE FLOOR THE DRILL TWISTED INJU	JRED R 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Numbe	r 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: 16W	C05728K								
16WC05728K	PATERNINA, ANNA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	2/24/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED ON STAIRS AND FE	ELL ON BOTH KNEES, BACK PAIN	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Numbe	r 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: 16WC05729B



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out RSV	Out Rsv	Out RSV	Out RSV	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC	RKERS' COMPENSATION 05729B								
16WC05729B	PIERRE-LOUIS, JOSIAS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GETTING ON THE SHUTTLE H	E FELL INJURING HIS RT KNEE & BOTH HANDS	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: 16WC0	05730Y								
16WC05730Y	HERNANDEZ, TANYA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN F. KENNEDY MEMORIAL	2/2/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAKING A CHAIR BACK FROM	UNDER THE STAGE & INJURED HER LT ELBOW	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: 16WC0	05731K								
16WC05731K	BROWN, DENNIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JERSEY CITY COMMUNITY CH	IARTE 2/16/2016 2/16/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PICKED UP 80 LB BAG OF SAL	T & INJURED 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: 16WC05732J



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NEW CLAIMS

February 2016

rebluary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0										
16WC05732J	SCODARI, THERESA	10	17,500.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	36,693.00
WARREN DEVELOP. LEARNING	G CTI 2/26/2016 2/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIOR	R HEAD BUTTED HER IN THE NO	SE	17,500.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	36,693.00
Total by Claim Number 1	Claim		17,500.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	36,693.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			17,500.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	36,693.00
Claim Number: 16WC0	5733F									
16WC05733F	TURNER, GLENN	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
FRELINGHUYSEN MS	2/19/2016 2/24/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING VOLLEYBALL & HE FE	ELL INJURING HIS LT HIP		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: 16WC0	5734K									
16WC05734K	ALTMAN, SARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARK AVENUE SCHOOL	2/25/2016 2/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED AND FELL ON WET FL	OOR INJ LT ELBOW AND UPPER	R 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: 16WC05735B



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NEW CLAIMS

February 2016

1 ebidary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WORK Claim Number: 16WC057									
16WC05735B	FINNEGAN, JAMES 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVEL LC - NEW PROVIDENCE	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE ESCORTING A SPEC ED S	TUDENT INTO THE BLDG FROM THE BUS	STL 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: 16WC057	736Y								
16WC05736Y	SMITH, JANET 11	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
ROBBINSVILLE HS	2/12/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON WATER THAT LEAK	ED FROM WASHING MACHINE IN CLASSR	OON 1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
Total by Claim Number 1	Claim	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
Claim Number: 16WC057	737W								
16WC05737W	RADONCIC, ERMINA 11	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
CAMBRIDGE ES	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE RESTRAINING A SPEC ED	STUDENT HAVING A BEHAVIORAL ISSUE	INJ 1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
Total by Claim Number 1	Claim	1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		1,501.00	0.00	0.00	0.00	0.00	0.00	0.00	1,501.00

Claim Number: 16WC05738B



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NEW CLAIMS

February 2016

Tebluary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05738B	FLORESTAL, BAIJNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THUR GOOD MARSHALL ES	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT WAS HAVIN	IG A BEHAVIORAL ISSUE THE STUDENT THREV	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: 16WC0	5739Y								
16WC05739Y	TIRADO, GLORIA ANN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A STUDENT STOOD UP & STEP	PED ON HER RT 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: 16WC0	5740K								
16WC05740K	MCCLURE, TIMOTHY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL BOE	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN THE MAIN SERVER C	LOSET A PIECE OF EQUIPMENT FELL LANDING	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: 16WC05741W



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NEW CLAIMS

February 2016

1 editally 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05741W	BENEDETTI, CORINA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPM	ENT. 2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT FLOPPED ON THE FI	LOOR & KICKED THE BATHROOM DOOR, DOOR	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC0	5742Z								
16WC05742Z	HENRIQUEZ, NELSON 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HENRY C. BECK JR. SCHOOL	2/24/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLEANING CLASSROOM USING	CLEANING SUPPLIES A RASH APPEARED ON I	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1	l 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: 16WC0	5743V								
16WC05743V	PETERS, JESSE 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
MARY ETHEL COSTELLO	2/24/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
INJURED HIS BACK LIFTING AN	ND MOVING DIFFERENT THINGS	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1	I 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: 16WC05744B



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NEW CLAIMS

February 2016

. os.aa.y 20 10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05744B								
16WC05744B	ENGAL, MARIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KLOCKNER E.S.	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REACHING UP TO GET A FILE	IN CLOSET MOVED A COAT HANGING ON PAPER	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: 16WC	05745K								
16WC05745K	GALLE, REBECCA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CRIM E S	2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT FELT STRAIN TO LT SID	DE OF LOWER BACK AS SHE BENT DOWN TO RET	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: 16WC	05746W								
16WC05746W	CHRISTINE, SALLY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN HILLS REG HS	2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS WALKING IN THE I	HALLWAY WAS STRUCK ON THE RT ARM AND RT	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: 16WC05747Y



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05747Y	SCHAMA, ALEXANDRA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTWOOD JR/SR HS	2/29/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STEPPED OFF LANDING OUTS	IDE OF DOOR STEPPED ON TREE NUT L ANKLE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC0	5748W								
16WC05748W	RODRIGUEZ, LUIS 11	10,000.00	243.00	10,000.00	0.00	0.00	0.00	0.00	20,243.00
KNOWLEDGE A TO Z ACADEMY	Y CH 2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MOPPING FLOOR WHEN HE FE	ELL OFF THE CLEANING MACHINE FX R ELBOW,	10,000.00	243.00	10,000.00	0.00	0.00	0.00	0.00	20,243.00
Total by Claim Number 1	l Claim	10,000.00	243.00	10,000.00	0.00	0.00	0.00	0.00	20,243.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		10,000.00	243.00	10,000.00	0.00	0.00	0.00	0.00	20,243.00
Claim Number: 16WC0	5749B								
16WC05749B	KLINE, LAUREN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEWARK EDUCATORS CHART	ER 2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED AND FELL IN HALLWA	AY AS A RESULT OF A STUDENT POURING HAND	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC05750K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO	RKERS' COMPENSATION 15750K								
16WC05750K	MURPHY, COLLEEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN VILLAGE ES	2/19/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORA	AL SHE TRIED TO STOP STUDENT FROM LEAVIN	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: 16WC0	5752G								
16WC05752G	VITELLI, MARY 10	2,500.00	1,195.00	0.00	0.00	0.00	0.00	0.00	3,695.00
MAYS LANDING CAMPUS	2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS KICKED IN THE GROIN BY	Y A STUDENT HAVING A BEHAVIORAL	2,500.00	1,195.00	0.00	0.00	0.00	0.00	0.00	3,695.00
Total by Claim Number	1 Claim	2,500.00	1,195.00	0.00	0.00	0.00	0.00	0.00	3,695.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	1,195.00	0.00	0.00	0.00	0.00	0.00	3,695.00
Claim Number: 16WC0	95753Y								
16WC05753Y	VENTURA, DONNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALAN B SHEPARD ES	2/23/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE TRYING TO LIFT A STUI	DENT OUT OF A WHEELCHAIR FELT SHARP PAIN	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: 16WC05754K



-122- 3/9/2016
s claims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 editially 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Major Coverage: 10 - WOR									
16WC05754K	LOZADA-SHAW, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	2/19/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT WAS HAVIN	IG A BEHAVIORAL OUTBURST AND THREW A (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: 16WC0	5755G								
16WC05755G	WYMAN, RICHARD 10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMPSON MS	2/19/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING A CAFETERIA TABLE L	FOOT GOT CAUGHT BY TABLE INJURED L KNI	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: 16WC0	5756B								
16WC05756B	WAGNER, RACHEL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORA	L PULLED HER HAIR AND SCRATCHED HER FA	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: 16WC05757W



-123sclaims. You must combine the reports provided by NISIG with the reports provided by Summit.

1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05757W	SHIVERS, KRISTIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	G CTI 2/23/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS KICKED IN R SIDE OF JAV	V WHILE RESTRAINING A STUDENT HAVING BE	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: 16WC0	5758Y								
16WC05758Y	RUSSONIELLO, LUCY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BEDWELL ES	2/29/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS LIFTING A CORNER OF A	DESK AND FELT PAIN IN HER 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: 16WC0	5759K								
16WC05759K	SOPALA, DIANNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY DEMARES	T HS 2/23/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED OVER A CORD AND L	OST BALANCE DID NOT FALL INJURED ANKLE	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: 16WC05761Y



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sclaims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid Paul
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC Claim Number: 16WC	DRKERS' COMPENSATION 05761Y								
16WC05761Y	RYAN, MELISSA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POINT ROAD E.S.	2/23/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SITTING IN CHILD CHAIR, CHA	AIR COLLAPSED HITTING HER HEAD ON ANOTHE	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: 16WC	05762F								
16WC05762F	NUNEZ, LUIS 11	10,000.00	245.00	5,500.00	0.00	0.00	0.00	0.00	15,745.00
HACKENSACK MS	2/22/2016 2/22/2016 Open	0.00	0.00	1,341.84	0.00	0.00	0.00	0.00	1,341.84
SAT DOWN ON RAZON STRIP	PER CHEMICAL BUCKET TO TIE SHOE, CAUSING	10,000.00	245.00	4,158.16	0.00	0.00	0.00	0.00	14,403.16
Total by Claim Number	1 Claim	10,000.00	245.00	5,500.00	0.00	0.00	0.00	0.00	15,745.00
		0.00	0.00	1,341.84	0.00	0.00	0.00	0.00	1,341.84
		10,000.00	245.00	4,158.16	0.00	0.00	0.00	0.00	14,403.16
Claim Number: 16WC	05763B								
16WC05763B	UNTORIA, MARILYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNIN	IG CTI 2/23/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS KICKED IN L CALF WHILI	E ESCORTING STUDENT HAVING A BEHAVIORAL	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: 16WC05764V



-125- 3/9/2016
sclaims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

rebruary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0									
16WC05764V	MAGDELINSKAS, JENNIFER 10	13,500.00	1,193.00	10,500.00	0.00	0.00	0.00	0.00	25,193.00
HAMILTON NORTH NOTTINGHA	AM H 2/25/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SHAKING EXCESS WATER HIT	FINGER ON DOOR KNOB	13,500.00	1,193.00	10,500.00	0.00	0.00	0.00	0.00	25,193.00
Total by Claim Number 1	l Claim	13,500.00	1,193.00	10,500.00	0.00	0.00	0.00	0.00	25,193.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		13,500.00	1,193.00	10,500.00	0.00	0.00	0.00	0.00	25,193.00
Claim Number: 16WC0	5765W								
16WC05765W	PETRIZZO, CAITLIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS PUNCHED AND PUSHED	TO GROUND TRYING TO STOP A FIGHT INJUREI	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	l 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: 16WC0	5766Y								
16WC05766Y	HALLADAY, ROBERT 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/24/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRAINED HIS LOWER BACK W	WHILE PULLING A STUDENT WHO WAS HAVING A	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	I 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: 16WC05767B



-126- 3/9/2016
sclaims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 05.44.19 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05767B								
16WC05767B	ZAWADZKI, KATARZYNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER S	SCH V 2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT WAS HAV	/ING A BEHAVIORAL OUTBURST KNOCKED CLMT	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: 16WC	05768Y								
16WC05768Y	GREGORY, MARCI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COPELAND MS	2/11/2016 2/11/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED & FELL ON WET FLO	OOR CAUSING INJURY TO LT ELBOW WHILE WALF	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: 16WC	05769B								
16WC05769B	MARCHESI, RENATA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOEHL MIDDLE SCHOOL	2/24/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HIT ON THE TOP OF HEAD WI	ITH A BASKETBALL DURING AFTER-SCHOOL PRC	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: 16WC05770K



-1273/9/2016
sclaims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

1 00.1dd. y 20.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid	Paid : Out Rsv
Description of Loss		Out Rsv	Out RSV	Out Rsv	Out Rsv	Out RSV	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO									
16WC05770K	YANNIOTIS, ANDREAS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS HIT ON L SIDE OF FACE A	AND INJURED ARM WHILE STOPPING A FIGHT	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: 16WC0	5771W								
16WC05771W	MOLINOWSKI, JACQUELINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TRANSPORTATION	2/17/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED AND FELL INJURED B	BACK OF HEAD WHILE WALKING IN PARKING LO	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: 16WC0	5772K								
16WC05772K	BUSCH, CHERA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STANDING BEHIND STUDENT	& GOT HEADBUTTED IN THE MOUTH	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: 16WC05773Y



-128- 3/9/2016
sclaims. You must combine the reports provided by NISIG with the reports provided by Summit 1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	DRKERS' COMPENSATION 05773Y								
16WC05773Y	PHILLIPS, KATHRYNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT PUSHED HER CAU	SING TO FALL INJURING L KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 16WC	05774P								
16WC05774P	BELTON, ANTHONY 10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HERITAGE MS	2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLUGGING IN BUS TO DIESEI	L PUMP & RECEIVED A LARGE ELECTRIC SHOCK	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: 16WC	05775K								
16WC05775K	STITZ, KATHY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN ES	2/25/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FOOT SLIPPED OFF STEPS S	HE FELL FORWARD INJURING L HAND/FINGER, W	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: 16WC05776K



-129s claims. You must combine the reports provided by NISIG with the reports provided by Summit.

1:43:30PM



NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss	WEDGI COMPENSATION	Out Nev	Out Nov	Out Nov	Out Nov	Out Nev	Out NSV	Out Nov	
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05776K	PHILLIPS, THERESA 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. (P	ENI 2/25/2016 2/25/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED & FELL ON WET FLOOR	R CAUSING INJURY TO LT KNEE, RT HAND & NI	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: 16WC05	5778Y								
16WC05778Y	FEINSOT, JANICE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #23 WOODBINE AVE	2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED BY STUDENT WAS PIN	INED TO FLOOR BY STUDENT INJURED BRIDGI	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: 16WC05	5779B								
16WC05779B	JOHNSON, SAKEENAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THUR GOOD MARSHALL ES	2/25/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING A BEHAVIOR	AL ISSUE SCRATCHED HER R HAND RESTRAIN	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: 16WC05780K



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NEW CLAIMS

February 2016

Tebruary 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05780K	DENICOLA, CHRISTOPHER 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SPEC ED STUDENT THREW A	SMALL PIECE OF WET PAPER STRUCK CLMT RT	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	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: 16WC0	5781W								
16WC05781W	WILLIAMS, SUSAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/24/2016 2/24/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED & FELL ONTO STEPS	CAUSING INJURY TO BILATERAL KNEE & LT HAI	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	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: 16WC0	5782Y								
16WC05782Y	WILSON, RENEE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
P.J. HILL SCHOOL	2/25/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BELIEVES SHE HAS BEEN EXP	OSED TO HAND-FOOT-MOUTH DISEASE; SYMP1	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: 16WC05783W



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NEW CLAIMS

February 2016

. obliadily 2 0.10		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC0									
16WC05783W	SEGARRA, TRAVIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTWOOD JR/SR HS	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE CLEANING TOILET HE C	OUT HIS RT MIDDLE FINGER ON THE OUTSIDE 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: 16WC0	5784B								
16WC05784B	BRENMAN, RENA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/25/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ON A FIELD TRIP A PILE OF BO	OKS FELL FROM CHECK OUT AREA AT THE SA	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: 16WC0	5785Z								
16WC05785Z	HENSHAW, KYLEE 10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
MAYS LANDING CAMPUS	2/26/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRYING TO RESTRAIN A STUDI	ENT HAVING A BEHAVIOR STRAINED LOW BACI	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
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	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00

Claim Number: 16WC05786K



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NEW CLAIMS

February 2016

1 editially 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - Wo	ORKERS' COMPENSATION C05786K								
16WC05786K	COAR, ESTHER 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN'S PROMISE CHART	ER BO 2/24/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRAINED R ARM WHILE UN	LOADING A VAN FULL OF SUPPLY BOXES	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	r 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: 16WC	C05787W								
16WC05787W	LILLEY, MORIAH 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 2/29/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SCRATCHED R FOREARM, L	THUMB, R WRIST BY STUDENT HAVING BEHAVIO	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	r 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: 16WC	C05789B								
16WC05789B	GOULD, LISA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WHITING ES	2/16/2016 3/1/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BLOCKING AN AGGRESSIVE	SPEC ED STUDENT FROM HITTING OTHER STUDI	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	r 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: 16WC05791B



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NEW CLAIMS

February 2016

1 ebidary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 05791B									
16WC05791B	SURIER, EDDY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCGINNIS M.S.	2/20/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UPON RETURNING FROM A FI	ELD TRIP REVERSING BUS TO	PARK TURNED W	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: 16WC0)5793J									
16WC05793J	KRYNSKI, MELISSA	14	50,001.00	0.00	20,000.00	0.00	0.00	0.00	0.00	70,001.00
JOHN ADAMS SCHOOL	2/26/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTEMPTED TO CATCH A BAS	KETBALL DURING A HARLEM V	VIZARDS PERFOR	50,001.00	0.00	20,000.00	0.00	0.00	0.00	0.00	70,001.00
Total by Claim Number	1 Claim		50,001.00	0.00	20,000.00	0.00	0.00	0.00	0.00	70,001.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			50,001.00	0.00	20,000.00	0.00	0.00	0.00	0.00	70,001.00
Claim Number: 16WC0)5795W									
16WC05795W	SCARILLO, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANNAH CALDWELL E.S. (UN	ION) 2/29/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON MUDDY AREA AN	D FELL ON R ELBOW, R HIP		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: 16WC05798Y



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NEW CLAIMS

February 2016

. obliadi y 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Major Coverage: 10 - WOI Claim Number: 16WC0									
16WC05798Y	PRICE-MUNSON, STACEY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
METS CHARTER BOE	2/29/2016 3/1/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IN GYM MOVING A PORTABLE	BASKETBALL HOOP IT TIPPED OVER ONTO L FC	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	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: 16WC0	5799W								
16WC05799W	BOROWSKI, KATHY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #23 WOODBINE AVE	2/25/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BENDING OVER TO PICK UP TO	OYS WHEN A STUDENT BEGAN TO HAVE A BEH	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: 16WC0	5800B								
16WC05800B	RASPA, DONNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH JUNCTION E S	2/29/2016 3/1/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BENT DOWN TO WAKE UP STU	DENTS FROM NAP FELT PAIN IN L HIP COULD N	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: 16WC05802K



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NEW CLAIMS

February 2016

-			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date S	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOF Claim Number: 16WC0										
16WC05802K	PEGGS, LYNN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPM	ENT. 2/24/2016 2/24/2016 C	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT PULLED HER RT LEG	DOWN CAUSING HER TO FALL DO	OWN ON 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: 16WC0	5804B									
16WC05804B	ST LUCE, SHIRLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK EARLY CHILDHO	OOD 2/29/2016 3/1/2016 C	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN THE CLASSROOM, DI	SINFECTANT SMELL CAUSED HER	TO HAVE DIF	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: 16WC0	5806W									
16WC05806W	SLAUGHTER, HENRY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
J.F.K. MEMORIAL HIGH SCHOO	L 2/24/2016 3/1/2016 C	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP A FIGHT BETWE	EN STUDENTS WAS STRUCK IN TH	IE CHEST SE	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: 16WC05810B



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NEW CLAIMS

February 2016

Tobliadly 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05									
16WC05810B	ADAMCZYK, CYNTHIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
${\sf MARSHALL} \ {\sf W} \ {\sf ERRICKSON} \ {\sf E.S.}$	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TURNING INTO THE PARKING LO	OT SHE FELT A SHOOTING PAIN TO LT BICEP V	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: 16WC05	811Y								
16WC05811Y	MACARTHUR-DITZIG, KATHLEEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RICHARD BUTLER BOE	2/29/2016 3/1/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE PARTICIPATING IN VOLU	NTEER BASKETBALL PRACTICE FOR GAME W	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: 16WC05	818K								
16WC05818K	HEWITT, CHERYLIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLUMBIA HIGH SCHOOL	2/24/2016 3/2/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING SPEC ED STUDE	NT FIGHTING WITH ANOTHER STUDENT STRAI	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: 16WC05819Y



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NEW CLAIMS

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1 editions 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Claim Number: 16WC 16WC05819Y MONTGOMERY HS	HEEBNER, JANE 11 2/17/2016 3/2/2016 Open DL BUILDING SLIPPED AND FELL ON ICE STRAINED	2,500.00 0.00 2,500.00 2,500.00 0.00 2,500.00	245.00 0.00 245.00 245.00 0.00 245.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	2,745.00 0.00 2,745.00 2,745.00 0.00 2,745.00
Claim Number: 16W0	C05822K	_,000.00						0.00	_,
16WC05822K	HENDERSON, MARY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUT SWAMP ES	2/17/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT SLIPPED IN CLASSRO	OM ON A CRAYON ON THE FLOOR FELL INJ LT KN	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Numbe	r 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: 16W0	C05825B								
16WC05825B	TYSON, PAUL 11	20,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	22,500.00
MORRIS KNOLLS H.S. FRANK	KLIN A\ 2/17/2016 3/2/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE ON HIS WAY TO A CO	ONFERENCE WAS INVOLVED IN A MVA STRUCK BY	20,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	22,500.00
Total by Claim Numbe	r 1 Claim	20,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	22,500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		20,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	22,500.00

Claim Number: 16WC05826K



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NEW CLAIMS

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Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid [:] Out Rsv
Major Coverage: 10 - WO	PRKERS' COMPENSATION 05826K								
16WC05826K	CARMONA, LUIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COPELAND MS	2/17/2016 2/19/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING HEAVY GARBAGE BA	GS INTO DUMPSTER HE FELT PAIN IN HIS LT E	ELE 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: 16WC	05828B								
16WC05828B	WALKER, DOMINIQUE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST DEPTFORD MS	2/26/2016 2/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RUST & DIRT ENTERED HER F	RT EYE AS SHE ATTEMPTED TO THROW OLD F	UF 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: 16WC	05833W								
16WC05833W	BARBER, SARAH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SPRUCE RUN ES	2/29/2016 2/29/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HEADBUTTED BY A STUDENT	HAVING A BEHAVIORAL OUTBURST	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: 16WC05835B



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NEW CLAIMS

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. obliadi y 2 0.0		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Ksv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO									
16WC05835B	MCCORMACK, KERRI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/25/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTEMPTED TO RETRIEVE A C	OPPER PIPE FROM SPEC ED STUDENT THE S	ST 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	l 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: 16WC0	5840W								
16WC05840W	CLARK, STEPHEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RANCOCAS VALLEY REG. HS	2/29/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE THROWING AWAY GAR	BAGE CLMT LIFTED A GARBAGE BAG CAUSIN	G 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	l 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: 16WC0	5842Y								
16WC05842Y	BRADY, KATHRYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVELOPMENTAL LEARNING	CTR 2/11/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT WAS HAVING A BEH	AVIOR ISSUE WAS KICKED IN R SIDE OF KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	l 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: 16WC05843Y



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NEW CLAIMS

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rebluary 2016		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WC	ORKERS' COMPENSATION 05843Y								
16WC05843Y	COWAN, JOANNE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELMAR ES	2/12/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS WALKING BACKWARDS	TRIPPED OVER A CHAIR FELL INJ RT ELBOW	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: 16WC	05844B								
16WC05844B	MAYOROS, NANCY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/18/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GETTING UP FROM SEAT ON	BUS WHILE BUS WAS IN ROUTE LOST BALANCE	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: 16WC	:05853F								
16WC05853F	COHEN, BRIAN 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ERNEST J FINIZIO - ALDENE	E.S. 2/23/2016 3/3/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FELT STRAIN TO RT HIP AFTI	ER BREAKING DOWN CHAIRS	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: 16WC05869T



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NEW CLAIMS

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Tebluary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WO										
16WC05869T	COBBS, BERNICE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ADMIN BLDG	2/10/2016 3/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HAD A HARD TIME BREATHING	G, INCREASED CHEST PAIN DOW	'N L ARM	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: 16WC0	5873K									
16WC05873K	BUSANTI, SEAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATIVE OFFICES	2/29/2016 3/7/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BENT OVER TO ASSIST A STUI	DENT CHANGING T SHIRT STRU	CK HEAD AGAIN	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: 16WC0	5876V									
16WC05876V	DOCKERY, STEPHEN	15	0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
LILLIAN DRIVE ES	2/29/2016 3/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REPETITIVE LIFTING, BENDING	G, CARRYING INJURED BACK		0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
Total by Claim Number	1 Claim		0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00

Claim Number: 16WC05877Y



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rebluary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 16WC05										
16WC05877Y	YODICE, CATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHREWBURY E.S.	2/29/2016 3/7/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS CHASING STUDENT ATTE	MPTING TO LEAVE SCHOOL IN	JURED LOWER E	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: 16WC05	5890Y									
16WC05890Y	KUSHNER, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PRINCETON CHARTER SCHOOL	2/24/2016 3/8/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN INTO HER FROM	I BEHIND SHE FELL INJURED F	R HIP, GROIN, L 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: 16WC05	5893B									
16WC05893B	JOSEPH, JEAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JONATHAN DAYTON H.S.	2/26/2016 3/8/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPENING DOUBLE DOORS ONE	DOOR CLOSED ON R MID AN	D RING FINGERS	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



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NEW CLAIMS

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February 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Total by Major Coverage	429 Claims		1,590,392.94	140,807.00	806,001.64	0.00	0.00	7,500.00	0.00	2,544,701.58
			31,412.81	93,579.00	44,413.07	0.00	0.00	0.00	0.00	169,404.88
			1,558,980.13	47,228.00	761,588.57	0.00	0.00	7,500.00	0.00	2,375,296.70
Major Coverage: 20 - GENE Claim Number: 16GL00										
16GL00160D	ETHERTON, CHARLENE	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
QUINTON TWP ES	2/2/2016 2/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TRIP AND FALL IN PAR	RKING LOT		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 16GL001	168L									
16GL00168L	MOHAMMED, NYISHA	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
LADY LIBERTY ACADEMY CHAR	TEF 2/8/2016 2/9/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STUDENT WALKING D	OWN STAIRS SLIPPED & FEL	L	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 16GL001	169E									
16GL00169E	CHAIN, TAYLOR	20	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
GLOUCESTER CITY BOARD OF E		Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES DAVID LIGHT ENGAGE	ED IN SEXUAL RELATIONSHIP	WITH STUDENT	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00



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NEW CLAIMS

February 2016

February 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 20 - G	ENERAL LIABILITY									
Total by Claim Number	er 1 Claim		10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
Claim Number: 16GL	L00172D									
16GL00172D	BAKER, SHELBY	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
CAMDEN CITY SCHOOL DIS	TRICT 2/5/2016 2/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STUDENT PLAYIN	G KICKBALL SUSTAINED INJURY		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number	er 1 Claim		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 16Gl	L00192L									
16GL00192L	MALTESE, AMANDA	21	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
OCEAN TWP H.S.	2/12/2016 2/18/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES EMPLOYEE WAS E	BACKING UP OUT OF PARKING SPA	CE A LARGE SC	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	er 1 Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16GL	L00209D									
16GL00209D	RIVERA, STEPHEN	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
ELMWOOD PARK BOE	2/24/2016 2/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	EL DOOR JAM WHILE HORSEPLAYIN	·	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00



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NEW CLAIMS

February 2016

-				Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant N	Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date	Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 20 - GENE	RAL LIABILITY	,									
Total by Claim Number 1	Claim			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 16GL002	13L										
16GL00213L	CHARTIER, JA	CQULINE	21	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
NORTH STAR ACADEMY BOE	2/26/2016	3/2/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TEACHERS CAR DAMA	GED WHILE DRIVI	NG IN PAR	KING LOT	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1	Claim			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16GL002	16L										
16GL00216L	MASKOS, MITO	CHELL	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
MULLICA TWP MS	2/26/2016	3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FELL WHILE PLAYING I	BASKETBALL			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1	Claim			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Major Coverage 8	Claims			10,000.00	0.00	2,000.00	0.00	0.00	0.00	25,000.00	37,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				10,000.00	0.00	2,000.00	0.00	0.00	0.00	25,000.00	37,000.00

Major Coverage: 30 - AUTO LIABILITY Claim Number: 16AL00141L



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NEW CLAIMS

February 2016

rebruary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 30 - AUTO Claim Number: 16AL001										
16AL00141L	PISTONE, MELISSA	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
HUDSON CNTY VO-TECH	2/1/2016 2/5/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK A PARKED VEHICLE			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL001	47L									
16AL00147L	DANGELL, DONALD	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
SOUTH BRUNSWICK BOE	2/5/2016 2/9/2016	2/23/2016	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
IV BACKED INTO 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	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL001	53D									
16AL00153D	RIVADENEIVA, NANCY	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
BELLEVILLE BOARD OF EDUCAT	IOI 2/1/2016 2/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV SIDESWIPED PARKED VEHICL	E		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 16AL00157D/01



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NEW CLAIMS

February 2016

Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 30 - AUTC										
16AL00157D/01	MACK, CHARLES	31	0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
BRICK TWP. BOARD OF EDUCAT	ΓΙΟΙ 2/11/2016 2/17/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV IN INTERSECTION	N		0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
Total by Claim Number 1	Claim		0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
Claim Number: 16AL001	158L									
16AL00158L	Conlow, John	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
ATLANTIC COUNTY SPECIAL SE	RV 2/12/2016 2/12/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV RAN RED LIGHT STRIKING OV	/		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL001	164L									
16AL00164L	GOMEZ, ARISTIZABAL	31	0.00	184.00	1,461.92	0.00	0.00	0.00	0.00	1,645.92
JERSEY CITY PUBLIC SCHOOLS	2/17/2016 2/19/2016	3/ 8/2016	0.00	184.00	1,461.92	0.00	0.00	0.00	0.00	1,645.92
IV BACKED INTO 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	184.00	1,461.92	0.00	0.00	0.00	0.00	1,645.92
			0.00	184.00	1,461.92	0.00	0.00	0.00	0.00	1,645.92
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 16AL00167L



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NEW CLAIMS

February 2016

1 editally 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 30 - Al Claim Number: 16AL										
16AL00167L	SHEIKH, MAHMOOD	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
WOODBRIDGE BOARD OF EI	DUCAT 2/16/2016 2/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV SLID ON ICE BACKWARDS	S HITTING 2 PARKED VEHICLES		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	r 1 Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL	00167L/01									
16AL00167L/01	KHAN, SHAHNAWAZ	31	0.00	222.80	1,000.00	0.00	0.00	0.00	0.00	1,222.80
WOODBRIDGE BOARD OF EI	DUCAT 2/16/2016 2/23/2016	Open	0.00	222.80	0.00	0.00	0.00	0.00	0.00	222.80
IV SLID ON ICE BACKWARDS	HITTING 2 PARKED VEHICLES		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	r 1 Claim		0.00	222.80	1,000.00	0.00	0.00	0.00	0.00	1,222.80
			0.00	222.80	0.00	0.00	0.00	0.00	0.00	222.80
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL	00168L									
16AL00168L	CRUZ, LUCIA	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
HARRISON BOE	2/18/2016 2/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	r 1 Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 16AL00169L



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NEW CLAIMS

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Tebruary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 30 - AUT Claim Number: 16AL00										
16AL00169L	DIAZ, DANIEL	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
HARRISON BOE	2/22/2016 2/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK REAR OF OV			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL00	0172L									
16AL00172L	STEVENTON, DEBORAH	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
MONROE TWP. BOARD OF EDU	JCAT 2/25/2016 2/25/2016	Reopened	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
IV STRUCK LOW HANGING WIF	RES PULLING THEM DOWN		0.00	0.00	250.00	0.00	0.00	0.00	0.00	250.00
Total by Claim Number	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	250.00	0.00	0.00	0.00	0.00	250.00
Claim Number: 16AL00	0176L									
16AL00176L	GATTA, TRACY	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
WANAMASSA E.S.	2/25/2016 2/25/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV SIDESWIPED EMPLOYEES P	ARKED VEHICLE		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 16AL00182D



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NEW CLAIMS

February 2016

. 03.00.1			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 30 - AUTO Claim Number: 16AL0018										
16AL00182D	DANIELS, PARRIS	30	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
TRENTON BOARD OF EDUCATION	N 2/2/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV MAKING LEFT TUP	RN		10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
Total by Claim Number 1 C	Claim		10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
Claim Number: 16AL001	83L									
16AL00183L	FENNELL, DARRYL	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
WAYNE TWP BOE	2/29/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV SIDESWIPED PARKED VEHICLE	Ε		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 (Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Claim Number: 16AL001	84L									
16AL00184L	CHARLES, MARIE JEAN	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
EAST ORANGE BOARD OF EDUC	AT 2/2/2016 3/2/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV IN REAR			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Number 1 C	Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
- -			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00

Claim Number: 16AL00188L



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NEW CLAIMS

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February 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	ov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Statu	ıs	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 30 - Al Claim Number: 16AL										
16AL00188L	PHOUTHAPADITH, CHONC	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
SOMERSET CNTY ED.SERVI	CES C(2/22/2016 3/6/2016 Open	1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OVD ALLEGES IV STRUCK P	ARKED VEHICLE		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Claim Numbe	r 1 Claim		0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
Total by Major Covera	ge 16 Claims		10,000.00	406.80	16,961.92	0.00	0.00	0.00	0.00	27,368.72
			0.00	406.80	2,711.92	0.00	0.00	0.00	0.00	3,118.72
			10,000.00	0.00	14,250.00	0.00	0.00	0.00	0.00	24,250.00
Major Coverage: 40 - Al Claim Number: 16AL	UTO PHYSICAL DAMAGE .00149L									
16AL00149L	KNOWLTON TWP BOE	40	0.00	338.15	2,346.95	0.00	0.00	0.00	0.00	2,685.10
KNOWLTON TWP BOE	2/9/2016 2/9/2016 3/ 3/2	2016	0.00	338.15	2,346.95	0.00	0.00	0.00	0.00	2,685.10
VAN SLIPPED ON ICE AND D	AMAGED A WINDOW AND FENDER		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Numbe	r 1 Claim		0.00	338.15	2,346.95	0.00	0.00	0.00	0.00	2,685.10
			0.00	338.15	2,346.95	0.00	0.00	0.00	0.00	2,685.10
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL	.00150D									
16AL00150D	HUNTERDON CTY ESC BOE	40	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
HUNTERDON COUNTY ED. S			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV BACKED INTO DUMPSTER	•		0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00



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NEW CLAIMS

February 2016

February 2016				Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claiman	t Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date	Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss				Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 40 - A	UTO PHYSICAL D	AMAGE									
Total by Claim Numb	er 1 Claim			0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
Claim Number: 16A	L00156D										
16AL00156D	BRICK TWP	BOE	40	10,000.00	500.00	10,000.00	0.00	0.00	0.00	500.00	21,000.00
BRICK TWP. BOARD OF ED	UCATIOI 2/10/2016	2/11/2016	Open	0.00	0.00	5,992.11	0.00	0.00	0.00	384.65	6,376.76
OV STRUCK IV AT LIGHT				10,000.00	500.00	4,007.89	0.00	0.00	0.00	115.35	14,623.24
Total by Claim Numb	er 1 Claim			10,000.00	500.00	10,000.00	0.00	0.00	0.00	500.00	21,000.00
				0.00	0.00	5,992.11	0.00	0.00	0.00	384.65	6,376.76
				10,000.00	500.00	4,007.89	0.00	0.00	0.00	115.35	14,623.24
Claim Number: 16A	L00157D										
16AL00157D	BRICK TWP	BOE	40	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
BRICK TWP. BOARD OF ED	UCATIOI 2/11/2016	2/12/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV IN INTERSE	CTION			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Numb	er 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: 16A	L00158L/01										
16AL00158L/01	BOE OF SPE	C SVCS & VC	TECH 40	0.00	285.00	13,648.00	0.00	0.00	0.00	0.00	13,933.00
ATLANTIC COUNTY SPECIA		2/12/2016	3/ 1/2016	0.00	285.00	13,648.00	0.00	0.00	0.00	0.00	13,933.00
IV RAN LIGHT STRIKING OV	/			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV RAN LIGHT STRIKING OV	/			0.00	0.00	0.00	0.00	0.00	0.00	0.00	(



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NEW CLAIMS

February 2016

February 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation	Reinsurance	Legal	Rehab/Pmp/Pip	Total
			wea/bi/oomp	Ехрепзе	man arcon	Recovery	Recovery	Legai	Adj Exp	iotai
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			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 C	Claim		0.00	285.00	13,648.00	0.00	0.00	0.00	0.00	13,933.00
			0.00	285.00	13,648.00	0.00	0.00	0.00	0.00	13,933.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL0016	60L									
16AL00160L	NORTH HUNTERDON/VO	ORHEE 40	0.00	243.90	1,907.60	0.00	0.00	0.00	0.00	2,151.50
NORTH HUNTERDON/VOORHEES	SE 2/16/2016 2/16/2016	3/ 8/2016	0.00	243.90	1,907.60	0.00	0.00	0.00	0.00	2,151.50
IV BACKING TO TURN AROUND, D	DRIVER HIT ROCK		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	Claim		0.00	243.90	1,907.60	0.00	0.00	0.00	0.00	2,151.50
			0.00	243.90	1,907.60	0.00	0.00	0.00	0.00	2,151.50
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL0016	68L/01									
16AL00168L/01	HARRISON BOE	40	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
HARRISON BOE	2/18/2016 2/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV			0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 C	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: 16AL0016	69L/01									
16AL00169L/01	HARRISON BOE	40	0.00	202.80	495.69	0.00	0.00	0.00	0.00	698.49
HARRISON BOE	2/22/2016 2/23/2016	3/ 3/2016	0.00	202.80	495.69	0.00	0.00	0.00	0.00	698.49
IV STRUCK OV IN REAR			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



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NEW CLAIMS

February 2016

rebruary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 40 - AU	TO PHYSICAL DAMAGE									
Total by Claim Number	1 Claim		0.00	202.80	495.69	0.00	0.00	0.00	0.00	698.49
			0.00	202.80	495.69	0.00	0.00	0.00	0.00	698.49
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL0	0175L									
16AL00175L	BRIDGETON BOE	40	0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
BRIDGETON	2/22/2016 2/25/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV PULLED INTO PATH OF IV			0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
Total by Claim Number	1 Claim		0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	3,000.00
Total by Major Coverage	9 Claims		10,000.00	1,569.85	51,398.24	0.00	0.00	0.00	500.00	63,468.09
			0.00	1,069.85	24,390.35	0.00	0.00	0.00	384.65	25,844.85
			10,000.00	500.00	27,007.89	0.00	0.00	0.00	115.35	37,623.24
Major Coverage: 70 - PRO Claim Number: 16PRO										
16PR00127E	BOGOTA BOE	70	0.00	0.00	25,000.00	0.00	0.00	0.00	850.00	25,850.00
BOGOTA HS	2/3/2016 2/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A PARENT CRASHED INTO ON	IE OF THE RAILINGS WHERE TH	E STEPS ARE LE	0.00	0.00	25,000.00	0.00	0.00	0.00	850.00	25,850.00
Total by Claim Number	1 Claim		0.00	0.00	25,000.00	0.00	0.00	0.00	850.00	25,850.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	25,000.00	0.00	0.00	0.00	850.00	25,850.00

Claim Number: 16PR00130E



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NEW CLAIMS

February 2016

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PRO Claim Number: 16PR00										
16PR00130E	BRICK TWP BOE	70	0.00	0.00	125,000.00	0.00	0.00	2,000.00	0.00	127,000.00
BRICK TWP. BOARD OF EDUCA	TIOI 2/6/2016 2/9/2016	Open	0.00	0.00	0.00	0.00	0.00	1,589.60	0.00	1,589.60
ALLEGES PIPE BREAK ON 2ND	FL CAUSING WATER DAMAGE		0.00	0.00	125,000.00	0.00	0.00	410.40	0.00	125,410.40
Total by Claim Number 1	Claim		0.00	0.00	125,000.00	0.00	0.00	2,000.00	0.00	127,000.00
			0.00	0.00	0.00	0.00	0.00	1,589.60	0.00	1,589.60
			0.00	0.00	125,000.00	0.00	0.00	410.40	0.00	125,410.40
Claim Number: 16PR00	131D									
16PR00131D	CLIFFSIDE PARK BOE	70	0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
CLIFFSIDE PARK HIGH SCHOOL	2/12/2016 2/12/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FIRE IN AUDITORIUM,	DRAPES CAUGHT FIRE		0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Total by Claim Number 1	Claim		0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Claim Number: 16PR00	132E									
16PR00132E	MIDDLESEX REG ESC BOE	70	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
BRIGHT BEGINNINGS LEARNING	G CI 2/14/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SPRINKLER PIPE BUF	RST		0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
Total by Claim Number 1	Claim		0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00

Claim Number: 16PR00133D



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NEW CLAIMS

February 2016

repruary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date St	atus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PR Claim Number: 16PR										
16PR00133D	VINELAND CITY BOE	70	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
JOHNSTONE E.S.	2/15/2016 2/16/2016 Op	en	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SPRINKLER HEAD I	FROZE & BURST		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Total by Claim Number	1 Claim		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Claim Number: 16PR	00134D									
16PR00134D	EAST WINDSOR REG BOE	70	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
ETHEL MCKNIGHT E.S.	2/15/2016 2/16/2016 Op	en	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CANOPY FLEW OFF	- & PUNCTURED ROOF IN SEVERAL P	LACES	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number	1 Claim		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Claim Number: 16PR	00135E									
16PR00135E	NORTH HUNTERDON/VOORHE	E 70	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
NORTH HUNTERDON/VOORH	IEES E 2/13/2016 2/16/2016 Op	en	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES PIPE BURST IN COI	NFERENCE ROOM		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number	1 Claim		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00

Claim Number: 16PR00136L



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NEW CLAIMS

February 2016

Tobliadity 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid : Out Rsv
Description of Loss			Out RSV	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PRO Claim Number: 16PR00										
16PR00136L	LITTLE FALLS BOE	70	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
E.S. #3	2/12/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES AMANDA COSTA DRO	OVER INTO FENCE AT SCHOOL	-	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
Total by Claim Number 1	Claim		0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
Claim Number: 16PR00	137D									
16PR00137D	UNION CITY BOE	70	0.00	0.00	250,000.00	0.00	0.00	0.00	0.00	250,000.00
JEFFERSON SCHOOL	2/15/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES BROKEN PIPE ON SE	COND FLOOR		0.00	0.00	250,000.00	0.00	0.00	0.00	0.00	250,000.00
Total by Claim Number 1	Claim		0.00	0.00	250,000.00	0.00	0.00	0.00	0.00	250,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	250,000.00	0.00	0.00	0.00	0.00	250,000.00
Claim Number: 16PR00	138D									
16PR00138D	FLORHAM PARK BOE	70	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
FLORHAM PARK BOE	2/15/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES PIPE BURST 2 CLASS	ROOMS DAMAGED		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Total by Claim Number 1	Claim		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00

Claim Number: 16PR00139E



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NEW CLAIMS

February 2016

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PRO										
16PR00139E	PERTH AMBOY BOE	70	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
PERTH AMBOY H.S.	2/15/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES PIPE BROKE IN GYM	1 CAUSING WATER DAMAGE		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Total by Claim Number	1 Claim		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Claim Number: 16PR0	0140D									
16PR00140D	PROSPECT PARK BOE	70	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
NO. 1 PROSPECT PARK ES	2/13/2016 2/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGS WATER LEAKING THE	ROUGHT HEATING SYSTEM CAU	ISING DAMAGE	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number	1 Claim		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Claim Number: 16PR0	0141E									
16PR00141E	ELIZABETH BOE	70	0.00	2,500.00	25,000.00	0.00	0.00	0.00	0.00	27,500.00
REILLY #7	2/14/2016 2/17/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FROZEN COIL IN GY	M BURST AND DAMAGED FLOO	R	0.00	2,500.00	25,000.00	0.00	0.00	0.00	0.00	27,500.00
Total by Claim Number	1 Claim		0.00	2,500.00	25,000.00	0.00	0.00	0.00	0.00	27,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	2,500.00	25,000.00	0.00	0.00	0.00	0.00	27,500.00

Claim Number: 16PR00142E



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NEW CLAIMS

February 2016

1 editially 2010		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PROF									
16PR00142E	SOUTH BRUNSWICK TWP BOE 70	5,000.00	0.00	12,511.61	0.00	0.00	0.00	0.00	17,511.61
CROSSROADS M S	2/17/2016 2/18/2016 2/25/2016	5,000.00	0.00	12,511.61	0.00	0.00	0.00	0.00	17,511.61
ALLEGES WATER MAIN BREAK		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim	5,000.00	0.00	12,511.61	0.00	0.00	0.00	0.00	17,511.61
		5,000.00	0.00	12,511.61	0.00	0.00	0.00	0.00	17,511.61
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16PR00	143D								
16PR00143D	GLOUCESTER CITY BOE 71	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
JR. & SR. HIGH SCHOOL	2/16/2016 2/18/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STORM RELATED DAM	MAGES	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number 1	Claim	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Claim Number: 16PR00	144E								
16PR00144E	HACKENSACK BOE 70	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
HACKENSACK BOE	2/16/2016 2/19/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CONTENTS FROM FAI	LURE OF SUMP PUMP/EJECTOR CAUSING WA	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
Total by Claim Number 1	Claim	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00

Claim Number: 16PR00145E



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NEW CLAIMS

February 2016

rebruary 2016			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PROP Claim Number: 16PR001										
16PR00145E	WOODBRIDGE TWP BOE	70	0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
WDBG TRANSPORTATION DEPT	2/19/2016 2/19/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WATER PIPE BACK FLO	OW FAILURE CAUSING FLOOI	DING AND DAMA(0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Total by Claim Number 1	Claim		0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00
Claim Number: 16PR001	46D									
16PR00146D	VINELAND CITY BOE	70	0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
VINELAND BOE OFFICE	2/20/2016 2/22/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WATER DAMAGE CAUS	SED BY WATER PURIFIER		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Total by Claim Number 1	Claim		0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	25,000.00	0.00	0.00	0.00	0.00	25,000.00
Claim Number: 16PR001	48D									
16PR00148D	OCEAN TWP BOE	70	0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
WANAMASSA E.S.	2/23/2016 2/24/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES GALVANIZED PIPE DEV	/ELOPED PIN HOLE AND LEA	KED WATER ONT	0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
Total by Claim Number 1	Claim		0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00

Claim Number: 16PR00150L



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NEW CLAIMS

February 2016

. os. aa. y 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Description of Loss	Loss Date Rpt Date	Status	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv	Paid Out Rsv
Major Coverage: 70 - PRO Claim Number: 16PRO										
16PR00150L	ATLANTIC CITY BOE	70	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
ATLANTIC CITY HS	2/9/2016 2/24/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STOLEN LAPTOP			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: 16PR0	0151D									
16PR00151D	GARFIELD BOE	70	0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
GARFIELD HS	2/14/2016 2/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COIL BURST IN CLASSROOM	ON THE FIRST FLOOR RESULTA	NT IN WATER DA	0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
Total by Claim Number	1 Claim		0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	50,000.00	0.00	0.00	0.00	0.00	50,000.00
Claim Number: 16PR0	0152E									
16PR00152E	MIDDLESEX REG ESC BO	DE 70	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
NUVIEW ACADEMY	2/18/2016 2/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES LAMINATING MACHI	NE CAUGHT FIRE		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Total by Claim Number	1 Claim		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00

Claim Number: 16PR00153E



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NEW CLAIMS

February 2016

1 ebidary 2010			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid Out Rsv	Paid Out Rsv	Paid	Paid	Paid Out Rsv	Paid	Paid Out Rsv
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PRO Claim Number: 16PRO										
16PR00153E	DUNELLEN BOE	70	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
JOHN FABER SCHOOL	2/29/2016 3/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WATER CAME DOW	N IN OFFICE RESULTING IN MOLD		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Total by Claim Number	1 Claim		0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Claim Number: 16PR0	0154D									
16PR00154D	WEST ORANGE BOE	70	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
PLEASANTDALE SCHOOL	2/17/2016 3/3/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES POWER FAILURE CA	AUSED DAMAGES TO FIRE ALARM	SYSTEM, MOT	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Total by Claim Number	1 Claim		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Claim Number: 16PR0	0154D/01									
16PR00154D/01	WEST ORANGE BOE	70	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
WEST ORANGE HS	2/17/2016 3/3/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES POWER FAILURE CA	AUSED DAMAGES TO FIRE ALARM	SYSTEM, MOT	0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
Total by Claim Number	1 Claim		0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	30,000.00	0.00	0.00	0.00	0.00	30,000.00

Claim Number: 16PR00155D



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NEW CLAIMS

February 2016

rebluary 2016	Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number Claimant Name Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Loss Date Rpt Date Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid :
Description of Loss	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 70 - PROPERTY Claim Number: 16PR00155D								
16PR00155D SOUTH ORANGE/MAPLEWOOD E 70	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
COLUMBIA HIGH SCHOOL 2/15/2016 3/7/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES PIPE BURST	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Total by Claim Number 1 Claim	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	20,000.00	0.00	0.00	0.00	0.00	20,000.00
Total by Major Coverage 26 Claims	5,000.00	7,500.00	1,055,011.61	0.00	0.00	2,000.00	850.00	1,070,361.61
	5,000.00	0.00	12,511.61	0.00	0.00	1,589.60	0.00	19,101.21
	0.00	7,500.00	1,042,500.00	0.00	0.00	410.40	850.00	1,051,260.40
Grand Totals: 488 Claims	1,625,392.94	150,283.65	1,931,373.41	0.00	0.00	9,500.00	26,350.00	3,742,900.00
	36,412.81	95,055.65	84,026.95	0.00	0.00	1,589.60	384.65	217,469.66
	1,588,980.13	55,228.00	1,847,346.46	0.00	0.00	7,910.40	25,965.35	3,525,430.34



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