

September 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: 16WC07		I								
16WC07753Z	HAYDAK, TABATHA	10	7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
VINELAND SENIOR H.S. NORTH	9 & 9/1/2016 9/1/2016	Open	265.20	1,193.00	1,493.14	0.00	0.00	0.00	0.00	2,951.34
WIGGLING TABLE FULL OF BOO	KS WHEN METAL TABLE CO	LLAPSED ON R FO	7,234.80	0.00	6,006.86	0.00	0.00	0.00	0.00	13,241.66
Total by Claim Number 1	Claim		7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
			265.20	1,193.00	1,493.14	0.00	0.00	0.00	0.00	2,951.34
			7,234.80	0.00	6,006.86	0.00	0.00	0.00	0.00	13,241.66
Claim Number: 16WC07	755W									
16WC07755W	NIGRO, MICHELLE	14	3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
SOUTH RIVER ELEMENTARY SC	HC 9/1/2016 9/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HELPING TEACHERS SET UP CL	ASSROOM LIFTED A CHAIR	OVER HEAD STRA	3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
Total by Claim Number 1	Claim		3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
Claim Number: 16WC07	757V									
16WC07757V	MUGNANO, TERESA	10	16,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	22,693.00
THOMAS B CONLEY ES	9/1/2016 9/2/2016	Open	1,260.55	1,193.00	2,392.32	0.00	0.00	0.00	0.00	4,845.87
WALKING WITH STUDENT TO TR	ASH CAN WHEN ANOTHER	STUDENT RAN INT	15,239.45	0.00	2,607.68	0.00	0.00	0.00	0.00	17,847.13
Total by Claim Number 1	Claim		16,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	22,693.00
			1,260.55	1,193.00	2,392.32	0.00	0.00	0.00	0.00	4,845.87
			15,239.45	0.00	2,607.68	0.00	0.00	0.00	0.00	17,847.13

Claim Number: 16WC07760B



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September 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									
16WC07760B	LODATO, ANNE MARIE	11	127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
THORNE MS	9/1/2016 9/2/2016	10/ 2/2016	127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
SLIPPED ON WET FLOOR CAU	SING HER TO SPLIT INJURED L	HAMSTRING, R I	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim		127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
			127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0)7761W									
16WC07761W	RUBINSTEIN, ANNE	11	106.31	243.00	0.00	0.00	0.00	0.00	0.00	349.31
HIGH SCHOOL	9/1/2016 9/2/2016	10/18/2016	106.31	243.00	0.00	0.00	0.00	0.00	0.00	349.31
WAS ON HER WAY OUT OF DO	OOR, L PINKY FINGER BECAME	WEDGED BETWE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim		106.31	243.00	0.00	0.00	0.00	0.00	0.00	349.31
			106.31	243.00	0.00	0.00	0.00	0.00	0.00	349.31
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0)7762Y									
16WC07762Y	LAWSON, TRACY	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
JOHNSTONE E.S.	9/1/2016 9/2/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SETTING UP CAFETERIA REAC	CXHING FOR NAPKINS ON SHEL	F TRIPPED OVEF	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: 16WC07764B



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September 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: 16WC07										
16WC07764B	WOJCIK, IRENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	9/1/2016 9/1/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SETTING UP HER CLASSROOM	SHE STRUCK HER FOOT ON A	A CHAIR INJ 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: 16WC07	7765B									
16WC07765B	YOSELEVICH, THERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E BRUNSWICK H. S.	9/1/2016 9/2/2016	Open	204.73	243.00	0.00	0.00	0.00	0.00	0.00	447.73
SETTING UP CLASSROOM MOV	ING BOOKS OFF METAL SHEL	F CUT L THUMB	2,295.27	2.00	0.00	0.00	0.00	0.00	0.00	2,297.27
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			204.73	243.00	0.00	0.00	0.00	0.00	0.00	447.73
			2,295.27	2.00	0.00	0.00	0.00	0.00	0.00	2,297.27
Claim Number: 16WC07	7766Y									
16WC07766Y	CIVITANO, MARLA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KEANSBURG HS	9/1/2016 9/2/2016	Open	657.87	243.00	0.00	0.00	0.00	0.00	0.00	900.87
WALKING INTO ENTRANCE WAY	Y R FOOT TWISTED OUTWARD	S INJURED R FO	1,842.13	2.00	0.00	0.00	0.00	0.00	0.00	1,844.13
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			657.87	243.00	0.00	0.00	0.00	0.00	0.00	900.87
			1,842.13	2.00	0.00	0.00	0.00	0.00	0.00	1,844.13

Claim Number: 16WC07767B



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September 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										
16WC07767B	SHEEHAN, EILEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARY VOLZ SCHOOL	9/2/2016 9/2/2016	Open	1,474.58	243.00	0.00	0.00	0.00	0.00	0.00	1,717.58
PLAYING DODGE BALL AND JA	MMED R PINKY FINGER ON BA	LL	1,025.42	2.00	0.00	0.00	0.00	0.00	0.00	1,027.42
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,474.58	243.00	0.00	0.00	0.00	0.00	0.00	1,717.58
			1,025.42	2.00	0.00	0.00	0.00	0.00	0.00	1,027.42
Claim Number: 16WC0	7768W									
16WC07768W	LINDER, EILEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HORACE MANN SCHOOL	9/1/2016 9/6/2016	Open	225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
SETTING UP CLASSROOM WAS	S PULLING A 6FOOT TABLE TO	WARDS THE BAC	2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
			2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Claim Number: 16WC0	7769Z									
16WC07769Z	KAISERMAN, CLAUDIA	10	40,000.00	1,193.00	23,000.00	0.00	0.00	0.00	0.00	64,193.00
SACRED HEART SCHOOL	9/2/2016 9/6/2016	Open	8,119.56	1,193.00	4,230.57	0.00	0.00	0.00	0.00	13,543.13
WALKING DOWN STAIRS AND	SLIPPED OFF LAST STEP INJU	RED R ANKLE, L K	31,880.44	0.00	18,769.43	0.00	0.00	0.00	0.00	50,649.87
Total by Claim Number	1 Claim		40,000.00	1,193.00	23,000.00	0.00	0.00	0.00	0.00	64,193.00
			8,119.56	1,193.00	4,230.57	0.00	0.00	0.00	0.00	13,543.13
			31,880.44	0.00	18,769.43	0.00	0.00	0.00	0.00	50,649.87

Claim Number: 16WC07770G



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ivers@summitrisk.com



September 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: 16WC0		I								
16WC07770G	RICHKUS, ROBERT	10	3,110.44	1,193.00	0.00	0.00	0.00	0.00	0.00	4,303.44
GRANT SCHOOL	9/2/2016 9/2/2016	10/18/2016	3,110.44	1,193.00	0.00	0.00	0.00	0.00	0.00	4,303.44
RUNNING AFTER STUDENT TRY	YING TO LEAVE SCHOOL FEL	T PAIN IN R CALF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		3,110.44	1,193.00	0.00	0.00	0.00	0.00	0.00	4,303.44
			3,110.44	1,193.00	0.00	0.00	0.00	0.00	0.00	4,303.44
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	7771B									
16WC07771B	PERSILY, DAVID	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAK ST ES	9/2/2016 9/6/2016	Open	256.88	243.00	0.00	0.00	0.00	0.00	0.00	499.88
PUSHING A CHIAR WITH WHEE	LS CHAIR BECAME CAUGHT	ON MAT TRIPPED	2,243.12	2.00	0.00	0.00	0.00	0.00	0.00	2,245.12
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			256.88	243.00	0.00	0.00	0.00	0.00	0.00	499.88
			2,243.12	2.00	0.00	0.00	0.00	0.00	0.00	2,245.12
Claim Number: 16WC0	7772B									
16WC07772B	FROCKOWIAK, LAWREN	ICE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH EAST HS	9/2/2016 9/6/2016	Open	211.40	243.00	0.00	0.00	0.00	0.00	0.00	454.40
OPENING A CABINET DOOR WA	AS STUNG BY A WASP ON L H	AND	2,288.60	2.00	0.00	0.00	0.00	0.00	0.00	2,290.60
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			211.40	243.00	0.00	0.00	0.00	0.00	0.00	454.40
			2,288.60	2.00	0.00	0.00	0.00	0.00	0.00	2,290.60

Claim Number: 16WC07774I



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September 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										
16WC07774I	RUBINSKY, TIFFANY	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
J.ACKERMAN COLES ES	9/1/2016 9/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING IN HALLWAY FELT A	POP IN L HIP SHE FELL CAUSI	NG FRACTURE	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	7775W									
16WC07775W	CHERNY, BONNIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BENJAMIN FRANKLIN ES	9/1/2016 9/6/2016	Open	204.85	243.00	0.00	0.00	0.00	0.00	0.00	447.85
CLMT WAS WALKING DOWN H	ALLWAY WHEN SHE SLIPPED A	ND FELL ON WE	2,295.15	2.00	0.00	0.00	0.00	0.00	0.00	2,297.15
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			204.85	243.00	0.00	0.00	0.00	0.00	0.00	447.85
			2,295.15	2.00	0.00	0.00	0.00	0.00	0.00	2,297.15
Claim Number: 16WC0	7777F									
16WC07777F	BOGDAN, JOANNE	10	2,500.00	1,336.00	7,500.00	0.00	0.00	0.00	0.00	11,336.00
HAMILTON NORTH NOTTINGH	AM H 9/2/2016 9/6/2016	Open	1,354.51	1,336.00	2,315.12	0.00	0.00	0.00	0.00	5,005.63
TRIPPED OVER A ROLLED UP	MAT SHE FELL ON BOTH KNEE	S, R ANKLE/CALF	1,145.49	0.00	5,184.88	0.00	0.00	0.00	0.00	6,330.37
Total by Claim Number	1 Claim		2,500.00	1,336.00	7,500.00	0.00	0.00	0.00	0.00	11,336.00
-			1,354.51	1,336.00	2,315.12	0.00	0.00	0.00	0.00	5,005.63
			1,145.49	0.00	5,184.88	0.00	0.00	0.00	0.00	6,330.37

Claim Number: 16WC07778W



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September 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: 16WC07										
16WC07778W	GALICO, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LALOR E.S.	9/6/2016 9/6/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
KNEELING DOWN TO GET ITEMS	S OFF BOTTOM SHELF A PIEC	CE OF SCRAP ME	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	779Y									
16WC07779Y	MONKS, LISA	11	113.00	243.00	0.00	0.00	0.00	0.00	0.00	356.00
NORTH HUNTERDON H S	9/2/2016 9/6/2016	10/ 4/2016	113.00	243.00	0.00	0.00	0.00	0.00	0.00	356.00
TRIPPEDAND FELL ON EXPOSE	D ELECTRICAL OUTLET ON F	LOOR FELL INTO	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		113.00	243.00	0.00	0.00	0.00	0.00	0.00	356.00
			113.00	243.00	0.00	0.00	0.00	0.00	0.00	356.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC07	780B									
16WC07780B	SULESKI, KATHRYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E BRUNSWICK H. S.	9/2/2016 9/6/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
SLIPPED ON WET FLOOR INJUR	ED NECK, BACK, R ELBOW, L	FOOT	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: 16WC07782B



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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 - WOR Claim Number: 16WC0										
16WC07782B	PORCELLI, MICHAEL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SCHOOL #4 ES	9/6/2016 9/7/2016	10/17/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LOOKING IN A CRATE FOR A HA	AMMER CUT L INDEX FINGER		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	7783Y									
16WC07783Y	CARTER, NICOLETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #4 ES	9/6/2016 9/7/2016	Open	42.44	243.00	0.00	0.00	0.00	0.00	0.00	285.44
SETTING UP CLASSROOM WHI	LE PULLING DOWN A WINDOW	V SHADE CAME O	2,457.56	2.00	0.00	0.00	0.00	0.00	0.00	2,459.56
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			42.44	243.00	0.00	0.00	0.00	0.00	0.00	285.44
			2,457.56	2.00	0.00	0.00	0.00	0.00	0.00	2,459.56
Claim Number: 16WC0	7784B									
16WC07784B	GERSHENOW, ROSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DWIGHT D EISENHOWER E.S.	9/2/2016 9/7/2016	Open	905.88	243.00	0.00	0.00	0.00	0.00	0.00	1,148.88
WALKING FROM LIBRARY SLIPP	PED ON WET FLOOR AND LAN	IDED ON L KNEE #	1,594.12	2.00	0.00	0.00	0.00	0.00	0.00	1,596.12
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			905.88	243.00	0.00	0.00	0.00	0.00	0.00	1,148.88
			1,594.12	2.00	0.00	0.00	0.00	0.00	0.00	1,596.12

Claim Number: 16WC07785W



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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 Co	v 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: 16WC07									
16WC07785W	IMBACHI, JOSE	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GROUNDS AND PROPERTY MAI	NTI 9/3/2016 9/7/2016 Open	175.00	243.00	0.00	0.00	0.00	0.00	0.00	418.00
TRIMMING BUSHES ACCIDENTL	Y STRUCK HIS L LOWER LEG WITH TRI	MMER (2,325.00	2.00	0.00	0.00	0.00	0.00	0.00	2,327.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		175.00	243.00	0.00	0.00	0.00	0.00	0.00	418.00
		2,325.00	2.00	0.00	0.00	0.00	0.00	0.00	2,327.00
Claim Number: 16WC07	786Z								
16WC07786Z	KIRK, BRELYN	10 35,000.00	1,193.00	30,000.00	0.00	0.00	0.00	0.00	66,193.00
NORTH STAR ACADEMY BOE	9/6/2016 9/7/2016 Open	732.96	1,193.00	2,153.84	0.00	0.00	0.00	0.00	4,079.80
WALKING DOWN STAIRS SLIPPE	ED AND FELL INJURED MID/LOW BACK	34,267.04	0.00	27,846.16	0.00	0.00	0.00	0.00	62,113.20
Total by Claim Number 1	Claim	35,000.00	1,193.00	30,000.00	0.00	0.00	0.00	0.00	66,193.00
		732.96	1,193.00	2,153.84	0.00	0.00	0.00	0.00	4,079.80
		34,267.04	0.00	27,846.16	0.00	0.00	0.00	0.00	62,113.20
Claim Number: 16WC07	787W								
16WC07787W	CANFIELD-GASKILL, MELODY	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INST.OF TECH - MEDFORD CAM	PU: 9/6/2016 9/7/2016 Open	307.73	243.00	0.00	0.00	0.00	0.00	0.00	550.73
GETTING HER GYM BAG FROM	VEHICLE ACCIDENTLY CLOSED CAR D	DOR ON 2,192.27	2.00	0.00	0.00	0.00	0.00	0.00	2,194.27
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		307.73	243.00	0.00	0.00	0.00	0.00	0.00	550.73
		2,192.27	2.00	0.00	0.00	0.00	0.00	0.00	2,194.27

Claim Number: 16WC07788Y



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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 - WOR Claim Number: 16WC07										
16WC07788Y	SHOTLIFF, CYNTHIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYSHORE MS	9/1/2016 9/7/2016	Open	194.48	243.00	0.00	0.00	0.00	0.00	0.00	437.48
PACKING BOXES OF BOOKS WA	AS CARRYING THEM TO HER	CAR, STRAINED L	2,305.52	2.00	0.00	0.00	0.00	0.00	0.00	2,307.52
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			194.48	243.00	0.00	0.00	0.00	0.00	0.00	437.48
			2,305.52	2.00	0.00	0.00	0.00	0.00	0.00	2,307.52
Claim Number: 16WC07	7789T									
16WC07789T	D'MARTINO, PHILIP	10	2,500.00	1,195.00	0.00	0.00	0.00	0.00	0.00	3,695.00
HIGH TECH HS	9/6/2016 9/7/2016	Open	405.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,598.95
LIFTING MILK CRATE WITH APP	ROX. 10 BOOKS FELT A POP I	N R ELBOW	2,094.05	2.00	0.00	0.00	0.00	0.00	0.00	2,096.05
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
			405.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,598.95
			2,094.05	2.00	0.00	0.00	0.00	0.00	0.00	2,096.05
Claim Number: 16WC07	7790W									
16WC07790W	PENDER, JULIET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW EGYPT HS	9/1/2016 9/7/2016	Open	197.82	243.00	0.00	0.00	0.00	0.00	0.00	440.82
MOVING A BOOK CASE JAMME	D R BIG TOE		2,302.18	2.00	0.00	0.00	0.00	0.00	0.00	2,304.18
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			197.82	243.00	0.00	0.00	0.00	0.00	0.00	440.82
			2,302.18	2.00	0.00	0.00	0.00	0.00	0.00	2,304.18

Claim Number: 16WC07791Y



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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										
16WC07791Y	STREET, RONALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAREHOUSE	9/2/2016 9/7/2016	Open	270.36	243.00	0.00	0.00	0.00	0.00	0.00	513.36
LIFTING AND MOVING BOXES F	ROM INSIDE SCHOOL ONTO W	VORK TRUCK INJ	2,229.64	2.00	0.00	0.00	0.00	0.00	0.00	2,231.64
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			270.36	243.00	0.00	0.00	0.00	0.00	0.00	513.36
			2,229.64	2.00	0.00	0.00	0.00	0.00	0.00	2,231.64
Claim Number: 16WC0	7792W									
16WC07792W	JASHAR, DORJEE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
E.S. #3	9/6/2016 9/7/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
UNSCREWING TABLE LEG LOS	T HANDLING OF TOOL STUCK	HAND AGAINST N	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	7793B									
16WC07793B	CHARLOP, JUNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL ES	9/6/2016 9/7/2016	Open	320.00	243.00	0.00	0.00	0.00	0.00	0.00	563.00
HANDING OUT BOOKS TRIPPE	D OVER CHAIR LEG AND FELL	BACKWARDS INJ	2,180.00	2.00	0.00	0.00	0.00	0.00	0.00	2,182.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			320.00	243.00	0.00	0.00	0.00	0.00	0.00	563.00
			2,180.00	2.00	0.00	0.00	0.00	0.00	0.00	2,182.00

Claim Number: 16WC07794Y



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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 - WOR Claim Number: 16WC07										
16WC07794Y	FAGAN, JACQUELINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN SCHOOL	9/2/2016 9/7/2016	Open	569.92	243.00	0.00	0.00	0.00	0.00	0.00	812.92
TRIPPED OVER RUG SHE FELL F	ITTING HEAD AGAINST DICT	IONARY CART IN,	1,930.08	2.00	0.00	0.00	0.00	0.00	0.00	1,932.08
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			569.92	243.00	0.00	0.00	0.00	0.00	0.00	812.92
			1,930.08	2.00	0.00	0.00	0.00	0.00	0.00	1,932.08
Claim Number: 16WC07	795W									
16WC07795W	BOBENCHIK, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	9/6/2016 9/7/2016	Open	1,569.62	243.00	0.00	0.00	0.00	0.00	0.00	1,812.62
SLIPPED ON FLOOR AND INJUR	ED L WRIST AND R KNEE		930.38	2.00	0.00	0.00	0.00	0.00	0.00	932.38
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,569.62	243.00	0.00	0.00	0.00	0.00	0.00	1,812.62
			930.38	2.00	0.00	0.00	0.00	0.00	0.00	932.38
Claim Number: 16WC07	796W									
16WC07796W	ROPER, JANICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS E. BOWE E.S.	9/6/2016 9/7/2016	Open	140.47	243.00	0.00	0.00	0.00	0.00	0.00	383.47
STANDING ON CHAIR TO DECOR	RATE BULLETIN BOARD SLIP	PED AND FELL IN、	2,359.53	2.00	0.00	0.00	0.00	0.00	0.00	2,361.53
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			140.47	243.00	0.00	0.00	0.00	0.00	0.00	383.47
			2,359.53	2.00	0.00	0.00	0.00	0.00	0.00	2,361.53

Claim Number: 16WC07798Y



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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 - WOR Claim Number: 16WC07										
16WC07798Y	JAROSSI, LAURA	11	1,576.37	243.00	0.00	0.00	0.00	0.00	0.00	1,819.37
UNION HIGH SCHOOL (UNION)	9/1/2016 9/7/2016	10/11/2016	1,576.37	243.00	0.00	0.00	0.00	0.00	0.00	1,819.37
MOVING SHELVES ON WHEEL W	HEN HER HAND, L RING FIN	GER BECAME WE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		1,576.37	243.00	0.00	0.00	0.00	0.00	0.00	1,819.37
			1,576.37	243.00	0.00	0.00	0.00	0.00	0.00	1,819.37
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC077	799B									
16WC07799B	HEISCH, ANDREA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLESEX HS	9/2/2016 9/7/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FILING A LARGE HEAVY FILE INT	O CABINET FELT A POP IN L	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: 16WC078	300M									
16WC07800M	MERCADO, LUZ	10	2,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	18,693.00
BROAD STREET SCHOOL	9/6/2016 9/6/2016	Open	245.42	1,193.00	1,180.80	0.00	0.00	0.00	0.00	2,619.22
VACUUMING THE FLOOR SHE TR	RIPPED ON THE CORD & FEL	L ONTO HER LT K	2,254.58	0.00	13,819.20	0.00	0.00	0.00	0.00	16,073.78
Total by Claim Number 1	Claim		2,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	18,693.00
			245.42	1,193.00	1,180.80	0.00	0.00	0.00	0.00	2,619.22
			2,254.58	0.00	13,819.20	0.00	0.00	0.00	0.00	16,073.78

Claim Number: 16WC07802Z



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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 - WORK Claim Number: 16WC078										
16WC07802Z	GAGUSKI, ROXANNE	10	2,500.00	1,193.00	3,527.48	0.00	0.00	0.00	0.00	7,220.48
RIDGEFIELD PARK HIGH SCHOOL	9/1/2016 9/7/2016	Open	1,381.37	1,193.00	3,527.48	0.00	0.00	0.00	0.00	6,101.85
OPENING DOOR FOR SOMEONE S	SHE SLIPPED AND FELL ON	WAXED FLOOR II	1,118.63	0.00	0.00	0.00	0.00	0.00	0.00	1,118.63
Total by Claim Number 1 C	laim		2,500.00	1,193.00	3,527.48	0.00	0.00	0.00	0.00	7,220.48
			1,381.37	1,193.00	3,527.48	0.00	0.00	0.00	0.00	6,101.85
			1,118.63	0.00	0.00	0.00	0.00	0.00	0.00	1,118.63
Claim Number: 16WC078	05A									
16WC07805A	COUGHLIN, FRANCES	10	25,000.00	3,693.00	57,500.00	0.00	0.00	0.00	0.00	86,193.00
HAMILTON EAST-STEINART H.S.	9/6/2016 9/7/2016	Open	1,401.12	1,193.00	4,772.40	0.00	0.00	0.00	0.00	7,366.52
WENT TO SIT ON STOOL WITH WH	HEELS THE STOOL MOVED	SHE FELL HITTIN	23,598.88	2,500.00	52,727.60	0.00	0.00	0.00	0.00	78,826.48
Total by Claim Number 1 C	laim		25,000.00	3,693.00	57,500.00	0.00	0.00	0.00	0.00	86,193.00
			1,401.12	1,193.00	4,772.40	0.00	0.00	0.00	0.00	7,366.52
			23,598.88	2,500.00	52,727.60	0.00	0.00	0.00	0.00	78,826.48
Claim Number: 16WC078	06Т									
16WC07806T	ZIMMER, LORETTA	10	25,000.00	1,193.00	29,172.00	0.00	0.00	0.00	0.00	55,365.00
MIDDLE ROAD ES	9/1/2016 9/7/2016	Open	0.00	1,193.00	5,226.00	0.00	0.00	0.00	0.00	6,419.00
OPENED HEAVY DOOR, SHE COLI	LAPSED STRIKING AGAINS	f door with l le	25,000.00	0.00	23,946.00	0.00	0.00	0.00	0.00	48,946.00
Total by Claim Number 1 C	laim		25,000.00	1,193.00	29,172.00	0.00	0.00	0.00	0.00	55,365.00
			0.00	1,193.00	5,226.00	0.00	0.00	0.00	0.00	6,419.00
			25,000.00	0.00	23,946.00	0.00	0.00	0.00	0.00	48,946.00

Claim Number: 16WC07807Y



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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 - WOR Claim Number: 16WC07										
16WC07807Y	KUSHNIR-CORCIONE, KA	THLEEI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP M.S.	9/6/2016 9/7/2016	Open	170.00	243.00	0.00	0.00	0.00	0.00	0.00	413.00
WALKING IN THE HALLWAY HEI	R RT FOOT TWISTED CAUSING	HER TO FALL IN	2,330.00	2.00	0.00	0.00	0.00	0.00	0.00	2,332.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			170.00	243.00	0.00	0.00	0.00	0.00	0.00	413.00
			2,330.00	2.00	0.00	0.00	0.00	0.00	0.00	2,332.00
Claim Number: 16WC07	7808W									
16WC07808W	RODRIGUEZ, ASHLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRENTON CENTRAL HS MAIN C	AMI 9/6/2016 9/6/2016	Open	2,213.58	243.00	0.00	0.00	0.00	0.00	0.00	2,456.58
WALKING WITH A BOX OF SUPP	PLIES WHEN SHE STEPPED IN A	A DIP OF PAVEM	286.42	2.00	0.00	0.00	0.00	0.00	0.00	288.42
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			2,213.58	243.00	0.00	0.00	0.00	0.00	0.00	2,456.58
			286.42	2.00	0.00	0.00	0.00	0.00	0.00	288.42
Claim Number: 16WC07	7809B									
16WC07809B	CATANZARO, DOREEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	9/7/2016 9/8/2016	Open	412.50	243.00	0.00	0.00	0.00	0.00	0.00	655.50
DRIVING SCHOOL VAN WAS INV	VOLVED IN MVA INJURED HEAD	D, NECK, AND UF	2,087.50	2.00	0.00	0.00	0.00	0.00	0.00	2,089.50
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			412.50	243.00	0.00	0.00	0.00	0.00	0.00	655.50
			2,087.50	2.00	0.00	0.00	0.00	0.00	0.00	2,089.50

Claim Number: 16WC07810G



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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 - WORI Claim Number: 16WC07		N								
16WC07810G	PARISI, JEANNINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	9/7/2016 9/8/2016	Open	1,182.91	243.00	0.00	0.00	0.00	0.00	0.00	1,425.91
BUS AIDE IN VAN INVOLVED IN M	IVA INJURED CHEEK, LOW	ER BACK	1,317.09	2.00	0.00	0.00	0.00	0.00	0.00	1,319.09
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,182.91	243.00	0.00	0.00	0.00	0.00	0.00	1,425.91
			1,317.09	2.00	0.00	0.00	0.00	0.00	0.00	1,319.09
Claim Number: 16WC07	811Y									
16WC07811Y	MORLAND, DEMI	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
JUDD SCHOOL	9/7/2016 9/7/2016	9/28/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD HAVING A BEHAVIORAL G	RABBED HER LT LEG & BI	HER CALF BREAK	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: 16WC07	813Y									
16WC07813Y	GROM, JONATHAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARKER SCHOOL	9/7/2016 9/7/2016	Open	143.43	243.00	0.00	0.00	0.00	0.00	0.00	386.43
LIFTING BOXES FULL OF PAPER	HE FELT A WARM SENSAT	ION & PAIN FROM I	2,356.57	2.00	0.00	0.00	0.00	0.00	0.00	2,358.57
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			143.43	243.00	0.00	0.00	0.00	0.00	0.00	386.43
			2,356.57	2.00	0.00	0.00	0.00	0.00	0.00	2,358.57

Claim Number: 16WC07814Y



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September 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: 16WC07										
16WC07814Y	GERRY, VICTORIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WHITON ES	9/6/2016 9/6/2016	Open	61.80	243.00	0.00	0.00	0.00	0.00	0.00	304.80
PUTTING UP POSTERS, STEPP	ING DOWN FROM A CHAIR SH	E FELT SOMETHII	2,438.20	2.00	0.00	0.00	0.00	0.00	0.00	2,440.20
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			61.80	243.00	0.00	0.00	0.00	0.00	0.00	304.80
			2,438.20	2.00	0.00	0.00	0.00	0.00	0.00	2,440.20
Claim Number: 16WC07	7815T									
16WC07815T	FEOLA, KAREN	10	15,000.00	1,193.00	28,625.00	0.00	0.00	0.00	0.00	44,818.00
RINGWOOD BOARD OF EDUCA	TION 9/6/2016 9/7/2016	Open	189.54	1,193.00	0.00	0.00	0.00	0.00	0.00	1,382.54
SITTING ON CHAIR STRADDLIN	G STUDENTS CHAIR WITH HE	R LEGS TO REST	14,810.46	0.00	28,625.00	0.00	0.00	0.00	0.00	43,435.46
Total by Claim Number 1	Claim		15,000.00	1,193.00	28,625.00	0.00	0.00	0.00	0.00	44,818.00
			189.54	1,193.00	0.00	0.00	0.00	0.00	0.00	1,382.54
			14,810.46	0.00	28,625.00	0.00	0.00	0.00	0.00	43,435.46
Claim Number: 16WC07	7817Z									
16WC07817Z	MOSS, ROBERT	10	30,000.00	1,195.00	11,000.00	0.00	0.00	0.00	0.00	42,195.00
ATLANTIC COUNTY SPECIAL SE	ERV 9/7/2016 9/7/2016	Open	285.20	1,193.00	1,742.00	0.00	0.00	0.00	0.00	3,220.20
STUDENT HAVING BEHAVIORA	L OUTBURST STUDENT PUSH	ED ONTO HER SE	29,714.80	2.00	9,258.00	0.00	0.00	0.00	0.00	38,974.80
Total by Claim Number 1	Claim		30,000.00	1,195.00	11,000.00	0.00	0.00	0.00	0.00	42,195.00
			285.20	1,193.00	1,742.00	0.00	0.00	0.00	0.00	3,220.20
			29,714.80	2.00	9,258.00	0.00	0.00	0.00	0.00	38,974.80

Claim Number: 16WC07818Y



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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 - WOR Claim Number: 16WC07										
16WC07818Y	HANSEN, FELICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	9/1/2016 9/7/2016	Open	161.74	243.00	0.00	0.00	0.00	0.00	0.00	404.74
USING T-SHIRT LAUNCHERS TO	D GIVE OUT T-SHIRTS WHEN S	HE WAS STRUCK	2,338.26	2.00	0.00	0.00	0.00	0.00	0.00	2,340.26
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			161.74	243.00	0.00	0.00	0.00	0.00	0.00	404.74
			2,338.26	2.00	0.00	0.00	0.00	0.00	0.00	2,340.26
Claim Number: 16WC07	781 9W									
16WC07819W	BAVOSA-YAROSH, LINDA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ELYSIAN CHTR SCHOOL	9/7/2016 9/7/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS WHEN	SHE MISSED A STEP AND FE	LL FORWARD INJ	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: 16WC07	7820Y									
16WC07820Y	BARNES, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER SC	CH V 9/7/2016 9/7/2016	Open	348.71	243.00	0.00	0.00	0.00	0.00	0.00	591.71
SHOWING STUDENT PROPER V	WAY TO HIT VOLLEYBALL INJU	RED L SHOULDE	2,151.29	2.00	0.00	0.00	0.00	0.00	0.00	2,153.29
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			348.71	243.00	0.00	0.00	0.00	0.00	0.00	591.71
			2,151.29	2.00	0.00	0.00	0.00	0.00	0.00	2,153.29

Claim Number: 16WC07822Y



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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 - WOR Claim Number: 16WC07										
16WC07822Y	KELLERMAN, LAURIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
C RICHARD APPLEGATE E.S.	9/7/2016 9/7/2016	Open	442.00	243.00	0.00	0.00	0.00	0.00	0.00	685.00
LOST HER FOOTING AND FELL I	INJURED CHIN, L KNEE, R WRI	IST	2,058.00	2.00	0.00	0.00	0.00	0.00	0.00	2,060.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			442.00	243.00	0.00	0.00	0.00	0.00	0.00	685.00
			2,058.00	2.00	0.00	0.00	0.00	0.00	0.00	2,060.00
Claim Number: 16WC07	′823W									
16WC07823W	HINDERLONG, BRYON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE VALLEY H.S.	9/2/2016 9/7/2016	Open	181.04	243.00	0.00	0.00	0.00	0.00	0.00	424.04
CUTTING TREES GOT POISON IN	VY ON ARMS, WRISTS TO SHO	DULDERS	2,318.96	2.00	0.00	0.00	0.00	0.00	0.00	2,320.96
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			181.04	243.00	0.00	0.00	0.00	0.00	0.00	424.04
			2,318.96	2.00	0.00	0.00	0.00	0.00	0.00	2,320.96
Claim Number: 16WC07	'824B									
16WC07824B	MILANO, AMY	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MARY F JANVIER E.S.	9/6/2016 9/7/2016	10/12/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON FLOOR AND FELL I	NJURED MULTI BODY IS 35 WI	EEKS PREGNAN	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: 16WC07825B



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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										
16WC07825B	BREMER, SAMANTHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHUYLER-COLFAX M.S.	9/6/2016 9/8/2016	Open	450.36	243.00	0.00	0.00	0.00	0.00	0.00	693.36
WALKING WITH STUDENTS ON	SOCCER FIELD TWISTED HER	FOOT IN HOLE A	2,049.64	2.00	0.00	0.00	0.00	0.00	0.00	2,051.64
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
			450.36	243.00	0.00	0.00	0.00	0.00	0.00	693.36
			2,049.64	2.00	0.00	0.00	0.00	0.00	0.00	2,051.64
Claim Number: 16WC0	7826W									
16WC07826W	MATOS, CASTURINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SENIOR HS	9/6/2016 9/8/2016	Open	267.29	243.00	0.00	0.00	0.00	0.00	0.00	510.29
DROPPED CLEANING RAG STE	EPPED ON RAG SLIPPED AND FE	ELL INJURED BO	2,232.71	2.00	0.00	0.00	0.00	0.00	0.00	2,234.71
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
			267.29	243.00	0.00	0.00	0.00	0.00	0.00	510.29
			2,232.71	2.00	0.00	0.00	0.00	0.00	0.00	2,234.71
Claim Number: 16WC0	7827A									
16WC07827A	SCHREIBER, JENNIFER	11	0.00	2,743.00	2,500.00	0.00	0.00	3,500.00	0.00	8,743.00
MAYS LANDING CAMPUS	9/7/2016 9/7/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	RAL STRUCK HER SEVERAL TIM	IES INJURING HE	0.00	2,500.00	2,500.00	0.00	0.00	3,500.00	0.00	8,500.00
Total by Claim Number 1	I Claim		0.00	2,743.00	2,500.00	0.00	0.00	3,500.00	0.00	8,743.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			0.00	2,500.00	2,500.00	0.00	0.00	3,500.00	0.00	8,500.00

Claim Number: 16WC07828W



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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										
16WC07828W	SIETZ, LAUREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARL SANDBURG MS	9/7/2016 9/8/2016	Open	106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
WALKING DOWN HALLWAY SLI	PPED ON WAXED FLOOR INJU	RED LOWER BAC	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	7829B									
16WC07829B	MCCLOSKEY, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST DEPTFORD MS	9/7/2016 9/8/2016	Open	556.68	243.00	0.00	0.00	0.00	0.00	0.00	799.68
PLACED FOOT ON STOOL THE	STOOL SLID CUTTING R THUN	IB ON PIECE OF I	1,943.32	2.00	0.00	0.00	0.00	0.00	0.00	1,945.32
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			556.68	243.00	0.00	0.00	0.00	0.00	0.00	799.68
			1,943.32	2.00	0.00	0.00	0.00	0.00	0.00	1,945.32
Claim Number: 16WC0	7830B									
16WC07830B	IKE-EGOLUM, NKIRUKA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DR. LENA EDWARDS ACADEMI	C CF 9/7/2016 9/8/2016	Open	789.61	243.00	0.00	0.00	0.00	0.00	0.00	1,032.61
COMING DOWN THE STAIRS R	FOOT SLIPPED SHE FELL DOV	VN 3 STEPS INJUI	1,710.39	2.00	0.00	0.00	0.00	0.00	0.00	1,712.39
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			789.61	243.00	0.00	0.00	0.00	0.00	0.00	1,032.61
			1,710.39	2.00	0.00	0.00	0.00	0.00	0.00	1,712.39

Claim Number: 16WC07832B



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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 - WOR Claim Number: 16WC07		N								
16WC07832B	LISKA, MICHELE	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PERTH AMBOY H.S.	9/7/2016 9/7/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHOPPING VEGETABLES WHEN	I SHE CUT THE TIP OF HER	LT RING FINGER	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: 16WC07	833W									
16WC07833W	MARIANO-BRANDAO,	ROSA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	9/7/2016 9/8/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS ASSISTING A SPEC E	ED STUDENT TO THE BATH	ROOM AND WAS PL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	834W									
16WC07834W	HORNER, EVELYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BUTLER HS	9/8/2016 9/8/2016	Open	619.18	243.00	0.00	0.00	0.00	0.00	0.00	862.18
OPENING BOXES USING A BOX	CUTTER WHEN SHE CUT H	IER L MIDDLE FINGE	1,880.82	2.00	0.00	0.00	0.00	0.00	0.00	1,882.82
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			619.18	243.00	0.00	0.00	0.00	0.00	0.00	862.18
			1,880.82	2.00	0.00	0.00	0.00	0.00	0.00	1,882.82

Claim Number: 16WC07835T



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September 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: 16WC07										
16WC07835T	WILLIAMSON, RONALD	11	22,500.00	1,193.00	49,737.12	0.00	0.00	0.00	0.00	73,430.12
ADMIN BLDG	9/1/2016 9/8/2016	Open	1,959.32	243.00	1,311.76	0.00	0.00	0.00	0.00	3,514.08
OPENED TAILGATE AND WAS S	TRUCK BY AN OBJECT ON HE	AD CAUSING LAC	20,540.68	950.00	48,425.36	0.00	0.00	0.00	0.00	69,916.04
Total by Claim Number 1	Claim		22,500.00	1,193.00	49,737.12	0.00	0.00	0.00	0.00	73,430.12
			1,959.32	243.00	1,311.76	0.00	0.00	0.00	0.00	3,514.08
			20,540.68	950.00	48,425.36	0.00	0.00	0.00	0.00	69,916.04
Claim Number: 16WC07	/836B									
16WC07836B	CORRADI, YVETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LEBANON BORO ES	9/7/2016 9/8/2016	Open	379.52	243.00	0.00	0.00	0.00	0.00	0.00	622.52
WALKING AROUND DESK R FOO	OT TWISTED SHE FELL ON BU	TTOCKS	2,120.48	2.00	0.00	0.00	0.00	0.00	0.00	2,122.48
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			379.52	243.00	0.00	0.00	0.00	0.00	0.00	622.52
			2,120.48	2.00	0.00	0.00	0.00	0.00	0.00	2,122.48
Claim Number: 16WC07	7837Y									
16WC07837Y	OLSON, DENISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPME	ENT. 9/7/2016 9/8/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING ON SIDEWALK A LARC	GE BUG STARTLED HER CAUS	SED HER TO JUMI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07838Y



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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 - WOR Claim Number: 16WC07										
16WC07838Y	AVILES, JUAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK REGIONAL HS	9/8/2016 9/8/2016	Open	340.00	243.00	0.00	0.00	0.00	0.00	0.00	583.00
TRIMMING GRASS STRUCK A PL	LASTIC BALL CAUSING BALL 1	O HIT R KNEE	2,160.00	2.00	0.00	0.00	0.00	0.00	0.00	2,162.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			340.00	243.00	0.00	0.00	0.00	0.00	0.00	583.00
			2,160.00	2.00	0.00	0.00	0.00	0.00	0.00	2,162.00
Claim Number: 16WC07	'839G									
16WC07839G	ROBBINS, TIMOTHY	10	2,501.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,694.00
BRIDGEWATER-RARITAN HS	9/8/2016 9/8/2016	Open	462.60	1,193.00	0.00	0.00	0.00	0.00	0.00	1,655.60
STOCKING COPY PAPER BY CO	PIERS LIFTING PAPER PAIN II	N L ENTIRE ARM	2,038.40	0.00	0.00	0.00	0.00	0.00	0.00	2,038.40
Total by Claim Number 1	Claim		2,501.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,694.00
			462.60	1,193.00	0.00	0.00	0.00	0.00	0.00	1,655.60
			2,038.40	0.00	0.00	0.00	0.00	0.00	0.00	2,038.40
Claim Number: 16WC07	'840B									
16WC07840B	TAVERNA, VIRGINIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST FREEHOLD E.S.	9/8/2016 9/8/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIDING CHAIR UNDERNEATH D	DESK WHEN CHAIR BECAME S	STUCK SHE FELL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07842Y



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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										
16WC07842Y	MONGELLI, CHRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER ELEMENTARY S	CHC 9/8/2016 9/8/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENT WHEN TH	IE STUDENT HAD AN OUTBUR	ST AND BIT L WR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7843W									
16WC07843W	MCCANN, KELLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLI F. BENNETT ES	9/6/2016 9/8/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON NEWLY WAXED FL	OOR AND FELL INJURED R KN	IEE, SHIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7845Y									
16WC07845Y	SLOWIK, ADAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 4 ANNEX	9/8/2016 9/9/2016	Open	271.72	243.00	0.00	0.00	0.00	0.00	0.00	514.72
DELIVERING SUPPLIES WITH H	AND TRUCK THE POLE WAS P	ROPPING THE D	2,228.28	2.00	0.00	0.00	0.00	0.00	0.00	2,230.28
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			271.72	243.00	0.00	0.00	0.00	0.00	0.00	514.72
			2,228.28	2.00	0.00	0.00	0.00	0.00	0.00	2,230.28

Claim Number: 16WC07846Y



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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 - WO Claim Number: 16WC0	RKERS' COMPENSATION									
16WC07846Y	MILLS, JANET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOPEWELL ES	9/7/2016 9/9/2016	Open	213.05	243.00	0.00	0.00	0.00	0.00	0.00	456.05
ASSISTING IN REMOVAL OF S	OUND SYSTEM A SPEAKER FEL	L ON R LOWER A	2,286.95	2.00	0.00	0.00	0.00	0.00	0.00	2,288.95
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			213.05	243.00	0.00	0.00	0.00	0.00	0.00	456.05
			2,286.95	2.00	0.00	0.00	0.00	0.00	0.00	2,288.95
Claim Number: 16WC0)7847W									
16WC07847W	GARCIA, KAY	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SIXTEENTH AVE ES	9/8/2016 9/9/2016	10/12/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY WHEN	SOMEONE OPENED CLASSROO	OM DOOR AND HI	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)7848Y									
16WC07848Y	SMITH, JOANNE	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOPKINS SCHOOL	9/1/2016 9/9/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING BETWEEN MAIN BLC	OG AND CROSS WALK A CAR DI	ROVE THROUGH	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: 16WC07849B



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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		N								
16WC07849B	ZISKIND, SANDRA	11	334.91	243.00	0.00	0.00	0.00	0.00	0.00	577.91
JUDD SCHOOL	9/8/2016 9/9/2016	10/18/2016	334.91	243.00	0.00	0.00	0.00	0.00	0.00	577.91
REACHED OVER TABLE TO GE	T PENCIL FROM BIN WHEN	STUDENT BIT L ARN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		334.91	243.00	0.00	0.00	0.00	0.00	0.00	577.91
			334.91	243.00	0.00	0.00	0.00	0.00	0.00	577.91
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	7851V									
16WC07851V	BUONADONNA, JESSI	CA 10	12,500.00	1,193.00	3,500.00	0.00	0.00	0.00	0.00	17,193.00
MAYS LANDING CAMPUS	9/8/2016 9/8/2016	Open	438.72	1,193.00	1,315.78	0.00	0.00	0.00	0.00	2,947.50
WALKING A STUDENT, STUDEN	IT DROPPED TO THE FLOO	R WHILE PULLING H	12,061.28	0.00	2,184.22	0.00	0.00	0.00	0.00	14,245.50
Total by Claim Number 1	Claim		12,500.00	1,193.00	3,500.00	0.00	0.00	0.00	0.00	17,193.00
			438.72	1,193.00	1,315.78	0.00	0.00	0.00	0.00	2,947.50
			12,061.28	0.00	2,184.22	0.00	0.00	0.00	0.00	14,245.50
Claim Number: 16WC0	7852B									
16WC07852B	BHATTACHARJEE, BR	ATATI 11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BEDWELL ES	9/7/2016 9/9/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED AN FELL IN SPILLED	WATER INJURED R FOOT		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: 16WC07853Y



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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 - WOR Claim Number: 16WC07										
16WC07853Y	KOKOSZKA, AMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER ELEMENTARY SO	CHC 9/8/2016 9/8/2016	Open	204.73	243.00	0.00	0.00	0.00	0.00	0.00	447.73
HANGING A POSTER, COMING	DOWN STOOL SHE HIT HER LT	HEEL ON A MET	2,295.27	2.00	0.00	0.00	0.00	0.00	0.00	2,297.27
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			204.73	243.00	0.00	0.00	0.00	0.00	0.00	447.73
			2,295.27	2.00	0.00	0.00	0.00	0.00	0.00	2,297.27
Claim Number: 16WC07	7854W									
16WC07854W	BEHA, MICHELE	11	63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
CLINTON TWP MS	9/9/2016 9/9/2016	10/18/2016	63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
WALKING SHE TRIPPED & FELL	IN HER OFFICE INJURING HEI	R LT KNEE & WRI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
			63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC07	7855Y									
16WC07855Y	FUSZKO, ARLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	9/9/2016 9/9/2016	Open	37.88	243.00	0.00	0.00	0.00	0.00	0.00	280.88
LEADING A STUDENT WHO HAD	FALLEN TO THE CHILDS SEA	T, STUDENT HEA	2,462.12	2.00	0.00	0.00	0.00	0.00	0.00	2,464.12
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			37.88	243.00	0.00	0.00	0.00	0.00	0.00	280.88
			2,462.12	2.00	0.00	0.00	0.00	0.00	0.00	2,464.12

Claim Number: 16WC07858M



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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 - WORK Claim Number: 16WC078										
16WC07858M	BRAUN, KIMBERLY	10	2,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	18,693.00
ROUND VALLEY MS	9/9/2016 9/12/2016	Open	421.26	1,193.00	3,484.00	0.00	0.00	0.00	0.00	5,098.26
WALKING TRIPPED OVER ELECT	RICAL CORD LANDED ON BO	OTH ARMS/WRIST	2,078.74	0.00	11,516.00	0.00	0.00	0.00	0.00	13,594.74
Total by Claim Number 1 C	Claim		2,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	18,693.00
			421.26	1,193.00	3,484.00	0.00	0.00	0.00	0.00	5,098.26
			2,078.74	0.00	11,516.00	0.00	0.00	0.00	0.00	13,594.74
Claim Number: 16WC078	359W									
16WC07859W	GWIAZDOWSKI, NICOLE	11	127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
THORNE MS	9/9/2016 9/9/2016	10/18/2016	127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
WAS BEHIND STUDENT WHILE S	TANDING WHEN STUDENT S	TRUCK HER IN F#	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 0	Claim		127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
			127.92	243.00	0.00	0.00	0.00	0.00	0.00	370.92
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC078	861Y									
16WC07861Y	SPERA, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCOTCH PLAINS-FANWOOD HS	9/9/2016 9/9/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING A BOX OF LETTERS FRO	OM SHELF, BOX FELL ON RT	FOOT	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: 16WC07862B



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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 - WOI Claim Number: 16WC0										
16WC07862B	FLOOD, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER S	CH V 9/9/2016 9/12/2016	Open	576.02	243.00	0.00	0.00	0.00	0.00	0.00	819.02
HOLDING STUDENTS HAND ST	UDENT DROPPED TO FLOOR I	NJURED HER R S	1,923.98	2.00	0.00	0.00	0.00	0.00	0.00	1,925.98
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			576.02	243.00	0.00	0.00	0.00	0.00	0.00	819.02
			1,923.98	2.00	0.00	0.00	0.00	0.00	0.00	1,925.98
Claim Number: 16WC0	7863T									
16WC07863T	GALLAGHER, PATRICIA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
JR - SR H S	9/9/2016 9/9/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WORK ON ROOF, EXPOSED TO	CHEMICAL FUMES RASH ON	NECK	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	7864V									
16WC07864V	TERMOTTO, MARILYN	10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BROOKSIDE UPPER ES	9/9/2016 9/9/2016	Open	805.80	243.00	0.00	0.00	0.00	0.00	0.00	1,048.80
TRIPPED ON RUG FALLING CA	TCHING HERSELF ON BENCH	NJURED UPPER I	1,694.20	2.00	0.00	0.00	0.00	0.00	0.00	1,696.20
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			805.80	243.00	0.00	0.00	0.00	0.00	0.00	1,048.80
			1,694.20	2.00	0.00	0.00	0.00	0.00	0.00	1,696.20

Claim Number: 16WC07865B



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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 - WOR Claim Number: 16WC0										
16WC07865B	ZAPOTICKY, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMILTON E S	9/9/2016 9/9/2016	Open	413.20	243.00	0.00	0.00	0.00	0.00	0.00	656.20
WALKING DOWN HALLWAY TO	MAKE COPIES TRIPPED AND F	ELL INJURED R S	2,086.80	2.00	0.00	0.00	0.00	0.00	0.00	2,088.80
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			413.20	243.00	0.00	0.00	0.00	0.00	0.00	656.20
			2,086.80	2.00	0.00	0.00	0.00	0.00	0.00	2,088.80
Claim Number: 16WC0	7866W									
16WC07866W	BROWN, PETER	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RAMTOWN SCHOOL	9/9/2016 9/9/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING ON STEP STOOL AD	JUSTING WALL FAN, THE STO	OL SLID HE FELL	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	7867Y									
16WC07867Y	MUNYAH, EARL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEWARK EDUCATORS CHARTE	ER 9/9/2016 9/9/2016	Open	1,269.00	243.00	0.00	0.00	0.00	0.00	0.00	1,512.00
WALKING WITH STUDENTS IN S	STAIRWELL BENT OVER RAILIN	NG TO ADDRESS	1,231.00	2.00	0.00	0.00	0.00	0.00	0.00	1,233.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,269.00	243.00	0.00	0.00	0.00	0.00	0.00	1,512.00
			1,231.00	2.00	0.00	0.00	0.00	0.00	0.00	1,233.00

Claim Number: 16WC07868W



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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 - WOR Claim Number: 16WC07										
16WC07868W	ARCARO, JUDITH ANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLUMBUS E.S.	9/8/2016 9/9/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HAVING A BEHAVIORAL OUTBU	IRST AND PUSHED HER DOWN	I INJURED LOWE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	7869B									
16WC07869B	FRIEDMAN, NIKKI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRUNSWICK ACRES E. S.	9/8/2016 9/9/2016	Open	203.21	243.00	0.00	0.00	0.00	0.00	0.00	446.21
WALKING DOWN HALLWAY FOR	R DISMISSAL SLIPPED IN PUDE	DLE OF WATER R	2,296.79	2.00	0.00	0.00	0.00	0.00	0.00	2,298.79
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			203.21	243.00	0.00	0.00	0.00	0.00	0.00	446.21
			2,296.79	2.00	0.00	0.00	0.00	0.00	0.00	2,298.79
Claim Number: 16WC07	7870Y									
16WC07870Y	ARCAINI, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARRISON TWP. ES	9/9/2016 9/9/2016	Open	104.65	243.00	0.00	0.00	0.00	0.00	0.00	347.65
FELT A POP IN R FOREARM WH	IILE CRANKING TETHER TO SE	CURE WHEELCH	2,395.35	2.00	0.00	0.00	0.00	0.00	0.00	2,397.35
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			104.65	243.00	0.00	0.00	0.00	0.00	0.00	347.65
			2,395.35	2.00	0.00	0.00	0.00	0.00	0.00	2,397.35

Claim Number: 16WC07871W



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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		N								
16WC07871W	O'NEILL, SCARLETT	11	266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
WILSON E S	9/7/2016 9/7/2016	10/18/2016	266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
ACCIDENTALLY KNOCKED OVE	R A CHAIR THAT LANDED	ON HER RT GREAT T	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
			266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	7872B									
16WC07872B	RICCARDELLI, VALER	IE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLI F. BENNETT ES	9/9/2016 9/12/201	6 Open	170.26	243.00	0.00	0.00	0.00	0.00	0.00	413.26
WIPING DOWN CAFETERIA TAE	BLES SLIPPED ON SPILLED	FOOD TWISTING R L	2,329.74	2.00	0.00	0.00	0.00	0.00	0.00	2,331.74
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			170.26	243.00	0.00	0.00	0.00	0.00	0.00	413.26
			2,329.74	2.00	0.00	0.00	0.00	0.00	0.00	2,331.74
Claim Number: 16WC0	7873Y									
16WC07873Y	HOPE, TERRI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
QUARTER MILE LANE E.S.	9/8/2016 9/12/201	6 Open	13.97	243.00	0.00	0.00	0.00	0.00	0.00	256.97
SLIPPED ON WET FLOOR INJUF	RED R SIDE OF BODY, R AR	M, R SHOULDER, NE	2,486.03	2.00	0.00	0.00	0.00	0.00	0.00	2,488.03
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			13.97	243.00	0.00	0.00	0.00	0.00	0.00	256.97
			2,486.03	2.00	0.00	0.00	0.00	0.00	0.00	2,488.03

Claim Number: 16WC07874T



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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 - WOR Claim Number: 16WC07										
16WC07874T	KENJORSKI, LAYLA	10	2,500.00	1,195.00	2,500.00	0.00	0.00	0.00	0.00	6,195.00
EDUCATIONAL SERVICES COM	MIS 9/8/2016 9/12/2016	Open	573.88	1,193.00	263.86	0.00	0.00	0.00	0.00	2,030.74
TRIED TO CALM DOWN STUDEN	IT HAVING BEHAVIORAL ISSU	E STUDEN TOSSI	1,926.12	2.00	2,236.14	0.00	0.00	0.00	0.00	4,164.26
Total by Claim Number 1	Claim		2,500.00	1,195.00	2,500.00	0.00	0.00	0.00	0.00	6,195.00
			573.88	1,193.00	263.86	0.00	0.00	0.00	0.00	2,030.74
			1,926.12	2.00	2,236.14	0.00	0.00	0.00	0.00	4,164.26
Claim Number: 16WC07	875B									
16WC07875B	NACHMAN, KIRSTEN	14	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
MILL POND E.S.	9/2/2016 9/12/2016	Open	340.00	0.00	0.00	0.00	0.00	0.00	0.00	340.00
COMING DOWN FROM OFF STE	P LADDER FELL OFF ROLLING	L ANKLE HITTIN	2,160.00	0.00	0.00	0.00	0.00	0.00	0.00	2,160.00
Total by Claim Number 1	Claim		2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
			340.00	0.00	0.00	0.00	0.00	0.00	0.00	340.00
			2,160.00	0.00	0.00	0.00	0.00	0.00	0.00	2,160.00
Claim Number: 16WC07	876B									
16WC07876B	KIMAK, KELLY	11	2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
PINELANDS HIGH SCHOOL	9/9/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN WHILE SITTING AT	HER DESK R ARM HAD REDD	NESS AND PUS	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1	Claim		2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00

Claim Number: 16WC07877W



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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 - WORI Claim Number: 16WC07										
16WC07877W	SILVERSTEIN, LYNN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN A. CARUSI JR. SCHOOL	9/9/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HELPING CHILD WITH WALKER,	CHILDS LEG BUCKLED UNDE	R HIM CAUSING 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: 16WC07	878W									
16WC07878W	RAINNER, DEBRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GERALDINE FOSTER EARLY CHI	LD 9/9/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REPLACING WORK CART TURNE	ED AROUND TRIPPED OVER	AND CART FELL 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: 16WC07	879B									
16WC07879B	CERRITOS, SAMUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERTH AMBOY H.S.	9/8/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLED HIS CHAIR CLOSER IN C	CAUSING HIS RT KNEE TO ST	RIKE AGAINST MI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07880Y



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September 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: 16WC078										
16WC07880Y	SCARDAVILLE, ANTHONY	′ 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH CO. VOCTECH. H.S	6. 9/12/2016 9/12/2016	Open	1,590.49	243.00	0.00	0.00	0.00	0.00	0.00	1,833.49
WENT TO TURN ON LIGHT SLIPP	ED IN OIL AND FELL BANGED	R RING FINGER	909.51	2.00	0.00	0.00	0.00	0.00	0.00	911.51
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,590.49	243.00	0.00	0.00	0.00	0.00	0.00	1,833.49
			909.51	2.00	0.00	0.00	0.00	0.00	0.00	911.51
Claim Number: 16WC078	381W									
16WC07881W	RUSSELL, JASON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INST.OF TECH - WESTAMPTON	9/5/2016 9/12/2016	Open	203.70	243.00	0.00	0.00	0.00	0.00	0.00	446.70
CLMT WAS REACHING OVER HE	AD TO TURN OFF VALVE FEL	T STRAIN AND PL	2,296.30	2.00	0.00	0.00	0.00	0.00	0.00	2,298.30
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			203.70	243.00	0.00	0.00	0.00	0.00	0.00	446.70
			2,296.30	2.00	0.00	0.00	0.00	0.00	0.00	2,298.30
Claim Number: 16WC078	382B									
16WC07882B	DIAZ, TONY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SAMUEL E. SHULL M.S.	9/9/2016 9/12/2016	Open	458.19	243.00	0.00	0.00	0.00	0.00	0.00	701.19
OPENING FOLDING TABLE AS HE	PLACED IT DOWN THE TABL	E LEG LANDED (2,041.81	2.00	0.00	0.00	0.00	0.00	0.00	2,043.81
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			458.19	243.00	0.00	0.00	0.00	0.00	0.00	701.19
			2,041.81	2.00	0.00	0.00	0.00	0.00	0.00	2,043.81

Claim Number: 16WC07883Y



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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 - WO Claim Number: 16WC	RKERS' COMPENSATION 07883Y									
16WC07883Y	LERNER, AMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JUDD SCHOOL	9/2/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING INTO CLASSROOM U	ISED HER L KNEE TO PUSH A FI	LE DRAWER 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: 16WC	07884Z									
16WC07884Z	BLUM, CYNTHIA	10	5,000.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	21,193.00
COLD SPRINGS ES	9/9/2016 9/12/2016	Open	406.50	1,193.00	3,732.86	0.00	0.00	0.00	0.00	5,332.36
INJURED R WRIST ATTEMPTI	NG TO PUCK UP STUDENT FROI	M FLOOR	4,593.50	0.00	11,267.14	0.00	0.00	0.00	0.00	15,860.64
Total by Claim Number	1 Claim		5,000.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	21,193.00
			406.50	1,193.00	3,732.86	0.00	0.00	0.00	0.00	5,332.36
			4,593.50	0.00	11,267.14	0.00	0.00	0.00	0.00	15,860.64
Claim Number: 16WC	07885V									
16WC07885V	BATISTA, MELVIN	10	13,500.00	1,193.00	17,000.00	0.00	0.00	0.00	0.00	31,693.00
SAMUEL E. SHULL M.S.	9/12/2016 9/12/2016	Open	3,390.19	1,193.00	2,198.37	0.00	0.00	0.00	0.00	6,781.56
WAS ON LADDER CHECKING	A LEAK WHEN HE LEANED OVE	R AND FELL LANE	10,109.81	0.00	14,801.63	0.00	0.00	0.00	0.00	24,911.44
Total by Claim Number	1 Claim		13,500.00	1,193.00	17,000.00	0.00	0.00	0.00	0.00	31,693.00
			3,390.19	1,193.00	2,198.37	0.00	0.00	0.00	0.00	6,781.56
			10,109.81	0.00	14,801.63	0.00	0.00	0.00	0.00	24,911.44

Claim Number: 16WC07886B



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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 - WO Claim Number: 16WC0										
16WC07886B	HUSSEY, NORA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCGINNIS M.S.	9/12/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT HAVING A	BEHAVIORAL ISSUE SCRATCHE	ED RT LOWER 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: 16WC0)7888W									
16WC07888W	WEIKEL, ALEXIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TERRILL MS	9/12/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR	AL OUTBURST BIT HER ON L UP	PER 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)7889B									
16WC07889B	MITCHELL, BERNICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN SCHOOL	9/12/2016 9/13/2016	Open	315.47	243.00	0.00	0.00	0.00	0.00	0.00	558.47
STUDENT HAVING BEHAVIOR	AL OUTBURST AND BIT R LOWE	R ARM	2,184.53	2.00	0.00	0.00	0.00	0.00	0.00	2,186.53
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			315.47	243.00	0.00	0.00	0.00	0.00	0.00	558.47
			2,184.53	2.00	0.00	0.00	0.00	0.00	0.00	2,186.53

Claim Number: 16WC07890Y



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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 - WOR Claim Number: 16WC07										
16WC07890Y	FIDECARO, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	9/1/2016 9/13/2016	Open	266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
WALKING UP STAIRS SLIPPED	ON WET STEPS AND FELL INJU	JRED BOTH KNEI	2,233.10	2.00	0.00	0.00	0.00	0.00	0.00	2,235.10
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			266.90	243.00	0.00	0.00	0.00	0.00	0.00	509.90
			2,233.10	2.00	0.00	0.00	0.00	0.00	0.00	2,235.10
Claim Number: 16WC07	7891W									
16WC07891W	WALLRABE, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW MONMOUTH ES	9/12/2016 9/13/2016	Open	842.70	243.00	0.00	0.00	0.00	0.00	0.00	1,085.70
STUDENT HAVING BEHAVIORA	L OUTBURST STUDENT GRAB	BED HAIR AND PL	1,657.30	2.00	0.00	0.00	0.00	0.00	0.00	1,659.30
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			842.70	243.00	0.00	0.00	0.00	0.00	0.00	1,085.70
			1,657.30	2.00	0.00	0.00	0.00	0.00	0.00	1,659.30
Claim Number: 16WC07	7892B									
16WC07892B	MOSS, PAULA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION	9/12/2016 9/13/2016	Open	543.74	243.00	0.00	0.00	0.00	0.00	0.00	786.74
TOOK L HAND OFF STEERING V	WHEEL WHEN SHE TRIED TO F	PLACE HAND BAC	1,956.26	2.00	0.00	0.00	0.00	0.00	0.00	1,958.26
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			543.74	243.00	0.00	0.00	0.00	0.00	0.00	786.74
			1,956.26	2.00	0.00	0.00	0.00	0.00	0.00	1,958.26

Claim Number: 16WC07893Y



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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 - WOR Claim Number: 16WC07										
16WC07893Y	BRAUD, NIKOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MERCERVILLE E.S.	9/12/2016 9/13/2016	Open	1,107.17	243.00	0.00	0.00	0.00	0.00	0.00	1,350.17
SLIPPED ON WET FLOOR AND FE	ELL TWISTED L FOOT/ANKLE		1,392.83	2.00	0.00	0.00	0.00	0.00	0.00	1,394.83
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,107.17	243.00	0.00	0.00	0.00	0.00	0.00	1,350.17
			1,392.83	2.00	0.00	0.00	0.00	0.00	0.00	1,394.83
Claim Number: 16WC078	894V									
16WC07894V	PRATT, FRANCIS	10	47,000.00	1,195.00	45,000.00	0.00	0.00	0.00	0.00	93,195.00
MORRIS KNOLLS HIGH SCHOOL	9/12/2016 9/13/2016	Open	198.33	1,193.00	3,272.16	0.00	0.00	0.00	0.00	4,663.49
WALKING DOWN HALLWAY SLIP	PED ON WET FLOOR AND FE	LL INJURED L SH	46,801.67	2.00	41,727.84	0.00	0.00	0.00	0.00	88,531.51
Total by Claim Number 1	Claim		47,000.00	1,195.00	45,000.00	0.00	0.00	0.00	0.00	93,195.00
			198.33	1,193.00	3,272.16	0.00	0.00	0.00	0.00	4,663.49
			46,801.67	2.00	41,727.84	0.00	0.00	0.00	0.00	88,531.51
Claim Number: 16WC078	895Y									
16WC07895Y	ELMER, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SUNNYBRAE E.S.	9/12/2016 9/12/2016	Open	188.75	243.00	0.00	0.00	0.00	0.00	0.00	431.75
STUDENT GRABBED HER L T AR	M & PINCHED & SCRATCHED	HER, BREAKING	2,311.25	2.00	0.00	0.00	0.00	0.00	0.00	2,313.25
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			188.75	243.00	0.00	0.00	0.00	0.00	0.00	431.75
			2,311.25	2.00	0.00	0.00	0.00	0.00	0.00	2,313.25

Claim Number: 16WC07896B



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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 - WOR Claim Number: 16WC07										
16WC07896B	WILLIAMS, RHONDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
P.J. HILL SCHOOL	9/12/2016 9/13/2016	Open	289.57	243.00	0.00	0.00	0.00	0.00	0.00	532.57
WALKING IN HALLWAY WHEN A	STUDENT STEPPED ON HER	R FOOT	2,210.43	2.00	0.00	0.00	0.00	0.00	0.00	2,212.43
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			289.57	243.00	0.00	0.00	0.00	0.00	0.00	532.57
			2,210.43	2.00	0.00	0.00	0.00	0.00	0.00	2,212.43
Claim Number: 16WC07	′897V									
16WC07897V	WELLS, JOANN	10	11,000.00	1,193.00	8,500.00	0.00	0.00	0.00	0.00	20,693.00
DEPT OF TRANSPORTATION	9/9/2016 9/13/2016	Open	607.75	1,193.00	2,049.85	0.00	0.00	0.00	0.00	3,850.60
FELL DOWN BUS STEPS AND SC	CRAPPED BOTH KNEES AND	ARMS	10,392.25	0.00	6,450.15	0.00	0.00	0.00	0.00	16,842.40
Total by Claim Number 1	Claim		11,000.00	1,193.00	8,500.00	0.00	0.00	0.00	0.00	20,693.00
			607.75	1,193.00	2,049.85	0.00	0.00	0.00	0.00	3,850.60
			10,392.25	0.00	6,450.15	0.00	0.00	0.00	0.00	16,842.40
Claim Number: 16WC07	'898J									
16WC07898J	JORDAN, ANGELA	15	2,500.00	1,193.00	30,910.00	0.00	0.00	2,500.00	0.00	37,103.00
PISCATAWAY TWP H.S.	9/13/2016 9/13/2016	Open	33.83	243.00	0.00	0.00	0.00	0.00	0.00	276.83
STEPPED ON A ROCK & FELL TV	WISTING LT ANKLE & INJURIN	G RT KNEE, RT F	2,466.17	950.00	30,910.00	0.00	0.00	2,500.00	0.00	36,826.17
Total by Claim Number 1	Claim		2,500.00	1,193.00	30,910.00	0.00	0.00	2,500.00	0.00	37,103.00
			33.83	243.00	0.00	0.00	0.00	0.00	0.00	276.83
			2,466.17	950.00	30,910.00	0.00	0.00	2,500.00	0.00	36,826.17

Claim Number: 16WC07899B



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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 - WOR Claim Number: 16WC07										
16WC07899B	BLOWE, CAROL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
OAKWOOD AVENUE SCHOOL	9/13/2016 9/13/2016	10/ 6/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE TRIPPED AND FEI	LL FORWARD OVER BREAK II	N GROUND INJUF	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: 16WC079	900Y									
16WC07900Y	LAMB, MICHAEL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STERLING H.S.	9/13/2016 9/13/2016	9/28/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REACHING TO PROTECT STUDE	NTS, STUDENT STRUCK HIS	HEAD AGAINST F	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: 16WC079	901F									
16WC07901F	OLIVADOTTI, DONNA	10	2,500.00	1,193.00	40,909.54	0.00	0.00	0.00	0.00	44,602.54
DEPT OF TRANSPORTATION	9/12/2016 9/13/2016	Open	140.94	1,193.00	1,819.08	0.00	0.00	0.00	0.00	3,153.02
ASSISTING SPEC ED CHILD OFF	BUS, CHILD PUNCHED HER I	N BACK OF HEAE	2,359.06	0.00	39,090.46	0.00	0.00	0.00	0.00	41,449.52
Total by Claim Number 1	Claim		2,500.00	1,193.00	40,909.54	0.00	0.00	0.00	0.00	44,602.54
			140.94	1,193.00	1,819.08	0.00	0.00	0.00	0.00	3,153.02
			2,359.06	0.00	39,090.46	0.00	0.00	0.00	0.00	41,449.52

Claim Number: 16WC07902W



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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 - WOR Claim Number: 16WC07										
16WC07902W	HIGGINS, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PRINCETON HS	9/6/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOING UP STAIRS HIS SANDAL	CAUGHT ON STEP HE TRIPPE	ED HYPEREXTENI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	'903A									
16WC07903A	AUERBACH, JOANNE	10	25,000.00	2,743.00	52,500.00	0.00	0.00	0.00	0.00	80,243.00
SOUTH BRUNSWICK H S	9/8/2016 9/13/2016	Open	1,484.26	1,193.00	1,535.64	0.00	0.00	0.00	0.00	4,212.90
PULLED ROLLING CHAIR UP TO	SIT DOWN ATTEMPTED TO S	IT CHAIR ROLLEE	23,515.74	1,550.00	50,964.36	0.00	0.00	0.00	0.00	76,030.10
Total by Claim Number 1	Claim		25,000.00	2,743.00	52,500.00	0.00	0.00	0.00	0.00	80,243.00
			1,484.26	1,193.00	1,535.64	0.00	0.00	0.00	0.00	4,212.90
			23,515.74	1,550.00	50,964.36	0.00	0.00	0.00	0.00	76,030.10
Claim Number: 16WC07	'904W									
16WC07904W	KIEL, LISA	11	2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
HILLSBOROUGH MS	9/6/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DEMONSTRATING NEWTONS LA	AW DURING PHYSICS CLASS (ON A ROLLING PL	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1	Claim		2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00

Claim Number: 16WC07906B



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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 - WOR Claim Number: 16WC07										
16WC07906B	WATTS, HAROLD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	9/13/2016 9/13/2016	Open	175.50	243.00	0.00	0.00	0.00	0.00	0.00	418.50
CLIMBING UP LADDER TO ATTIC	C LACERATED R THUMB ON R	USTY STEEL BEA	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: 16WC07	'908W									
16WC07908W	CONWAY, DEBORAH	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COLUMBIA HIGH SCHOOL	9/9/2016 9/13/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON SOMETING WET ON	N FLOOR INJURED HIP		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: 16WC07	'909B									
16WC07909B	PHILLIPS, BONNIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY CTY SPEC SERVICES	S H: 9/13/2016 9/13/2016	Open	11.81	243.00	0.00	0.00	0.00	0.00	0.00	254.81
CLEANING AND PULLING A CRA	FT BOX OUT OF SHELF TWIST	FED L WRIST	2,488.19	2.00	0.00	0.00	0.00	0.00	0.00	2,490.19
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			11.81	243.00	0.00	0.00	0.00	0.00	0.00	254.81
			2,488.19	2.00	0.00	0.00	0.00	0.00	0.00	2,490.19

Claim Number: 16WC07910W



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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 - WOR Claim Number: 16WC07										
16WC07910W	MARCINKIEWICV, COREY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE DUNN MIDDLE SCHOOL	9/13/2016 9/13/2016	Open	464.68	243.00	0.00	0.00	0.00	0.00	0.00	707.68
WALKING AROUND STUDENTS D	ESK SLIPPED AND STUMBLE	D TWISTING R KI	2,035.32	2.00	0.00	0.00	0.00	0.00	0.00	2,037.32
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			464.68	243.00	0.00	0.00	0.00	0.00	0.00	707.68
			2,035.32	2.00	0.00	0.00	0.00	0.00	0.00	2,037.32
Claim Number: 16WC079	911B									
16WC07911B	ELDER, ALYSON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EISENHOWER E S	9/12/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A PIECE OF EQUIPMENT FELL O	N L FOOT AS SHE PASSED LA	MINATING MACH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC079	912W									
16WC07912W	TEPOZ, MAYRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HORACE MANN SCHOOL	9/13/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WRITING DOWN REFRIGERATOR	R TEMP, THE REFRIGERATOR	BEGAN CLOSIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07914Y



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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 - WC Claim Number: 16WC	ORKERS' COMPENSATION 07914Y									
16WC07914Y	NIBLOCK, CAROL	11	2,500.00	245.00	469.53	0.00	0.00	0.00	0.00	3,214.53
DARETOWN SCHOOL	9/12/2016 9/12/2016	Open	386.71	243.00	469.53	0.00	0.00	0.00	0.00	1,099.24
WALKING DOWN STEPS WITH	HER HANDS FULL, MISSED LAS	ST STEP & ROLLE	2,113.29	2.00	0.00	0.00	0.00	0.00	0.00	2,115.29
Total by Claim Number	1 Claim		2,500.00	245.00	469.53	0.00	0.00	0.00	0.00	3,214.53
			386.71	243.00	469.53	0.00	0.00	0.00	0.00	1,099.24
			2,113.29	2.00	0.00	0.00	0.00	0.00	0.00	2,115.29
Claim Number: 16WC	07915B									
16WC07915B	RUIZ, CORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WHITING ES	9/13/2016 9/13/2016	Open	267.48	243.00	0.00	0.00	0.00	0.00	0.00	510.48
OPENING GATE WHEN THE T	OP OF THE GATE HIT HER FOOT	CAUSING A PUN	2,232.52	2.00	0.00	0.00	0.00	0.00	0.00	2,234.52
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			267.48	243.00	0.00	0.00	0.00	0.00	0.00	510.48
			2,232.52	2.00	0.00	0.00	0.00	0.00	0.00	2,234.52
Claim Number: 16WC	07916W									
16WC07916W	ROSENBERG, SYLVIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FROST E.S.	9/12/2016 9/13/2016	Open	172.64	243.00	0.00	0.00	0.00	0.00	0.00	415.64
CLMT WAS WALKING BACK T	O CLASSROOM SLIPPED ON A P	UDDLE OF WATE	2,327.36	2.00	0.00	0.00	0.00	0.00	0.00	2,329.36
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			172.64	243.00	0.00	0.00	0.00	0.00	0.00	415.64
			2,327.36	2.00	0.00	0.00	0.00	0.00	0.00	2,329.36

Claim Number: 16WC07917Y



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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 - WORI Claim Number: 16WC07										
16WC07917Y	VYBIRAL-CARUSO, CARO	L 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	9/12/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKED INTO BUIDING TRIPPED	AND FELL INJ KNEES, ELBO	WS AND RT 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: 16WC079	918W									
16WC07918W	HERZIG, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAKWOOD AVENUE SCHOOL	9/13/2016 9/14/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
WHILE IN CLASSROOM SPEC ED	STUDENT HAD A BEHAVIOR	AL OUTBURST BI	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: 16WC079	919Y									
16WC07919Y	WILSON, BARBARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH ES	9/9/2016 9/9/2016	Open	63.22	243.00	0.00	0.00	0.00	0.00	0.00	306.22
HOLDING STUDENT'S HAND, STU	JDENT DROPPED TO THE FLO	OOR CAUSING HE	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: 16WC07920F



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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										
16WC07920F	CLARK, MARVIN	10	27,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	36,193.00
BURNETT JR. HIGH SCHOOL (I	UNIC 9/12/2016 9/12/2016	Open	1,195.11	1,193.00	2,877.64	0.00	0.00	0.00	0.00	5,265.75
PLACING CHAIR ON DESK TO S	SWEEP CLASSROOM, TWISTING	G HIS RT KNEE IN	26,304.89	0.00	4,622.36	0.00	0.00	0.00	0.00	30,927.25
Total by Claim Number 1	I Claim		27,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	36,193.00
			1,195.11	1,193.00	2,877.64	0.00	0.00	0.00	0.00	5,265.75
			26,304.89	0.00	4,622.36	0.00	0.00	0.00	0.00	30,927.25
Claim Number: 16WC0	7921W									
16WC07921W	MCLAUGHLIN, JOAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK PRIMARY	9/12/2016 9/12/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WHEN HER CROCS O	GOT STUCK TO THE TILE FLOOP	R CAUSING HER	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	7922B									
16WC07922B	MCGRATH, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNT PROSPECT ES	9/13/2016 9/13/2016	Open	314.18	243.00	0.00	0.00	0.00	0.00	0.00	557.18
WALKING CHILD TO SINK SHE	JAMMED HER RT FOOT BIG TO	E INTO THE BAC	2,185.82	2.00	0.00	0.00	0.00	0.00	0.00	2,187.82
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
-			314.18	243.00	0.00	0.00	0.00	0.00	0.00	557.18
			2,185.82	2.00	0.00	0.00	0.00	0.00	0.00	2,187.82

Claim Number: 16WC07923B



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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 - WOR Claim Number: 16WC07										
16WC07923B	PERRY, MELINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY TWP H.S.	9/13/2016 9/14/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE STRUCK HER SEVERA	AL TIMES 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: 16WC07	'924Y									
16WC07924Y	BURNS, JOHN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHERRY HILL HIGH EAST HS	9/12/2016 9/14/2016	Open	214.39	243.00	0.00	0.00	0.00	0.00	0.00	457.39
TRIED TO STOP STUDENT FROM	M HURTING HERSELF TWISTE	D LOWER BACK	2,285.61	2.00	0.00	0.00	0.00	0.00	0.00	2,287.61
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			214.39	243.00	0.00	0.00	0.00	0.00	0.00	457.39
			2,285.61	2.00	0.00	0.00	0.00	0.00	0.00	2,287.61
Claim Number: 16WC07	'925T									
16WC07925T	IBRAHIM, NABILA	10	25,000.00	1,193.00	23,792.00	0.00	0.00	0.00	0.00	49,985.00
HIGH TECH HS	9/13/2016 9/14/2016	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
CLMT BUMPED IMTO THE FIRE	EXTINGUISHER CAUSING IT T	O FALL IT LANDE	25,000.00	0.00	23,792.00	0.00	0.00	0.00	0.00	48,792.00
Total by Claim Number 1	Claim		25,000.00	1,193.00	23,792.00	0.00	0.00	0.00	0.00	49,985.00
-			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			25,000.00	0.00	23,792.00	0.00	0.00	0.00	0.00	48,792.00

Claim Number: 16WC07926W



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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 - WOR Claim Number: 16WC07										
16WC07926W	GUYER, IRENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INDIAN AVE PRE SCH	9/12/2016 9/14/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
WALKING INTO BLDG WHEN HE	ER FOOT BECAME WEDGED IN	CARPET SHE FE	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: 16WC07	7927W									
16WC07927W	RAPISARDI, THERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONROE TWP TRAILER MS	9/9/2016 9/9/2016	Open	469.34	243.00	0.00	0.00	0.00	0.00	0.00	712.34
CHANGING CLASSES WHEN SH	IE SLIPPED & FELL ON WET FL	OOR INJURING L	2,030.66	2.00	0.00	0.00	0.00	0.00	0.00	2,032.66
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			469.34	243.00	0.00	0.00	0.00	0.00	0.00	712.34
			2,030.66	2.00	0.00	0.00	0.00	0.00	0.00	2,032.66
Claim Number: 16WC07	7928G									
16WC07928G	FRAME, LORETTA	10	39,572.29	1,193.00	39,220.39	0.00	0.00	0.00	0.00	79,985.68
WEST DEPTFORD TWP BOE	9/12/2016 9/12/2016	Reopened	427.71	1,193.00	779.61	0.00	0.00	0.00	0.00	2,400.32
DRIVING DISTRICT VAN, REAR-	ENDED VEHICLE IN FRONT OF	HER, AIRBAG DE	39,144.58	0.00	38,440.78	0.00	0.00	0.00	0.00	77,585.36
Total by Claim Number 1	Claim		39,572.29	1,193.00	39,220.39	0.00	0.00	0.00	0.00	79,985.68
			427.71	1,193.00	779.61	0.00	0.00	0.00	0.00	2,400.32
			39,144.58	0.00	38,440.78	0.00	0.00	0.00	0.00	77,585.36

Claim Number: 16WC07930Y



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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 - WORI Claim Number: 16WC07										
16WC07930Y	STITCHER, BARBARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THEUNIS DEY E.S.	9/13/2016 9/13/2016	Open	122.37	243.00	0.00	0.00	0.00	0.00	0.00	365.37
REMOVING A CRAYON FROM CH	HILD'S MOUTH, CHILD BIT HEF	R RT INDEX FINGI	2,377.63	2.00	0.00	0.00	0.00	0.00	0.00	2,379.63
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			122.37	243.00	0.00	0.00	0.00	0.00	0.00	365.37
			2,377.63	2.00	0.00	0.00	0.00	0.00	0.00	2,379.63
Claim Number: 16WC07	931Y									
16WC07931Y	OCASIO, MABEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAIN BUILDING - HIGH SCHOOL	9/13/2016 9/14/2016	Open	163.58	243.00	0.00	0.00	0.00	0.00	0.00	406.58
WALKING IN LECTURE HALL, SH	E MISSED THE FIRST STEP S	HE FELL ON R KN	2,336.42	2.00	0.00	0.00	0.00	0.00	0.00	2,338.42
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			163.58	243.00	0.00	0.00	0.00	0.00	0.00	406.58
			2,336.42	2.00	0.00	0.00	0.00	0.00	0.00	2,338.42
Claim Number: 16WC07	932G									
16WC07932G	GILCHRIST, DEBORAH	10	30,420.04	1,193.00	24,855.00	0.00	0.00	3,500.00	0.00	59,968.04
DEPT OF TRANSPORTATION (UI	NIC 9/13/2016 9/14/2016	Open	517.00	1,193.00	1,710.00	0.00	0.00	0.00	0.00	3,420.00
WALKING IN BUS YARD WAS STR	RUCK BY A BUS INJURED R H	AND BILATERAL	29,903.04	0.00	23,145.00	0.00	0.00	3,500.00	0.00	56,548.04
Total by Claim Number 1	Claim		30,420.04	1,193.00	24,855.00	0.00	0.00	3,500.00	0.00	59,968.04
			517.00	1,193.00	1,710.00	0.00	0.00	0.00	0.00	3,420.00
			29,903.04	0.00	23,145.00	0.00	0.00	3,500.00	0.00	56,548.04

Claim Number: 16WC07933Y



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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 - WOR Claim Number: 16WC07										
16WC07933Y	ANDRIANI, DEBRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION/BUS LOT	9/13/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BUS MADE A SWIFT TURN, SHE	SLIPPED OFF SEAT & WAS S	TRUCK ON HER R	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	934Z									
16WC07934Z	VENTURA, DONNA	10	40,001.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	56,194.00
ALAN B SHEPARD ES	9/13/2016 9/14/2016	Open	0.00	1,193.00	1,284.48	0.00	0.00	0.00	0.00	2,477.48
SAT ON FLOOR WITH STUDENTS	S INDIAN STYLE SHE COULD	NOT GET UP DEV	40,001.00	0.00	13,715.52	0.00	0.00	0.00	0.00	53,716.52
Total by Claim Number 1	Claim		40,001.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	56,194.00
			0.00	1,193.00	1,284.48	0.00	0.00	0.00	0.00	2,477.48
			40,001.00	0.00	13,715.52	0.00	0.00	0.00	0.00	53,716.52
Claim Number: 16WC07	935Y									
16WC07935Y	VIVINO, DEANNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	9/14/2016 9/14/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT AHVING BEHAVIORAL	ISSUE BIT AND TWISTED R	HAND AND 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: 16WC07936Y



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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 - WOR Claim Number: 16WC07										
16WC07936Y	CITRIN, ARI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN WITHERSPOON MS	9/14/2016 9/14/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	AL LUNGED @ HIM BITING HIS	RT UPPER 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: 16WC07	7937Y									
16WC07937Y	SUMMERS, VICKI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BACON ES	9/14/2016 9/14/2016	Open	167.48	243.00	0.00	0.00	0.00	0.00	0.00	410.48
STUDENT CHEWING STRAW AN	ID FLICK THE STRAW OUT OF	MOUTH EXPOSE	2,332.52	2.00	0.00	0.00	0.00	0.00	0.00	2,334.52
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			167.48	243.00	0.00	0.00	0.00	0.00	0.00	410.48
			2,332.52	2.00	0.00	0.00	0.00	0.00	0.00	2,334.52
Claim Number: 16WC07	7938W									
16WC07938W	MORTON, THERESA	11	169.64	243.00	0.00	0.00	0.00	0.00	0.00	412.64
JOHNSTONE E.S.	9/14/2016 9/14/2016	10/18/2016	169.64	243.00	0.00	0.00	0.00	0.00	0.00	412.64
CONTRACTED LICE FROM ONE	ON ONE STUDENT		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		169.64	243.00	0.00	0.00	0.00	0.00	0.00	412.64
-			169.64	243.00	0.00	0.00	0.00	0.00	0.00	412.64
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 16WC07939B



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ivers@summitrisk.com



September 2016

Claim Number Claimant Name Cov Incurred Incurred Incurred Incurred Incurred Incurred Location Loss Date Rpt Date Status Paid				Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Description of Loss Out Rsv Out Rsv <td>Claim Number</td> <td>Claimant Name</td> <td>Cov</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td> <td>Incurred</td>	Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Major Coverage: 10 - WORKERS' COMPENSATION Claim Number: 16WC07939B 16WC07939B HENDERSON, MICHAEL 11 2,500.00 245.00 0.00 0.00 0.00 0.00 243.00 COACHING FOOTBALL HIGH SCHOOL 913/2016 913/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 243.00 COACHING FOOTBALL PRACTICE WHEN HE WAS KICKED IN THE FACE BY A S 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 COACHING FOOTBALL PRACTICE WHEN HE WAS KICKED IN THE FACE BY A S 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 Claim Number 1 Claim 2,500.00 2.00 0.00 0.00 0.00 0.00 2,502.00 Claim Number 1 6WC07940Y FEREIRA, MELISSA 11 2,500.00 2.00 0.00 0.00 0.00 0.00 2,745.00 MALLEY E S: 91/4/2016 Open 0.00 245.00 0.00 0.00 0.00 0.00 2,602.00 Claim Number 1 Claim 2,500.00 <	Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Claim Number: 16WC07939B HENDERSON, MICHAEL 11 2,500,00 245,00 0,00 0,00 0,00 0,00 0,00 2,45,00 JFK, MEMORIAL HIGH SCHOL 91/3/2016 0/90 0/90 243,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,502,00 2,502,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,502,00 2,502,00 2,45,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,502,00 2,45,00 0,00 0,00 0,00 0,00 0,00 0,00 2,45,00 2,45,00 0,00 0,00 0,00 0,00 0,00 2,45,00 2,502,00 2,45,00 0,00 0,00 0,00 0,00 0,00 2,45,00 2,45,00 0,00 0,00 0,00 0,00 0,00 0,00 2,45,00 2,45,00	Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
J.F.K. MEMORIAL HIGH SCHOOL 9/13/2016 9/13/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 2500.00 COACHING FOOTBALL PRACTICE WHEN HE WAS KICKED IN THE FACE BY A S 2,500.00 2.45.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 245.00 Total by Claim Number 1 Claim 2,500.00 2.45.00 0.00 0.00 0.00 0.00 0.00 0.00 243.00 2,500.00 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 0.00 245.00 2,500.00 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 245.00 2,500.00 2,500.00 2,45.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 0,9en 0.00 245.00 0.00 0.00 0.00 0.00 2,745.00 CLAIT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 2,43.00 0.00 <											
COACHING FOOTBALL PRACTICE WHEN HE WAS KICKED IN THE FACE BY A S 2,500,00 2,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 Total by Claim Number 1 Claim 2,500,00 2,45,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 2,500,00 2,45,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 2,500,00 2,43,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 2,500,00 2,500,00 2,600,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 2,500,00 2,500,00 2,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 2,500,00 2,500,00 2,500,00 2,500,00 2,500,00 2,600,00 0,00 0,00 0,00 0,00 0,00 0,00 2,600,00 2,600,00 0,00 0,00	16WC07939B	HENDERSON, MICHAEL	11	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 2,745.00 0.00 243.00 0.00 0.00 0.00 0.00 0.00 243.00 2,500.00 2,000 0.00 0.00 0.00 0.00 0.00 243.00 Claim Number: 16WC07940Y FERREIRA MELISSA 11 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 0/Pen 0.00 243.00 0.00 0.00 0.00 0.00 243.00 CLAIT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 Total by Claim Number 1 Claim 2,500.00 2.00 0.00 0.00 0.00 0.00 2,602.00 2,602.00 0.00 0.00 0.00 2,602.00 2,602.00 0.00 0.00 0.00 2,602.00 2,602.00 2,602.00 0.00 0.00 0.00	J.F.K. MEMORIAL HIGH SCHOOL	9/13/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
Claim Number: 16WC07940Y FERREIRA, MELISSA 11 2,500.00 243.00 0.00 0.00 0.00 0.00 2,500.00 Claim Number: 16WC07940Y FERREIRA, MELISSA 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 9/14/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 9/14/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 2,745.00 CLAIT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 243.00 0.00 0.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 0.00 2,745.00 Claim Number: 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 <	COACHING FOOTBALL PRACTICE	WHEN HE WAS KICKED IN	THE FACE BY A S	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
1000 2,000 2,000 0.00 0.00 0.00 0.00 2,502.00 Claim Number: 16WC0794VY 16WC07940Y FEREIRA, MELISSA 1 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 0pen 2,500.00 2,600.00 0.00 0.00 0.00 0.00 2,600.00 2,600.00 2,600.00 0.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 2,600.00 2,600.00 0.00 0.00 0.00 0,00 2,745.00 1,600.55 2,600.00 0.00 0.00 0.00 0.00 <t< td=""><td>Total by Claim Number 1 C</td><td>laim</td><td></td><td>2,500.00</td><td>245.00</td><td>0.00</td><td>0.00</td><td>0.00</td><td>0.00</td><td>0.00</td><td>2,745.00</td></t<>	Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Or Claim Number: 16WC07940Y FERREIRA, MELISSA 11 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 0pen 0.00 243.00 0.00 0.00 0.00 0.00 2,602.00 CLMT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 2,602.00 Total by Claim Number 1 Claim				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
16WC07940Y FERREIRA, MELISSA 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 SMALLEY E.S. 9/14/2016 9/14/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 2,00 CLMT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 Total by Claim Number 1 Claim 2,500.00 243.00 0.00 0.00 0.00 0.00 0.00 2,602.00 LibwC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 2,502.00 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 0/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 2,00 2,350.50 Total by Claim Number 1 Claim 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 <td></td> <td></td> <td></td> <td>2,500.00</td> <td>2.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>2,502.00</td>				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
SMALLEY E.S. 9/14/2016 9/14/2016 Open 0.00 243.00 0.00 0.00 0.00 0.00 243.00 CLMT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 Total by Claim Number 1 Claim 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 2,745.00 0.00 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 1000 2,500.00 2,500.00 2,00 0.00 0.00 0.00 0.00 0.00 2,745.00 1000 2,500.00 2,00 0.00 0.00 0.00 0.00 0.00 2,745.00 10000 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 2,745.00 10507 FECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 2,335.05 105007 166.95 243.00	Claim Number: 16WC079	40Y									
CLMT WAS STANDING AT STUDENT DESK WHEN A LARGE WATER BOTTLE FE 2,500.00 2.00 0.00 0.00 0.00 0.00 2,502.00 Total by Claim Number 1 Claim 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 243.00 0.00 2,500.00 243.00 0.00 0.00 0.00 0.00 0.00 243.00 100 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 243.00 100 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 100 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 100 2,500.00 2.00 0.00 0.00 0.00 0.00 2,502.00 160/C07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 2,335.05 Total by Claim Number 1 Claim<	16WC07940Y	FERREIRA, MELISSA	11	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 0.00 243.00 0.00 0.00 0.00 0.00 0.00 0.00 243.00 2,500.00 2.500.00 2.00 0.00 0.00 0.00 0.00 0.00 2,502.00 Claim Number: 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 0.00 409.95 TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 2,335.05 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<	SMALLEY E.S.	9/14/2016 9/14/2016	Open	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 0.00 243.00 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 243.00 Claim Number: 16WC07942Y 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 1NST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 409.95 TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 2,335.05 166.95 243.00 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 0.00 2,345.00 166.95 243.00 0.00 0.00 0.00 0.00<	CLMT WAS STANDING AT STUDE	NT DESK WHEN A LARGE W	ATER BOTTLE FE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
2,500.00 2.00 0.00 0.00 0.00 0.00 2,502.00 Claim Number: 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 0.00 2,335.05 TeachING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,330.05 2.00 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 2,745.00 166.95 243.00 0.00 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 0.00 2,745.00 Integration of the state of the s	Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 409.95 TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 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 0.00 0.00 2,745.00				0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
16WC07942Y GOATLEY, RICHARD 11 2,500.00 245.00 0.00 0.00 0.00 0.00 2,745.00 INST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 0.00 409.95 TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 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 0.00 0.00 2,745.00				2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
INST.OF TECH - WESTAMPTON 9/13/2016 9/14/2016 Open 166.95 243.00 0.00 0.00 0.00 0.00 409.95 TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 1 66.95 243.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 409.95	Claim Number: 16WC079	42Y									
TEACHING STUDENT TO OPERATE JOHN DEER BUCKET SCOOPER STUDENT 2,333.05 2.00 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 I 66.95 243.00 0.00 0.00 0.00 0.00 0.00 0.00 409.95	16WC07942Y	GOATLEY, RICHARD	11	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 2,745.00 166.95 243.00 0.00 0.00 0.00 0.00 0.00 409.95	INST.OF TECH - WESTAMPTON	9/13/2016 9/14/2016	Open	166.95	243.00	0.00	0.00	0.00	0.00	0.00	409.95
166.95 243.00 0.00 0.00 0.00 0.00 0.00 409.95	TEACHING STUDENT TO OPERAT	E JOHN DEER BUCKET SCC	OPER STUDENT	2,333.05	2.00	0.00	0.00	0.00	0.00	0.00	2,335.05
166.95 243.00 0.00 0.00 0.00 0.00 0.00 409.95	Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
2,333.05 2.00 0.00 0.00 0.00 0.00 0.00 2,335.05	-			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: 16WC07943Y



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

10/18/2016 3:05:53PM

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September 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: 16WC0										
16WC07943Y	FERRARA, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SETH BOYDEN	9/14/2016 9/14/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING THROUGH PORTABLI	E ROOM DOOR WHEN HER R F	FOOT WENT THR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7944B									
16WC07944B	CRUMRINE, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DENNIS B O'BRIEN ES	9/13/2016 9/14/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
SLIPPED ON WET SPOT ON FLO	OOR CAUSING TO FALL ONTO	BUTTOCKS TWIS	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	7945W									
16WC07945W	KORMASH, JOAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALLEN W ROBERTS SCHOOL	9/14/2016 9/14/2016	Open	35.23	243.00	0.00	0.00	0.00	0.00	0.00	278.23
STUDENT HAVING A BEHAVIOR	RAL STRUCK HER ON HER LT F	OOT, KNEES, AR	2,464.77	2.00	0.00	0.00	0.00	0.00	0.00	2,466.77
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			35.23	243.00	0.00	0.00	0.00	0.00	0.00	278.23
			2,464.77	2.00	0.00	0.00	0.00	0.00	0.00	2,466.77

Claim Number: 16WC07946W



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

10/18/2016 3:05:53PM

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September 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: 16WC07		I								
16WC07946W	WEST, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CATHERINE A DWYER ES	9/14/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING PLAYGROUND DUTY W	AS STUNG BY A BEE ON L A	RM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	7947F									
16WC07947F	YAWN, OLIVER	10	2,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	11,193.00
TRENTON CENTRAL HS MAIN C	AMI 9/14/2016 9/15/2016	Open	648.51	1,193.00	3,073.28	0.00	0.00	0.00	0.00	4,914.79
WAS CARRYING LADDER AND S	SUDDENLY FELT PAIN IN L SH	HOULDER	1,851.49	0.00	4,426.72	0.00	0.00	0.00	0.00	6,278.21
Total by Claim Number 1	Claim		2,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	11,193.00
			648.51	1,193.00	3,073.28	0.00	0.00	0.00	0.00	4,914.79
			1,851.49	0.00	4,426.72	0.00	0.00	0.00	0.00	6,278.21
Claim Number: 16WC07	7948W									
16WC07948W	LANZA, EILEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON PARK SCHOOL	9/13/2016 9/15/2016	Open	408.03	243.00	0.00	0.00	0.00	0.00	0.00	651.03
WALKING SHE SLAMMED R FOO	OT/BIG TOE INTO CABINET DE	ESK	2,091.97	2.00	0.00	0.00	0.00	0.00	0.00	2,093.97
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			408.03	243.00	0.00	0.00	0.00	0.00	0.00	651.03
			2,091.97	2.00	0.00	0.00	0.00	0.00	0.00	2,093.97

Claim Number: 16WC07949Y



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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 - WOR Claim Number: 16WC07										
16WC07949Y	BENNETT, ANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEPTUNE TOWNSHIP BOARD C	DF E 9/13/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER A STUDENT AN	D FELL INJURED BILATERAL H	AND, WRIST, LO\	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	7950V									
16WC07950V	ALLEN, PENNY	10	20,000.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	39,193.00
INST.OF TECH - MEDFORD CAM	/IPU: 9/14/2016 9/15/2016	Open	1,844.65	1,193.00	1,617.58	0.00	0.00	0.00	0.00	4,655.23
WALKING OFF SOCCER FIELD	WAS HIT IN HEAD BY A SOCCE	R BALL	18,155.35	0.00	16,382.42	0.00	0.00	0.00	0.00	34,537.77
Total by Claim Number 1	Claim		20,000.00	1,193.00	18,000.00	0.00	0.00	0.00	0.00	39,193.00
			1,844.65	1,193.00	1,617.58	0.00	0.00	0.00	0.00	4,655.23
			18,155.35	0.00	16,382.42	0.00	0.00	0.00	0.00	34,537.77
Claim Number: 16WC07	7951B									
16WC07951B	BOYD, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FORKED RIVER E.S.	9/14/2016 9/15/2016	Open	170.00	243.00	0.00	0.00	0.00	0.00	0.00	413.00
PLACING AN OBJECT ON SHEL	F WHEN SHE CUT HER R POIN	TER FINGER ON	2,330.00	2.00	0.00	0.00	0.00	0.00	0.00	2,332.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			170.00	243.00	0.00	0.00	0.00	0.00	0.00	413.00
			2,330.00	2.00	0.00	0.00	0.00	0.00	0.00	2,332.00

Claim Number: 16WC07952Y



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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 - WORK Claim Number: 16WC079										
16WC07952Y	POWER, MISTI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW TRANSPORTATION	9/14/2016 9/15/2016	Open	179.58	243.00	0.00	0.00	0.00	0.00	0.00	422.58
GETTING OFF SCHOOL BUS TO C	ROSS STREET FOR A CHILE	SHE SLIPPED A	2,320.42	2.00	0.00	0.00	0.00	0.00	0.00	2,322.42
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
			179.58	243.00	0.00	0.00	0.00	0.00	0.00	422.58
			2,320.42	2.00	0.00	0.00	0.00	0.00	0.00	2,322.42
Claim Number: 16WC079	53T									
16WC07953T	SCAFF, DAMARYS	10	25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
SCHOOL 6	9/15/2016 9/16/2016	Open	7,893.38	1,193.00	1,198.48	0.00	0.00	0.00	0.00	10,284.86
WALKING IN CAFTERIA FROM BA	CK DOOR SLIPPED ON WET	FLOOR AND FELI	17,106.62	0.00	23,801.52	0.00	0.00	0.00	0.00	40,908.14
Total by Claim Number 1 C	laim		25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
			7,893.38	1,193.00	1,198.48	0.00	0.00	0.00	0.00	10,284.86
			17,106.62	0.00	23,801.52	0.00	0.00	0.00	0.00	40,908.14
Claim Number: 16WC079	541									
16WC07954I	SCHWARTZ, LYNN	10	10,000.00	1,193.00	0.00	0.00	0.00	0.00	0.00	11,193.00
HERITAGE MS	9/14/2016 9/15/2016	Open	1,460.81	1,193.00	0.00	0.00	0.00	0.00	0.00	2,653.81
ATTENDING BACK TO SCHOOL N	IGHT SLIPPED ON WET FLOO	OR AND FELL FX	8,539.19	0.00	0.00	0.00	0.00	0.00	0.00	8,539.19
Total by Claim Number 1 C	Claim		10,000.00	1,193.00	0.00	0.00	0.00	0.00	0.00	11,193.00
-			1,460.81	1,193.00	0.00	0.00	0.00	0.00	0.00	2,653.81
			8,539.19	0.00	0.00	0.00	0.00	0.00	0.00	8,539.19

Claim Number: 16WC07955W



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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 - WO Claim Number: 16WC0										
16WC07955W	DE DIOS, YOKASTA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EDWARD J. PATTEN ES	9/15/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BEEN EXPERIENCING NAUSE	A, HEADACHES, AND SORE THE	ROAT FROM STRC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7956B									
16WC07956B	HAYES, JAMIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	9/14/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FOLDING LAUNDRY EQUIPME	NT CLOSET WHEN A CONTAINE	R OF FOOTBALL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7957T									
16WC07957T	ZURABOVA, NATALIYA	10	25,000.00	1,193.00	42,923.76	0.00	0.00	0.00	0.00	69,116.76
EDWARD V WALTON E.S.	9/14/2016 9/15/2016	Open	472.93	1,193.00	533.96	0.00	0.00	0.00	0.00	2,199.89
RETURNING TO SCHOOL BLD	G TRIPPED ON CURB AND FELL	HITTING L ARM (24,527.07	0.00	42,389.80	0.00	0.00	0.00	0.00	66,916.87
Total by Claim Number	1 Claim		25,000.00	1,193.00	42,923.76	0.00	0.00	0.00	0.00	69,116.76
-			472.93	1,193.00	533.96	0.00	0.00	0.00	0.00	2,199.89
			24,527.07	0.00	42,389.80	0.00	0.00	0.00	0.00	66,916.87

Claim Number: 16WC07958Y



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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 - WO Claim Number: 16WC0										
16WC07958Y	DURAN, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAFAYETTE ES	9/15/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING AN ETHEL PORTABLE	ACROSS CLASSROOM WHEN	METAL WHITE BC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	7959B									
16WC07959B	BECKETT, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KINGSWAY REG. HS	9/14/2016 9/14/2016	Open	139.00	243.00	0.00	0.00	0.00	0.00	0.00	382.00
FIXING THE VOLLEYBALL NET	WHEN A STUDENT SERVED TH	E BALL INTO HEF	2,361.00	2.00	0.00	0.00	0.00	0.00	0.00	2,363.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			139.00	243.00	0.00	0.00	0.00	0.00	0.00	382.00
			2,361.00	2.00	0.00	0.00	0.00	0.00	0.00	2,363.00
Claim Number: 16WC0	7960W									
16WC07960W	ELDRIDGE, BEVERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MILLVILLE SR HS	9/13/2016 9/15/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
SITTING THE BUS MADE A TUP	RN AND SHE LEANED FORWARD	D USED HER L FC	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: 16WC07961F



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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										
16WC07961F	HAMILTON, BRIANNA	10	7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
FM BURD E.S.	9/13/2016 9/15/2016	Open	1,030.07	1,193.00	0.00	0.00	0.00	0.00	0.00	2,223.07
STUDENT STEPPED ON HER D	RESS DURING BEHAVIORAL IS	SUE SHE TRIPPE	6,469.93	0.00	7,500.00	0.00	0.00	0.00	0.00	13,969.93
Total by Claim Number 1	Claim		7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
			1,030.07	1,193.00	0.00	0.00	0.00	0.00	0.00	2,223.07
			6,469.93	0.00	7,500.00	0.00	0.00	0.00	0.00	13,969.93
Claim Number: 16WC0	7962Y									
16WC07962Y	MCDEVITT, GLORIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL ES	9/14/2016 9/14/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTIN UP SHE TRIPPED OVER	R A CHAIR & INJURED HER RT	WRIST TRYING T	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	7964Z									
16WC07964Z	BIANCHI, WILLIAM	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
G HAROLD ANTRIM ES	9/14/2016 9/15/2016	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
CHANGING WET CEILING TILE	STEPPED ONTO A TABLE WEN	IT TO STEP DOWI	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: 16WC07965B



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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 - WORI Claim Number: 16WC07										
16WC07965B	TAGLIENTI, CYNTHIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TIMBER CREEK HIGH SCHOOL	9/15/2016 9/15/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
STUDENT PUSHED ANOTHER ST	IUDENT WHO FELL ONTO L A	NKLE TWISTING	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: 16WC07	966M									
16WC07966M	DAY, KAREN	10	7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
WEST AMWELL CAMPUS	9/15/2016 9/15/2016	Open	299.23	1,193.00	0.00	0.00	0.00	0.00	0.00	1,492.23
ATTEMPTING TO BREAK UP FIGH	HT WAS BITTEN ON R ARM, P	UNCHED IN FACE	7,200.77	0.00	7,500.00	0.00	0.00	0.00	0.00	14,700.77
Total by Claim Number 1	Claim		7,500.00	1,193.00	7,500.00	0.00	0.00	0.00	0.00	16,193.00
			299.23	1,193.00	0.00	0.00	0.00	0.00	0.00	1,492.23
			7,200.77	0.00	7,500.00	0.00	0.00	0.00	0.00	14,700.77
Claim Number: 16WC07	967B									
16WC07967B	CINQUEGRANA, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION	9/15/2016 9/15/2016	Open	289.00	243.00	0.00	0.00	0.00	0.00	0.00	532.00
CHILD HAVING A BEHAVIORAL B	IT HER IN RT HAND/WRIST AF	REA, SKIN BROKE	2,211.00	2.00	0.00	0.00	0.00	0.00	0.00	2,213.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			289.00	243.00	0.00	0.00	0.00	0.00	0.00	532.00
			2,211.00	2.00	0.00	0.00	0.00	0.00	0.00	2,213.00

Claim Number: 16WC07968W



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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 - WO Claim Number: 16WC0	RKERS' COMPENSATION)7968W									
16WC07968W	FORMAN, JANICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH MOUNTAIN MS	9/15/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING AN EVACUATION SHE	TRIPPED WHILE WALKING A S	FUDENT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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)7969Z									
16WC07969Z	CONK, JENNIFER	10	45,000.00	1,193.00	12,000.00	0.00	0.00	0.00	0.00	58,193.00
GERALD H WOEHR ES	9/13/2016 9/15/2016	Open	1,895.16	1,193.00	3,484.00	0.00	0.00	0.00	0.00	6,572.16
STEPPED ON PENCIL CAUSIN	G L FOOT TO ROLL UNDERNEAT	TH HER AND TWI	43,104.84	0.00	8,516.00	0.00	0.00	0.00	0.00	51,620.84
Total by Claim Number	1 Claim		45,000.00	1,193.00	12,000.00	0.00	0.00	0.00	0.00	58,193.00
			1,895.16	1,193.00	3,484.00	0.00	0.00	0.00	0.00	6,572.16
			43,104.84	0.00	8,516.00	0.00	0.00	0.00	0.00	51,620.84
Claim Number: 16WC0)7970T									
16WC07970T	SLOAN, CORA	10	27,500.00	1,193.00	42,504.00	0.00	0.00	0.00	0.00	71,197.00
PRINCETON HS	9/13/2016 9/16/2016	Open	0.00	1,193.00	464.00	0.00	0.00	0.00	0.00	1,657.00
SLIPPED ON WET FLOOR AND	FELL FORWARD ATTEMPTED T	O BREAK FALL C	27,500.00	0.00	42,040.00	0.00	0.00	0.00	0.00	69,540.00
Total by Claim Number	1 Claim		27,500.00	1,193.00	42,504.00	0.00	0.00	0.00	0.00	71,197.00
			0.00	1,193.00	464.00	0.00	0.00	0.00	0.00	1,657.00
			27,500.00	0.00	42,040.00	0.00	0.00	0.00	0.00	69,540.00

Claim Number: 16WC07971B



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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 - WOR Claim Number: 16WC07		N								
16WC07971B	KEMELMAN, EUGINIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NATHAN HALE E.S.	9/14/2016 9/16/2016	Open	836.06	243.00	0.00	0.00	0.00	0.00	0.00	1,079.06
TRIPPED OVER BINDERS AND F	ELL LANDING ON HER L SID	E INJURED R FOO	1,663.94	2.00	0.00	0.00	0.00	0.00	0.00	1,665.94
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			836.06	243.00	0.00	0.00	0.00	0.00	0.00	1,079.06
			1,663.94	2.00	0.00	0.00	0.00	0.00	0.00	1,665.94
Claim Number: 16WC07	973W									
16WC07973W	HERRMANN, PATRICIA	11	69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
WARREN DEVELOP. LEARNING	CTI 9/15/2016 9/15/2016	10/18/2016	69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
WORKING WITH A STUDENT TO	DESCEND THE STAIRS, TH	E STUDENT STRUC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
			69.54	243.00	0.00	0.00	0.00	0.00	0.00	312.54
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC07	974Y									
16WC07974Y	MIKRUT-BILLIG, VICTO	RIA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JONAS SALK MS	9/14/2016 9/16/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
WALKING DOWN HALLWAY LOS	FOOTING AND FELL AGAI	NST WOODEN DOC	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: 16WC07975B



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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 - WOR Claim Number: 16WC07		I								
16WC07975B	NAGEL, THEODORE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	9/15/2016 9/15/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING A STUDENT HAVI	NG A BEHAVIORAL WHEN ST	TUDENT PUNCHEE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	977W									
16WC07977W	VEGA, PEDRO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BROAD STREET SCHOOL	9/8/2016 9/16/2016	Open	192.64	243.00	0.00	0.00	0.00	0.00	0.00	435.64
TEACHER ASKED HIM TO PICK U	JP A BOX FULL OF BOOKS T	O STORE AWAY S	2,307.36	2.00	0.00	0.00	0.00	0.00	0.00	2,309.36
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			192.64	243.00	0.00	0.00	0.00	0.00	0.00	435.64
			2,307.36	2.00	0.00	0.00	0.00	0.00	0.00	2,309.36
Claim Number: 16WC07	978Y									
16WC07978Y	ANDERSON, CHRISTINE	E 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	9/12/2016 9/13/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT REFUSED TO GET ON	THE BUS, SHE LIFTED THE	STUDENT OVER 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: 16WC07979W



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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 - WOR Claim Number: 16WC07										
16WC07979W	MISZCUK, CELINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN M. BAILEY SCHOOL	9/15/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENT HAVING E	BEHAVIORAL OUTBURST STUE	ENT PUSHED 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: 16WC07	7981W									
16WC07981W	LAGERHOLM, MADELINE	11	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
MEMORIAL INTERMEDIATE SCH	HOO 9/16/2016 9/16/2016	10/18/2016	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
STUDENT HAVING BEHAVIOR IS	SSUE HEAD BUTTED HER IN N	OSE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
			160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC07	7982B									
16WC07982B	PAUL, JOSHUA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELAWARE VALLEY REG HS	9/15/2016 9/16/2016	Open	32.41	243.00	0.00	0.00	0.00	0.00	0.00	275.41
UNLOADING TRUCK OF PLYWO	OD WHEN HE PICKED UP PIEC	CE, IT SLID IN HIS	2,467.59	2.00	0.00	0.00	0.00	0.00	0.00	2,469.59
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			32.41	243.00	0.00	0.00	0.00	0.00	0.00	275.41
			2,467.59	2.00	0.00	0.00	0.00	0.00	0.00	2,469.59

Claim Number: 16WC07983B



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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 - WOI Claim Number: 16WC0									
16WC07983B	EVANGELISTA, ELIZABETH 11	2,500.00	245.00	740.44	0.00	0.00	0.00	0.00	3,485.44
WEST FREEHOLD E.S.	9/14/2016 9/16/2016 Open	0.00	243.00	740.44	0.00	0.00	0.00	0.00	983.44
KNEELED DOWN ON FLOOR TO	D HELP CHILD UP, 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	740.44	0.00	0.00	0.00	0.00	3,485.44
		0.00	243.00	740.44	0.00	0.00	0.00	0.00	983.44
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	7984Y								
16WC07984Y	MODZELEWSKI, LINDA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	9/13/2016 9/16/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STOPPED DURING HER ROUTE	E TO USE RESTROOM WHEN SHE WAS BITTEN	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: 16WC0	7985W								
16WC07985W	FARRO, ANNA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARMONY ES	9/15/2016 9/16/2016 Open	139.22	243.00	0.00	0.00	0.00	0.00	0.00	382.22
HELPING STUDENT THAT WAS	HAVING BEHAVIORAL ISSUE WHEN SHE BEN	Г 2,360.78	2.00	0.00	0.00	0.00	0.00	0.00	2,362.78
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		139.22	243.00	0.00	0.00	0.00	0.00	0.00	382.22
		2,360.78	2.00	0.00	0.00	0.00	0.00	0.00	2,362.78

Claim Number: 16WC07986B



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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 - WO Claim Number: 16WC0										
16WC07986B	TIBOK, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY VOCATIONAL	9/6/2016 9/16/2016	Open	28.22	243.00	0.00	0.00	0.00	0.00	0.00	271.22
MOVING TABLES, CHAIRS, UNI	OADING PALLETS STRAINED L	OWER BACK	2,471.78	2.00	0.00	0.00	0.00	0.00	0.00	2,473.78
Total by Claim Number	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			28.22	243.00	0.00	0.00	0.00	0.00	0.00	271.22
			2,471.78	2.00	0.00	0.00	0.00	0.00	0.00	2,473.78
Claim Number: 16WC0	7987W									
16WC07987W	PRUSSLIN, GAIL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ELYSIAN CHTR SCHOOL	9/16/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING UPSTAIRS AND SLIP	PED ON MAT LANDING ON R FC	ООТ	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	7988Y									
16WC07988Y	COPPOLA, MARY JO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL MS NORTH	9/13/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD WAS RUNNING AND AC	CIDENTLY RAN INTO HER SHE F	FELL INJURED R	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07989B



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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										
16WC07989B	COLLINS, STACI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GOVERNOR CHARLES C STRA	TTO 9/16/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RESTRAIN STUDEN	IT HAVING BEHAVIORAL ISSUE	WAS HEAD 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: 16WC0	7990W									
16WC07990W	ABLAUF, JANET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARNSDORFER E.S.	9/14/2016 9/16/2016	Open	96.96	243.00	0.00	0.00	0.00	0.00	0.00	339.96
ATTEMPTING TO LIFT CHILD TO	O HELP HIM ON TOILET INJURE	D LOW BACK	2,403.04	2.00	0.00	0.00	0.00	0.00	0.00	2,405.04
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			96.96	243.00	0.00	0.00	0.00	0.00	0.00	339.96
			2,403.04	2.00	0.00	0.00	0.00	0.00	0.00	2,405.04
Claim Number: 16WC0	7991B									
16WC07991B	NIBLETT, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SABATER ES	9/15/2016 9/16/2016	Open	382.41	243.00	0.00	0.00	0.00	0.00	0.00	625.41
WAS LOADING/MOVING LARGE	CONSTRUCTION PAPER INTO	CLOSET INJURE	2,117.59	2.00	0.00	0.00	0.00	0.00	0.00	2,119.59
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			382.41	243.00	0.00	0.00	0.00	0.00	0.00	625.41
			2,117.59	2.00	0.00	0.00	0.00	0.00	0.00	2,119.59

Claim Number: 16WC07992W



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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 - WOR Claim Number: 16WC07										
16WC07992W	CRUZ, MELINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN AVENUE SCHOOL	9/13/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WENT TO SIT A STUDENT IN WO	ODEN CHAIR AS SHE STOOD	UP FELT A POP/	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	993B									
16WC07993B	EDLAND, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN F KENNEDY E.S.	9/13/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TURNED AROUND AND TRIPPED	OVER A CHILD SITTING ON	FLOOR, LANDED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	994Y									
16WC07994Y	NOWARA, DANIELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MORRIS KNOLLS HIGH SCHOOL	9/13/2016 9/16/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INTO SCHOOL WAS H	T BY PICKUP TRUCK ON ENT	IRE L SIDE OF BC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC07995Y



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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 - WOR Claim Number: 16WC07										
16WC07995Y	MOORE, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHARLES HARKER SCHOOL	9/14/2016 9/16/2016	Open	268.03	243.00	0.00	0.00	0.00	0.00	0.00	511.03
WAS GETTING OUT HER CAR TR	IPPED OVER BAG AND FELL	INJURED R FOOT	2,231.97	2.00	0.00	0.00	0.00	0.00	0.00	2,233.97
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			268.03	243.00	0.00	0.00	0.00	0.00	0.00	511.03
			2,231.97	2.00	0.00	0.00	0.00	0.00	0.00	2,233.97
Claim Number: 16WC079	996B									
16WC07996B	KNOX, BRYAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	9/15/2016 9/16/2016	Open	60.04	243.00	0.00	0.00	0.00	0.00	0.00	303.04
STUDENT NOT PARTICIPATING S	O SHE POINT TO THEIR MOU	JTH, STUDENT BI	2,439.96	2.00	0.00	0.00	0.00	0.00	0.00	2,441.96
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			60.04	243.00	0.00	0.00	0.00	0.00	0.00	303.04
			2,439.96	2.00	0.00	0.00	0.00	0.00	0.00	2,441.96
Claim Number: 16WC079	997B									
16WC07997B	LIDDY, JANICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VIRGIL I GRISSOM ES	9/16/2016 9/19/2016	Open	123.21	243.00	0.00	0.00	0.00	0.00	0.00	366.21
TRIPPED ON RAISED FLOOR TIL	E AND FELL ON L KNEE		2,376.79	2.00	0.00	0.00	0.00	0.00	0.00	2,378.79
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			123.21	243.00	0.00	0.00	0.00	0.00	0.00	366.21
			2,376.79	2.00	0.00	0.00	0.00	0.00	0.00	2,378.79

Claim Number: 16WC07998W



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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 - WOR Claim Number: 16WC07										
16WC07998W	WARLEY, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SPOTSWOOD HS	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
OPENING BOXES WITH A BOX C	UTTER WHEN THE BLADE SL	IPPED AND SLICE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC07	999B									
16WC07999B	BARRA, CAROLYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HENRY C. BECK JR. SCHOOL	9/15/2016 9/19/2016	Open	166.95	243.00	0.00	0.00	0.00	0.00	0.00	409.95
CARRYING OFFICE SUPPLIES IN	ITO OFFICE STUDENT RAN IN	ITO HER INJUREE	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: 16WC08	000B									
16WC08000B	DEAK, WAYNE	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLMDEL H.S.	9/16/2016 9/19/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE RIDING IN GOLF CART BR	RAKES GAVE OUT RAN INTO ⁻	TREE INJURED R	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: 16WC08001B



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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 - WOR Claim Number: 16WC08										
16WC08001B	BOONE, DARRIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JUNIOR HIGH SCHOOL, INCL.	9/15/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN ON L LEG BY AN II	NSECT		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3002Y									
16WC08002Y	MASTRANGELO, TINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER #10	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS UTILIZING A PAPER CUTT	ER LACERATED HER L MIDDLE	E 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: 16WC08	3003V									
16WC08003V	ARMANNO, CAROL	10	12,001.00	1,193.00	14,000.00	0.00	0.00	0.00	0.00	27,194.00
RAVINE DRIVE ES	9/14/2016 9/19/2016	Open	301.29	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,978.29
CARRYING A LOT OF ITEMS SH	E TRIPPED OVER HER OWN T	WO FEET FALLIN	11,699.71	0.00	10,516.00	0.00	0.00	0.00	0.00	22,215.71
Total by Claim Number 1	Claim		12,001.00	1,193.00	14,000.00	0.00	0.00	0.00	0.00	27,194.00
			301.29	1,193.00	3,484.00	0.00	0.00	0.00	0.00	4,978.29
			11,699.71	0.00	10,516.00	0.00	0.00	0.00	0.00	22,215.71

Claim Number: 16WC08004B



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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 - WORK Claim Number: 16WC080										
16WC08004B	SWEENEY, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON CENTRAL REG HS	9/19/2016 9/19/2016	Open	115.91	243.00	0.00	0.00	0.00	0.00	0.00	358.91
TRIPPED OVER FLOOR MAT AND	FELL INJURED L KNEE, R U	PPER ARM, R SH(2,384.09	2.00	0.00	0.00	0.00	0.00	0.00	2,386.09
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			115.91	243.00	0.00	0.00	0.00	0.00	0.00	358.91
			2,384.09	2.00	0.00	0.00	0.00	0.00	0.00	2,386.09
Claim Number: 16WC080	05W									
16WC08005W	DELLA SALA, JILLIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HENRY B. MILNES E.S.	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENTS SITTING ON FLOOR S	HE WAS ABOUT TO STEP O	N STUDENTS HAM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC080	06Y									
16WC08006Y	MORRIS, ANDREW	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING COMPUTER TOWER FRO	OM DESK TO CART AND DRO	OPPED TOWER OI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08007B



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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 - WO Claim Number: 16WC0										
16WC08007B	CHACON, BRYNNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLARA B. WORTH ES	9/15/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR	ISSUE DROPPED TABLE LANDI	NG ON L FOOT/AI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8008V									
16WC08008V	NINIVAGGI, STEVE	10	52,500.00	1,195.00	30,500.00	0.00	0.00	0.00	0.00	84,195.00
MANCHESTER TWP. MS	9/16/2016 9/19/2016	Open	533.63	1,193.00	0.00	0.00	0.00	0.00	0.00	1,726.63
ATTEMPTING TO RESTRAIN ST	IUDENT, TWSITED L KNEE		51,966.37	2.00	30,500.00	0.00	0.00	0.00	0.00	82,468.37
Total by Claim Number	1 Claim		52,500.00	1,195.00	30,500.00	0.00	0.00	0.00	0.00	84,195.00
			533.63	1,193.00	0.00	0.00	0.00	0.00	0.00	1,726.63
			51,966.37	2.00	30,500.00	0.00	0.00	0.00	0.00	82,468.37
Claim Number: 16WC0	8009B									
16WC08009B	PFISTER, THOMAS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP H.S	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DEMONSTRATING A GAME TO	STUDENTS HE ATTEMPTED TO	CATCH FRISBE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08010W



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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 - WOR Claim Number: 16WC08									
16WC08010W	PETRICK-ROGERS, KATHLEEN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	9/19/2016 9/19/2016 Open	82.99	243.00	0.00	0.00	0.00	0.00	0.00	325.99
SLIPPED ON WET FLOOR AND F	ELL INJURED BACK OF HEAD, LOW BACK, NE	2,417.01	2.00	0.00	0.00	0.00	0.00	0.00	2,419.01
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		82.99	243.00	0.00	0.00	0.00	0.00	0.00	325.99
		2,417.01	2.00	0.00	0.00	0.00	0.00	0.00	2,419.01
Claim Number: 16WC08	011B								
16WC08011B	CORVINO, RONALD 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	9/16/2016 9/19/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIOR IS	SUE SCRATCHED HIS L ARM, R WRIST, ARM/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: 16WC08	012V								
16WC08012V	HENRY, HELEN 10	17,000.00	1,195.00	11,000.00	0.00	0.00	0.00	0.00	29,195.00
LENNA W CONROW	9/15/2016 9/19/2016 Open	0.00	1,193.00	2,147.56	0.00	0.00	0.00	0.00	3,340.56
HELPING STUDENT GO TO SLEE	EP BY RUBBING HIS BACK SHE STOOD UP L F	17,000.00	2.00	8,852.44	0.00	0.00	0.00	0.00	25,854.44
Total by Claim Number 1	Claim	17,000.00	1,195.00	11,000.00	0.00	0.00	0.00	0.00	29,195.00
		0.00	1,193.00	2,147.56	0.00	0.00	0.00	0.00	3,340.56
		17,000.00	2.00	8,852.44	0.00	0.00	0.00	0.00	25,854.44

Claim Number: 16WC08013B



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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 - WO Claim Number: 16WC0	RKERS' COMPENSATION									
16WC08013B	BROWN, TATIANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND CITY	9/19/2016 9/19/2016	Open	20.06	243.00	0.00	0.00	0.00	0.00	0.00	263.06
SLIPPED ON WET FLOOR AND	FELL STUMBLED INTO WALL IN.	IURED HEAD, L	2,479.94	2.00	0.00	0.00	0.00	0.00	0.00	2,481.94
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			20.06	243.00	0.00	0.00	0.00	0.00	0.00	263.06
			2,479.94	2.00	0.00	0.00	0.00	0.00	0.00	2,481.94
Claim Number: 16WC0)8014W									
16WC08014W	BAILEY, CLARENCE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL HS	9/15/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE COACHING FOOTBALL	SLIPPED ON FOOTBALL EQUIPM	ENT LT FOOT 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: 16WC0	08015B									
16WC08015B	BENAVENTEESCAPA, RAU	IL 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WDBG TRANSPORTATION DEF	PT 9/15/2016 9/19/2016	Open	312.13	243.00	0.00	0.00	0.00	0.00	0.00	555.13
HELPING A CHILD AND JAMME	ED R THUMB BETWEEN BUS SEA	TS	2,187.87	2.00	0.00	0.00	0.00	0.00	0.00	2,189.87
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			312.13	243.00	0.00	0.00	0.00	0.00	0.00	555.13
			2,187.87	2.00	0.00	0.00	0.00	0.00	0.00	2,189.87

Claim Number: 16WC08016Y



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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 - WOR Claim Number: 16WC08										
16WC08016Y	FELMEY, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOLLY HEIGHTS ES	9/16/2016 9/19/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING AROUND SINK SLIPPE	ED AND FELL INJURED R SHO	ULDER, BUTTOCł	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	017M									
16WC08017M	GUDZAK, LIZA	10	32,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	58,693.00
HAMMARSKJOLD M.S.	9/19/2016 9/20/2016	Open	1,316.19	1,193.00	991.42	0.00	0.00	0.00	0.00	3,500.61
WALKING CAFETERIA SLIPPED	ON WET FLOOR AND FELL IN.	JURED L KNEE	31,183.81	0.00	24,008.58	0.00	0.00	0.00	0.00	55,192.39
Total by Claim Number 1	Claim		32,500.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	58,693.00
			1,316.19	1,193.00	991.42	0.00	0.00	0.00	0.00	3,500.61
			31,183.81	0.00	24,008.58	0.00	0.00	0.00	0.00	55,192.39
Claim Number: 16WC08	020Y									
16WC08020Y	BOWLBY, MELISSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON CENTRAL REG HS	9/19/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND F	ELL INJURED R KNEE, L FOO	T, LOW BACK, R 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: 16WC08021B



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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 - WOR Claim Number: 16WC08										
16WC08021B	FRAZEE, STACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NAVASINK ES	9/19/2016 9/20/2016	Open	66.56	243.00	0.00	0.00	0.00	0.00	0.00	309.56
WALKING DOWN HALLWAY SLI	PPED ON WET FLOOR FROM F	AIN AND FELL IN	2,433.44	2.00	0.00	0.00	0.00	0.00	0.00	2,435.44
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			66.56	243.00	0.00	0.00	0.00	0.00	0.00	309.56
			2,433.44	2.00	0.00	0.00	0.00	0.00	0.00	2,435.44
Claim Number: 16WC08	8022W									
16WC08022W	ALVAREZ, JOANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE JOHN GLENN PRE	SCF 9/19/2016 9/20/2016	Open	181.37	243.00	0.00	0.00	0.00	0.00	0.00	424.37
WALKING SHE TRIPPED ON FLO	OOR RUG AND FELL INJURED	L ELBOW, BOTH I	2,318.63	2.00	0.00	0.00	0.00	0.00	0.00	2,320.63
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			181.37	243.00	0.00	0.00	0.00	0.00	0.00	424.37
			2,318.63	2.00	0.00	0.00	0.00	0.00	0.00	2,320.63
Claim Number: 16WC08	8023B									
16WC08023B	BOYNTON, LINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GABLES ELEMENTARY SCHOO		Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN HALLWAY SLI	PPED ON WET FLOOR AND FE	LL 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: 16WC08024Y



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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 - WOR Claim Number: 16WC08										
16WC08024Y	VITALE, DIANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #9 PORT READING	9/16/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING BEHIND STUDENT, STU	JDENT TURNED AND BIT HER	ON L INNER FOR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8025B									
16WC08025B	BENIGNO, CARMELLA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL E.S.	9/12/2016 9/20/2016	Open	223.66	243.00	0.00	0.00	0.00	0.00	0.00	466.66
HEATING UP FOOD FOR STUDE	INT IN TOASTER OVEN WENT	TO UNPLUG IT BL	2,276.34	2.00	0.00	0.00	0.00	0.00	0.00	2,278.34
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			223.66	243.00	0.00	0.00	0.00	0.00	0.00	466.66
			2,276.34	2.00	0.00	0.00	0.00	0.00	0.00	2,278.34
Claim Number: 16WC08	8026W									
16WC08026W	CARROLL, LYNN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LACEY TWP H.S	9/19/2016 9/20/2016	Open	1,991.00	243.00	0.00	0.00	0.00	0.00	0.00	2,234.00
DURING AN EVACUATION DRILL	MISSED SIDEWALK STEP TR	IPPED AND FELL	509.00	2.00	0.00	0.00	0.00	0.00	0.00	511.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			1,991.00	243.00	0.00	0.00	0.00	0.00	0.00	2,234.00
			509.00	2.00	0.00	0.00	0.00	0.00	0.00	511.00

Claim Number: 16WC08027Z



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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										
16WC08027Z	PARISI, CHERYL	14	199.02	0.00	0.00	0.00	0.00	0.00	0.00	199.02
NELLIE K PARKER	9/15/2016 9/20/2016	10/18/2016	199.02	0.00	0.00	0.00	0.00	0.00	0.00	199.02
STEPPED DOWN STAIRS SLIPP	PED ON OILY SUBSTANCE L KN	IEE, LOWER BACI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		199.02	0.00	0.00	0.00	0.00	0.00	0.00	199.02
			199.02	0.00	0.00	0.00	0.00	0.00	0.00	199.02
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	8028Y									
16WC08028Y	SANTHIN, KAREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HORACE MANN ES	9/16/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TOWARDS PLAYGRO	OUND L FOOT GOT CAUGHT IN	BETWEEN PAVEI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8029B									
16WC08029B	THOMORE, GIOVANNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PRINCETON HS	9/19/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BED BUG CRAWLING ON STUD	ENTS BACKPACK LATER SHE	HAD FIVE INSECT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08030B



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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 - WOI Claim Number: 16WC0										
16WC08030B	BROWN, JILL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING E.S.	9/19/2016 9/20/2016	Open	244.49	243.00	0.00	0.00	0.00	0.00	0.00	487.49
WALKING WHEN SHE SLIPPED	IN PUDDLE OF WATER LEAK F	ROM CEILING AN	2,255.51	2.00	0.00	0.00	0.00	0.00	0.00	2,257.51
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			244.49	243.00	0.00	0.00	0.00	0.00	0.00	487.49
			2,255.51	2.00	0.00	0.00	0.00	0.00	0.00	2,257.51
Claim Number: 16WC0	8032T									
16WC08032T	BRILLIANTE, ROBERT	10	25,000.00	1,193.00	18,023.96	0.00	0.00	0.00	0.00	44,216.96
WASHINGTON PARK ES	9/19/2016 9/20/2016	Open	92.21	1,193.00	2,596.14	0.00	0.00	0.00	0.00	3,881.35
CAUGHT HIS L RING FINGER IN	DOOR OF GARAGE		24,907.79	0.00	15,427.82	0.00	0.00	0.00	0.00	40,335.61
Total by Claim Number 1	Claim		25,000.00	1,193.00	18,023.96	0.00	0.00	0.00	0.00	44,216.96
			92.21	1,193.00	2,596.14	0.00	0.00	0.00	0.00	3,881.35
			24,907.79	0.00	15,427.82	0.00	0.00	0.00	0.00	40,335.61
Claim Number: 16WC0	8033W									
16WC08033W	CHAPMAN, TRACIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOEHL MIDDLE SCHOOL	9/19/2016 9/20/2016	Open	118.06	243.00	0.00	0.00	0.00	0.00	0.00	361.06
WALKING A STUDENT TO OFFI	CE STUDENT OPENED DOOR S	TRIKING HER ON	2,381.94	2.00	0.00	0.00	0.00	0.00	0.00	2,383.94
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			118.06	243.00	0.00	0.00	0.00	0.00	0.00	361.06
			2,381.94	2.00	0.00	0.00	0.00	0.00	0.00	2,383.94

Claim Number: 16WC08034A



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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 - WOR Claim Number: 16WC08										
16WC08034A	OLSSON, ARTHUR	11	454.87	243.00	0.00	0.00	0.00	3,500.00	0.00	4,197.87
CAPE MAY COUNTY BRD OF VO	DC E 9/15/2016 9/20/2016	Reopened	454.87	243.00	0.00	0.00	0.00	0.00	0.00	697.87
THROWING OUT COMPUTER CI	HAIRS IN DUMPSTERS STRAIN	ED R SHOULDEF	0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
Total by Claim Number 1	Claim		454.87	243.00	0.00	0.00	0.00	3,500.00	0.00	4,197.87
			454.87	243.00	0.00	0.00	0.00	0.00	0.00	697.87
			0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
Claim Number: 16WC08	3035W									
16WC08035W	SERASIN, ANNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MONMOUTH JUNCTION E S	9/15/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REMOVING A TABLE TO TAKE T	O OUTSIDE STORAGE TABLE	FELL CAUSING 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: 16WC08	3036B									
16WC08036B	MASUR, JANI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGHLAND PARK HS	9/16/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TAKING THE TAB OFF EPI PEN	TO ADMINISTER TO STUDENT	ACCIDENTLY ST	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08037Y



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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 - WOR Claim Number: 16WC08										
16WC08037Y	WHELAN, KEYLA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MILLSTONE TWP ES	9/15/2016 9/20/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS WITH STUDENT, STUDENT	HIT HER ON R EAR CAUSING	LOSS OF HEARI	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: 16WC08	3038W									
16WC08038W	OSCANNELL, LUCIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODLAND ES	9/20/2016 9/20/2016	Open	15.78	243.00	0.00	0.00	0.00	0.00	0.00	258.78
WALKING ON PLAYGROUND PA	VEMENT STEPPED IN HOLE S	HE FELL ON L KN	2,484.22	2.00	0.00	0.00	0.00	0.00	0.00	2,486.22
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			15.78	243.00	0.00	0.00	0.00	0.00	0.00	258.78
			2,484.22	2.00	0.00	0.00	0.00	0.00	0.00	2,486.22
Claim Number: 16WC08	3040W									
16WC08040W	PASCOCELLO, SANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POINT PLEASANT BEACH HS	9/19/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CARRYING 2 CASES OF GARBA	GE BAGS TRIPPED OVER FIR	E EXTINGUISHER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08041Z



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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 - WORK Claim Number: 16WC080										
16WC08041Z	MILANES, ALBERTO	10	40,000.00	1,193.00	10,452.00	0.00	0.00	0.00	0.00	51,645.00
TOWNSHIP HS	9/14/2016 9/20/2016	Open	33.83	1,193.00	0.00	0.00	0.00	0.00	0.00	1,226.83
MOVING FILING CABINET AND PL	ITTING UP POSTERS ON WA	LL FELT PAIN O F	39,966.17	0.00	10,452.00	0.00	0.00	0.00	0.00	50,418.17
Total by Claim Number 1 C	laim		40,000.00	1,193.00	10,452.00	0.00	0.00	0.00	0.00	51,645.00
			33.83	1,193.00	0.00	0.00	0.00	0.00	0.00	1,226.83
			39,966.17	0.00	10,452.00	0.00	0.00	0.00	0.00	50,418.17
Claim Number: 16WC080	42C									
16WC08042C	DUDICK, JANETLYNN	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ADMINISTRATION BLDG	9/19/2016 9/20/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DURING A MEETING WAS VERBA	LLY ASSAULTED CAUSED AN	NXIETY, ELEVATE	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 C	laim		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: 16WC080	43B									
16WC08043B	BELICK, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON CENTRAL REG HS	9/19/2016 9/20/2016	Open	94.70	243.00	0.00	0.00	0.00	0.00	0.00	337.70
SLIPPED ON WET SURFACE R LE	G WENT BACK WHILE L KNE	E HIT FLOOR	2,405.30	2.00	0.00	0.00	0.00	0.00	0.00	2,407.30
Total by Claim Number 1 C	laim		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: 16WC08044W



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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 - WOR Claim Number: 16WC08										
16WC08044W	GOLD, ADAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGHLAND PARK HS	9/19/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED AND FELL ON WET FLO	OOR HIT HIS HEAD CAUSING L	ACERATION	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3045W									
16WC08045W	RODRIGUEZ, JUAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	9/20/2016 9/20/2016	Open	371.41	243.00	0.00	0.00	0.00	0.00	0.00	614.41
WAS CLEANING AND CHANGING	G PANELS AND WAS STRUCK	BY DEBRIS IN EY	2,128.59	2.00	0.00	0.00	0.00	0.00	0.00	2,130.59
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			371.41	243.00	0.00	0.00	0.00	0.00	0.00	614.41
			2,128.59	2.00	0.00	0.00	0.00	0.00	0.00	2,130.59
Claim Number: 16WC08	3046W									
16WC08046W	POUNDS, JESSICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HALEDON PUBLIC SCHOOL	9/19/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	L ISSUE WS BITTEN ON R THIG	ЭH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08047B



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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 - WO Claim Number: 16WC0										
16WC08047B	CANTONI, JOANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARIE DURAND E.S.	9/19/2016 9/20/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
SLIPPED IN WATER AND INJUR	RED L ANKLE, R HAND, R ELBOW	N	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	8048Y									
16WC08048Y	LAROCCA, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 7 ES	9/14/2016 9/20/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COMING OUT CLASSROOM SL	IPPED IN WATER LEAKING FRO	M WATER FOUN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8049B									
16WC08049B	GREENBLATT, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ABRAM P MORRIS-SAYBROOK	ES 9/19/2016 9/20/2016	Open	281.66	243.00	0.00	0.00	0.00	0.00	0.00	524.66
REMOVING A TOY FROM STUE	DENT, STUDENT BIT R FOREAR	N	2,218.34	2.00	0.00	0.00	0.00	0.00	0.00	2,220.34
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			281.66	243.00	0.00	0.00	0.00	0.00	0.00	524.66
			2,218.34	2.00	0.00	0.00	0.00	0.00	0.00	2,220.34

Claim Number: 16WC08050W



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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										
16WC08050W	BUTLER, DENICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WEST AVENUE E.S.	9/6/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PUSHING DESK AND TABL	ES WHEN SHE STRAINED R V	VRIST	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	3051B									
16WC08051B	MCKAY, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN VILLAGE ES	9/15/2016 9/21/2016	Open	49.60	243.00	0.00	0.00	0.00	0.00	0.00	292.60
CLEANING OUT BUSHES AND D	EVELOPED RASH ON R BICER	P MAYBE POISON	2,450.40	2.00	0.00	0.00	0.00	0.00	0.00	2,452.40
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			49.60	243.00	0.00	0.00	0.00	0.00	0.00	292.60
			2,450.40	2.00	0.00	0.00	0.00	0.00	0.00	2,452.40
Claim Number: 16WC0	3052Y									
16WC08052Y	STAFF, RITA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURLINGTON CO SPEC SER SC	CH V 9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ACCIDENTLY DROPPED A CAN	AND THE CAN BOUNCED FRC	M FLOOR HITTIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08054B



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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										
16WC08054B	STATILE, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PINES LAKE E.S.	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN FRONT ENTRANCE	DUE TO WATER INJURED 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: 16WC0	8055Y									
16WC08055Y	D'AMICO, CHRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PLAYING VOLLEYBA	LL FELL AND ACCIDENTLY STRU	JCK HER IN L EY	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8056W									
16WC08056W	EDONE, GINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DONALD A QUARLES ES	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT COMMENCED TO KIC	CK HER L KNEE WHILE RESTRAI	NING STUDENT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08058W



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				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 Los	s 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 - WORKERS' Claim Number: 16WC08058W	COMPENSATION									
16WC08058W BILL	ARD, ELLEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REG. DAY SCHOOL AT PISCATV 9/16	6/2016 9/21/2016	Open	274.73	243.00	0.00	0.00	0.00	0.00	0.00	517.73
PLACING STUDENT IN WHEELCHAIR ST	ANDER WHEN SHE IN	JURED L INDEX F	2,225.27	2.00	0.00	0.00	0.00	0.00	0.00	2,227.27
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			274.73	243.00	0.00	0.00	0.00	0.00	0.00	517.73
			2,225.27	2.00	0.00	0.00	0.00	0.00	0.00	2,227.27
Claim Number: 16WC08059Y										
16WC08059Y PAG	GANO, DOMENICANT	DNIS 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFFICE 9/20	/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS MOVING CAST IRON PLATES WHEN	N PIECES OF METAL I	FLEW INTO HIS 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: 16WC08060B										
16WC08060B DEA	CON, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY 9/19	9/2016 9/21/2016	Open	41.73	243.00	0.00	0.00	0.00	0.00	0.00	284.73
ASSISTING STUDENT INTO SCHOOL, ST	UDENT RESISTED AN	ID PULLED ON HE	2,458.27	2.00	0.00	0.00	0.00	0.00	0.00	2,460.27
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			41.73	243.00	0.00	0.00	0.00	0.00	0.00	284.73
			2,458.27	2.00	0.00	0.00	0.00	0.00	0.00	2,460.27

Claim Number: 16WC08061W



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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 - WOR Claim Number: 16WC08										
16WC08061W	FAHLEY, ROBERT	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	FICE 9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WHEN HE TRIPPED C	ON UNEVEN FLOOR MATS AND	FELL INJURED 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: 16WC08	8062M									
16WC08062M	MAHONEY, PHYLLIS	10	2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
TERRILL MS	9/20/2016 9/21/2016	Open	0.00	1,193.00	928.00	0.00	0.00	0.00	0.00	2,121.00
OUTSIDE ON PLAYGROUND WH	HEN WAS STRUCK ON R SIDE C	OF HEAD/EAR BY	2,500.00	0.00	4,072.00	0.00	0.00	0.00	0.00	6,572.00
Total by Claim Number 1	Claim		2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
			0.00	1,193.00	928.00	0.00	0.00	0.00	0.00	2,121.00
			2,500.00	0.00	4,072.00	0.00	0.00	0.00	0.00	6,572.00
Claim Number: 16WC08	8063W									
16WC08063W	GILMARTIN, VANESSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TEACHING WAS STRUCK BY A	STUDENT HAVING BEHAVIORA	L ISSUE IN L EYE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08064Y



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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 - WOR Claim Number: 16WC08										
16WC08064Y	CHARMANT, GESNER	11	2,500.00	245.00	565.68	0.00	0.00	0.00	0.00	3,310.68
HUNTERDON TRANSPORTATIO	ND 9/20/2016 9/21/2016	Open	0.00	243.00	565.68	0.00	0.00	0.00	0.00	808.68
SWEEPING THE BUS WITH BRO	OM, THE BROOM BROKE CUT	TING 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	565.68	0.00	0.00	0.00	0.00	3,310.68
			0.00	243.00	565.68	0.00	0.00	0.00	0.00	808.68
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3065Z									
16WC08065Z	CAMM, KELLY	14	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
WINSLOW TWP #4 E.S.	9/21/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORAL	- ISSUE WAS HEAD BUTTED IN	MOUTH/FRONT	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1	Claim		5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Claim Number: 16WC08	3066J									
16WC08066J	SCALFARO, SARAFINA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
TERRILL MS	9/20/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IN CLASSROOM TEACHING WH	EN SHE FELT SHAKY, LIGHT HI	EADED, DIZZY, E	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: 16WC08067W



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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 - WOR Claim Number: 16WC08										
16WC08067W	VANDUNK, MIRANDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALBERT PAYSON ES	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING WITH STUDENTS, AND	THER STUDENT LEANED ON C	HAIR AND FELL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8069Y									
16WC08069Y	LLOYD, PAULINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOYCE KILMER SCHOOL	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE SCRATCHED R LOWER	R ARM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8070W									
16WC08070W	FLUMENBAUM, DEBORAH	H 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
WALLACE MIDDLE SCHOOL	9/20/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GETTING UP FROM CHAIR LOS	T HER BALANCE AND FELL ON	BOTH KNEES	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: 16WC08071W



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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										
16WC08071W	VEDVYAS, DIVYA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCE INTERMEDIATE SC	CHOC 9/15/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED AND FELL OVER STU	DENTS FOOT INJURED L WRIST	, LOWER BACK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	8072Y									
16WC08072Y	HACKLER, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYSIDE E.S.	9/20/2016 9/21/2016	Open	11.48	243.00	0.00	0.00	0.00	0.00	0.00	254.48
CO-WORKER ACCIDENTLY CLC	DSED DOOR ON L PINKY FINGE	२	2,488.52	2.00	0.00	0.00	0.00	0.00	0.00	2,490.52
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			11.48	243.00	0.00	0.00	0.00	0.00	0.00	254.48
			2,488.52	2.00	0.00	0.00	0.00	0.00	0.00	2,490.52
Claim Number: 16WC0	8073V									
16WC08073V	BELTON, ANTHONY	10	2,500.00	1,193.00	22,000.00	0.00	0.00	0.00	0.00	25,693.00
LIVINGSTON SENIOR HS	9/17/2016 9/21/2016	Open	170.33	1,193.00	637.12	0.00	0.00	0.00	0.00	2,000.45
TRIPPED AND TWISTED L KNEE	E ON METAL PIECE STICKING O	UT OF BUS FLO	2,329.67	0.00	21,362.88	0.00	0.00	0.00	0.00	23,692.55
Total by Claim Number 1	Claim		2,500.00	1,193.00	22,000.00	0.00	0.00	0.00	0.00	25,693.00
			170.33	1,193.00	637.12	0.00	0.00	0.00	0.00	2,000.45
			2,329.67	0.00	21,362.88	0.00	0.00	0.00	0.00	23,692.55

Claim Number: 16WC08074Y



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10/18/2016 3:05:53PM

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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										
16WC08074Y	DERENSIS, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLI F. BENNETT ES	9/19/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON TRACKED IN RAIN	I STRAINED LOWER BACK		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	8075B									
16WC08075B	LUBBE, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS B CONLEY ES	9/19/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT WAS HAVIN	NG A BEHAVIORAL OUTBURST	SCRATCHED CL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8076W									
16WC08076W	VAZQUEZ, LUCINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN HIGH SCHOOL	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FILING HISTORY REPORTS FIL	ING CABINET FELL HITTING R A	ARM, ELBOW, SH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08077Y



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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 - WOR Claim Number: 16WC08										
16WC08077Y	HERZIG, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OAKWOOD AVENUE SCHOOL	9/21/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASKING STUDENT TO SIT DOWN	I, STUDENT BIT HER L HAND/	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: 16WC08	078W									
16WC08078W	TOMEO, FRANCES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN COUNTY TECH	9/21/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING DOLL HEADS DOWN F	OR CLASS, THE BOX FELL HI ⁻	ITING HER 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: 16WC08	079B									
16WC08079B	MELLINI, TRACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAKEVIEW ES	9/20/2016 9/21/2016	Open	35.37	243.00	0.00	0.00	0.00	0.00	0.00	278.37
SLIPPED ON APPLESAUCE AND	FELL INJURED L KNEE, LOWE	ER BACK	2,464.63	2.00	0.00	0.00	0.00	0.00	0.00	2,466.63
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			35.37	243.00	0.00	0.00	0.00	0.00	0.00	278.37
			2,464.63	2.00	0.00	0.00	0.00	0.00	0.00	2,466.63

Claim Number: 16WC08080W



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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 - WO Claim Number: 16WC0										
16WC08080W	CARNEVALE, KRISTINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTMORELAND E. S.	9/21/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUTTING PAPER FOR CLASS U	JSING A PAPER CUTTER CUT L	THUMB	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	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	8081Y									
16WC08081Y	HELLER, MICHELLE	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SUMMERFIELD SCHOOL INCLU	JDIN 9/21/2016 9/21/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING STUDENT'S DESKS A	ND CHAIRS IN THE CLASSROOM	M A CHAIR FELL I	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	I 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	8082Z									
16WC08082Z	WILSON, ALFREDA	10	5,000.00	1,193.00	9,000.00	0.00	0.00	0.00	0.00	15,193.00
WASHINGTON SCHOOL	9/20/2016 9/21/2016	Open	320.81	1,193.00	1,435.16	0.00	0.00	0.00	0.00	2,948.97
SLIPPED AND FELL IN SPLIT P	OSITION INJURED L HIP, L BUT	FOCKS, R KNEE	4,679.19	0.00	7,564.84	0.00	0.00	0.00	0.00	12,244.03
Total by Claim Number	I Claim		5,000.00	1,193.00	9,000.00	0.00	0.00	0.00	0.00	15,193.00
			320.81	1,193.00	1,435.16	0.00	0.00	0.00	0.00	2,948.97
			4,679.19	0.00	7,564.84	0.00	0.00	0.00	0.00	12,244.03

Claim Number: 16WC08083B



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September 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: 16WC08										
16WC08083B	KEARNS, CASSANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARIA L. VARISCO-ROGERS CH	IAR 9/21/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WITH STUDENTS TO I	LUNCH WAS STUNG BY A BEE	ON 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: 16WC08	084Y									
16WC08084Y	MATUSZ, STEPHEN	11	115.18	243.00	0.00	0.00	0.00	0.00	0.00	358.18
MILLVILLE SR HS	9/21/2016 9/21/2016	10/18/2016	115.18	243.00	0.00	0.00	0.00	0.00	0.00	358.18
ATTEMPTING TO BREAK UP FIG	HT AMONG STUDENTS EXPO	SED TO STUDEN [.]	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		115.18	243.00	0.00	0.00	0.00	0.00	0.00	358.18
			115.18	243.00	0.00	0.00	0.00	0.00	0.00	358.18
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC08	8085W									
16WC08085W	DIPOPOLO, GERALDINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL OFFICE	9/19/2016 9/21/2016	Open	170.33	243.00	0.00	0.00	0.00	0.00	0.00	413.33
PUSHING AWAY FROM HER DES	SK CHAIR BECAME STUCK TO	CARPET ALONG	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: 16WC08086W



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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										
16WC08086W	COOPER, STEPHANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TERRILL MS	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
IN PRINCIPALS OFFICE WITH S	TUDENT AND STUDENTS PARE	ENT STUDENT SF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8087B									
16WC08087B	BERNARDO, HEATHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNT PROSPECT ES	9/20/2016 9/22/2016	Open	225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
STUDENT FELL BACK STRIKING	G HER L KNEE CAUSING IT TO E	BEND BACKWAR	2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
			2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Claim Number: 16WC0	8088W									
16WC08088W	SEABROOK'WOO, GRACE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	9/21/2016 9/22/2016	Open	29.34	243.00	0.00	0.00	0.00	0.00	0.00	272.34
ON LUNCH DUTY, SLIPPED ON	WET SPOT AND FELL INJURED	BUTTOCKS	2,470.66	2.00	0.00	0.00	0.00	0.00	0.00	2,472.66
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			29.34	243.00	0.00	0.00	0.00	0.00	0.00	272.34
			2,470.66	2.00	0.00	0.00	0.00	0.00	0.00	2,472.66

Claim Number: 16WC08089A



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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										
16WC08089A	HINTON, WILLIAM	10	0.00	1,193.00	862.88	0.00	0.00	0.00	0.00	2,055.88
MEMORIAL HS	9/21/2016 9/22/2016	10/12/2016	0.00	1,193.00	862.88	0.00	0.00	0.00	0.00	2,055.88
WALKING OUT CLASSROOM W	HEN HE LOST HIS BALANCE A	ND FELL INJURED	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		0.00	1,193.00	862.88	0.00	0.00	0.00	0.00	2,055.88
			0.00	1,193.00	862.88	0.00	0.00	0.00	0.00	2,055.88
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC0	8090W									
16WC08090W	PARZANESE, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP M.S.	9/21/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WERE HAVING AN A	LTERCATION AND TRAMPLED	OVER HER INJUR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8091Y									
16WC08091Y	WHITE, JOHN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING STUDENT ON BUS, D	RIVER PREPARED TO PULL OF	F CLOSED DOOF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08092W



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September 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: 16WC080										
16WC08092W	AMER, HANAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR HS	9/20/2016 9/21/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNLOCKING BATHROOM DOOR F	OR STUDENT DOOR CLOSE	D HEAD, FACE, L	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC080	94Y									
16WC08094Y	LEWIS, LYNNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VON E MAUGER MS	9/20/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE SLIPPED ON PENC	IL AND FELL INJURED R KN	EE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC080	95B									
16WC08095B	LUICCI, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT KICKED A WOODEN DO	OR WHICH HIT HER 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 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08096B



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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										
16WC08096B	DALIE, KELSEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VALLEY PROGRAM	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	RAL ISSUE BIT L UPPER 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	8097W									
16WC08097W	SENERCHIA, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN M. BAILEY SCHOOL	9/21/2016 9/22/2016	Open	225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
WALKING DOWN STEPS LOST	FOOTING GRABBED BANISTER	SWUNG DOWN I	2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			225.00	243.00	0.00	0.00	0.00	0.00	0.00	468.00
			2,275.00	2.00	0.00	0.00	0.00	0.00	0.00	2,277.00
Claim Number: 16WC0	8098Y									
16WC08098Y	CREEKMORE, PETER	14	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
GREATER BRUNSWICK CHART	ER § 9/1/2016 9/22/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MOVING FURNITURE AROUND,	LIFTING TABLES FELT PAIN IN	R SHOULDER	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	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	2,500.00

Claim Number: 16WC08099B



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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 - WO Claim Number: 16WC0	RKERS' COMPENSATION 08099B									
16WC08099B	PUTNAM, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAKEVIEW ES	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP 3 GALLONS OF BO	OTTLED WATER TO LOAD ONTO	CART PULLED N	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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)8100Y									
16WC08100Y	SINCAGLIA, IRENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FM BURD E.S.	9/15/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSFERRING STUDENT FR	OM A WHEELCHAIR TO BENCH	L HAND BECAME	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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)8101B									
16WC08101B	VIAPIANO, ELAINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON ES	9/14/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND	FELL INJURED BOTH KNEES, B	UTTOCKS, BOTH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08102F



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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 - WO Claim Number: 16WC	RKERS' COMPENSATION 08102F								
16WC08102F	SCHAEFFER, MARGUERITE 10	2,500.00	1,193.00	3,500.00	0.00	0.00	0.00	0.00	7,193.00
ADMIN BLDG	9/20/2016 9/22/2016 Open	0.00	1,193.00	464.00	0.00	0.00	0.00	0.00	1,657.00
BUS DRIVER ATTEMPTED TO	MAKE A U-TURN WHEN HE STRUCK OVERHANG	2,500.00	0.00	3,036.00	0.00	0.00	0.00	0.00	5,536.00
Total by Claim Number	1 Claim	2,500.00	1,193.00	3,500.00	0.00	0.00	0.00	0.00	7,193.00
		0.00	1,193.00	464.00	0.00	0.00	0.00	0.00	1,657.00
		2,500.00	0.00	3,036.00	0.00	0.00	0.00	0.00	5,536.00
Claim Number: 16WC	08103W								
16WC08103W	GAINSKY, JUSTIN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EVERGREEN ES	9/21/2016 9/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS CUTTING BUSHES WAS	STUNG BY A BEE ON L FOREARM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	08104Y								
16WC08104Y	KHWAZ, LUCY 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERKELEY ES	9/22/2016 9/22/2016 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTED TO REMOVE VEL	CRO OFF DESK WITH PAIR OF SCISSORS CUTTI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08105B



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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 - WOR Claim Number: 16WC08										
16WC08105B	JULIANO, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHORE REG HS	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BOOSTING HERSELF ONTO HIC	GH STOOL, WHEELS OF STOOL	ROLLED SHE FE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	810 6W									
16WC08106W	FOWLER, DAWN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK PRIMARY	9/19/2016 9/22/2016	Open	106.08	243.00	0.00	0.00	0.00	0.00	0.00	349.08
SLIPPED ON WET FLOOR FROM	I RAIN SHE FELL ON L KNEE		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: 16WC08	8107B									
16WC08107B	SPINGARN, DEBORA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGEWATER-RARITAN HS	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING PASS STACKED UP C	HAIRS, TRIPPED ON CHAIR LE	G AND FELL INT(2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08108W



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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 - WOR Claim Number: 16WC08										
16WC08108W	BERRY, CRYSTAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLE SCHOOL AT SPRINGSID	DE 9/22/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING IN DOORWAY OF GYI	M WHEN METAL DOOR STOPF	PER FELL INJURE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	109B									
16WC08109B	LEVITSKY, SCOT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SALEM H S	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT FROM	FIGHTING ANOTHER STUDEN	T WHEN HYPERE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	110W									
16WC08110W	MORRISROE, COLLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEVEL LC - NEW PROVIDENCE	9/22/2016 9/22/2016	Open	27.22	243.00	0.00	0.00	0.00	0.00	0.00	270.22
STUDENT HAVING BEHAVIORAL	ISSUE BIT R INDEX FINGER		2,472.78	2.00	0.00	0.00	0.00	0.00	0.00	2,474.78
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			27.22	243.00	0.00	0.00	0.00	0.00	0.00	270.22
			2,472.78	2.00	0.00	0.00	0.00	0.00	0.00	2,474.78

Claim Number: 16WC08111B



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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 - WO Claim Number: 16WC0										
16WC08111B	MANTROM, GUISLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRUNSWICK ACRES E. S.	9/22/2016 9/22/2016	Open	33.81	243.00	0.00	0.00	0.00	0.00	0.00	276.81
ASSISTING STUDENT HAVING	BEHAVIORAL ISSUE WAS BITTI	EN ON R SHOULD	2,466.19	2.00	0.00	0.00	0.00	0.00	0.00	2,468.19
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			33.81	243.00	0.00	0.00	0.00	0.00	0.00	276.81
			2,466.19	2.00	0.00	0.00	0.00	0.00	0.00	2,468.19
Claim Number: 16WC0	08112B									
16WC08112B	DELGESSO, DINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NATHAN HALE E.S.	9/22/2016 9/22/2016	Open	347.71	243.00	0.00	0.00	0.00	0.00	0.00	590.71
TRYING TO CONSOLE A CHILE	HAVING BEHAVIORAL ISSUE S	STUDENT PULLEE	2,152.29	2.00	0.00	0.00	0.00	0.00	0.00	2,154.29
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			347.71	243.00	0.00	0.00	0.00	0.00	0.00	590.71
			2,152.29	2.00	0.00	0.00	0.00	0.00	0.00	2,154.29
Claim Number: 16WC0)8113Y									
16WC08113Y	KOCHAR, KAJAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CEDAR HILL ES	9/22/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENTS SLIPPE	D ON WATER AND FELL ON BC	TH KNEES, INJ 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: 16WC08114Z



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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 - WOR Claim Number: 16WC08										
16WC08114Z	ECKART, GLYNN	10	46,000.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	82,193.00
RANCOCAS VALLEY REG. HS	9/21/2016 9/22/2016	Open	0.00	1,193.00	904.26	0.00	0.00	0.00	0.00	2,097.26
CUTTING GRASS RAN INTO FEN	ICE POST DISLOCATED L SHO	DULDER	46,000.00	0.00	34,095.74	0.00	0.00	0.00	0.00	80,095.74
Total by Claim Number 1	Claim		46,000.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	82,193.00
			0.00	1,193.00	904.26	0.00	0.00	0.00	0.00	2,097.26
			46,000.00	0.00	34,095.74	0.00	0.00	0.00	0.00	80,095.74
Claim Number: 16WC08	115B									
16WC08115B	SCHNAARS, ANDREW	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL INTERMEDIATE SCH	OO 9/22/2016 9/22/2016	Open	35.64	243.00	0.00	0.00	0.00	0.00	0.00	278.64
RETURNING STUDENT TO SEAT	STUDENT TRIED TO PUSH T	ABLE OVER HE LI	2,464.36	2.00	0.00	0.00	0.00	0.00	0.00	2,466.36
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			35.64	243.00	0.00	0.00	0.00	0.00	0.00	278.64
			2,464.36	2.00	0.00	0.00	0.00	0.00	0.00	2,466.36
Claim Number: 16WC08	116B									
16WC08116B	TOMKO, FREDRICK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH HS	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WEED WHACKING WHEN HE HIT	A BEES NEST WAS STUNG	ON BOTH ARMS	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08117B



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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 - WOR Claim Number: 16WC08										
16WC08117B	BOWENS, FRANK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE HIGH SCHOOL	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP FIGHT BETWEEN	STUDENTS FELL TO GROUND	INJ HEAD, L WR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3120W									
16WC08120W	SMITH, BONNIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINWOOD MIDDLE SCHOOL	9/22/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DISASSEMBLING EPI PENS FRO	M CASES ON CASE HARD TO	OPEN PUNCTUR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3121W									
16WC08121W	CANNON, ANGELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENT HAVING B	EHAVIORAL ISSUE STUDENT	WISTED HER R	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08122B



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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 - WORKE Claim Number: 16WC0812										
16WC08122B	GILMARTIN, JOYA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INSTITUT	9/13/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND FEL	L INJURED R HAND, R KNE	Ε	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Cla	aim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0812	3Y									
16WC08123Y	STONE-INGALS, LIANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	9/22/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT FELL FROM WATER ON F	LOOR ACCIDENTALY KNO	OCKING HER DOW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Cla	aim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0812	4Y									
16WC08124Y	BENHALIMA, MINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROBERT WATERS SCHOOL	9/22/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE TWISTED HER R FO	OT ON SIDEWALK OPENIN	G	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Cla	aim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08125B



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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 - Wo Claim Number: 16WC	DRKERS' COMPENSATION 08125B								
16WC08125B	KNAPP, KAREN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CEDAR CREEK E.S.	9/19/2016 9/23/2016 Open	6.20	243.00	0.00	0.00	0.00	0.00	0.00	249.20
WALKING IN OFFICE WHEN S	THE FELL ON WET FLOOR INJURED L KNEE	2,493.80	2.00	0.00	0.00	0.00	0.00	0.00	2,495.80
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		6.20	243.00	0.00	0.00	0.00	0.00	0.00	249.20
		2,493.80	2.00	0.00	0.00	0.00	0.00	0.00	2,495.80
Claim Number: 16WC	08126W								
16WC08126W	FANNIN, VONDALYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN SCHOOL	9/22/2016 9/23/2016 Open	447.91	243.00	0.00	0.00	0.00	0.00	0.00	690.91
WALKING AND ACCIDENTAL	BUMPED INTO CHAIR FOOT BECAME STUCK IN	2,052.09	2.00	0.00	0.00	0.00	0.00	0.00	2,054.09
Total by Claim Number	1 Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		447.91	243.00	0.00	0.00	0.00	0.00	0.00	690.91
		2,052.09	2.00	0.00	0.00	0.00	0.00	0.00	2,054.09
Claim Number: 16WC	08127Z								
16WC08127Z	BARON, MICHELE 10	25,000.00	1,438.00	20,500.00	0.00	0.00	0.00	0.00	46,938.00
ALAN B SHEPARD ES	9/19/2016 9/23/2016 Open	1,678.89	1,193.00	1,742.00	0.00	0.00	0.00	0.00	4,613.89
WALKING TO VEHICLE IN DIM	I PARKING LOT SHE FELL WHEN FOOT CAUGHT (23,321.11	245.00	18,758.00	0.00	0.00	0.00	0.00	42,324.11
Total by Claim Number	1 Claim	25,000.00	1,438.00	20,500.00	0.00	0.00	0.00	0.00	46,938.00
		1,678.89	1,193.00	1,742.00	0.00	0.00	0.00	0.00	4,613.89
		23,321.11	245.00	18,758.00	0.00	0.00	0.00	0.00	42,324.11

Claim Number: 16WC08128W



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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 - WORI Claim Number: 16WC08		N								
16WC08128W	FREY, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL E.S.	9/22/2016 9/23/2010	6 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT RAN SHE RAN AFTER	STUDENT SHE SLID AND F	ELL BACKWARDS 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: 16WC08	129Y									
16WC08129Y	LESKO, MARY JANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	9/22/2016 9/23/2010	6 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING UP BUS STEPS WHILE	BUS WAS IN BUS YARD TH	RIPPED CUT HER 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: 16WC08	131B									
16WC08131B	PRAVATO, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNT HOREB ES	9/22/2016 9/23/2010	6 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A STOOL WAS KNOCKED OVER	BY A SPEC ED STUDENT F	ELL ON CLMT'S LT 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: 16WC08132Y



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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 - WO Claim Number: 16WC0										
16WC08132Y	JOHANNESEN, MICHELE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LLOYD ROAD ES	9/22/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RESTRAIN SPEC E	D STUDENT THE STUDENT KIC	KED RT THUMB 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: 16WC0	8133W									
16WC08133W	RODRIGUEZ, LARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLE SCHOOL	9/22/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE CARRYING A GLASS JA	R OF CANDY SHE TRIPPED & F	ELL OVER BOXE:	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8134W									
16WC08134W	NEWSOME, CHARLES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TIMBER CREEK HIGH SCHOOL	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT TRIPPED AND FELL OVE	R A BACKPACK ON THE FLOOF	R INJ LT KNEE, SF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08135Y



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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 - WOR Claim Number: 16WC08										
16WC08135Y	PALERMO, LAUREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS UNLOCKING DOOR WHEN	SHE SLIPPED AND FELL ON W	/ET FLOOR INJ 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: 16WC08	8136Y									
16WC08136Y	GREEN, JEANE	11	3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
GLOUCESTER CO. TECH & VOC	CHS 9/21/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS PICKING UP A CASE	E OF GARBAGE BAGS TO TAKE	TO CAFETERIA :	3,501.00	0.00	0.00	0.00	0.00	0.00	0.00	3,501.00
Total by Claim Number 1	Claim		3,501.00	243.00	0.00	0.00	0.00	0.00	0.00	3,744.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			3,501.00	0.00	0.00	0.00	0.00	0.00	0.00	3,501.00
Claim Number: 16WC08	8137Y									
16WC08137Y	TITLEBAUM, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOREST STREET SCHOOL	9/13/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DRIVING BACK TO A SCHOOL M	MEETING WHEN ANOTHER VEH	IICLE CRASHED 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: 16WC08138Y



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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 - WOR Claim Number: 16WC08										
16WC08138Y	SWOBDZIEN, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUDREY W CLARK	9/21/2016 9/22/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	AL HEAD BUTTED HER DURING	TRANSITION	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3139B									
16WC08139B	ANTUNES, DANIELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FOREST STREET SCHOOL	9/21/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY A STUD	ENT ACCIDENTLY STUMBLED L	ANDING ON CLN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3140B									
16WC08140B	ELDRIDGE, MARGARET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RICHARD C. CROCKETT M.S.	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT WAS WALKING ON GRAS	S WHEN HER FOOT BECAME C	AUGHT WITH A 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: 16WC08141W



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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 - WOR Claim Number: 16WC08										
16WC08141W	SHAW, MEGAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KINGSWAY REG. HS	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT SLIPPED AND FELL ON LI	QUID FROM A LEAKING GARB	AGE BAG LANDE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3142Y									
16WC08142Y	BACON, GARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH HUNTERDON H S	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WELDING A SOD EDGER IN THE	E GARAGE ON SCHOOL PROPE	ERTY A HOT AMB	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3143B									
16WC08143B	KUCYK, JOHN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REDIRECTING A SPEC ED STUE	DENT THE STUDENT BIT CLMT	'S RT FOREARM 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: 16WC08144T



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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										
16WC08144T	OCONNOR, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION	9/22/2016 9/22/2016	Open	522.00	243.00	0.00	0.00	0.00	0.00	0.00	765.00
BUS DRIVER SLAMMED ON BRA	AKES & HER FACE STRUCK TH	E BACK OF THE	1,978.00	2.00	0.00	0.00	0.00	0.00	0.00	1,980.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			522.00	243.00	0.00	0.00	0.00	0.00	0.00	765.00
			1,978.00	2.00	0.00	0.00	0.00	0.00	0.00	1,980.00
Claim Number: 16WC0	8145B									
16WC08145B	ANGELO-MOI, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. SOUTH	11 9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A STUDENT PUSHED HER CAU	SING HER RT HAND/WRIST TO	STRIKE AGAINS	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8146J									
16WC08146J	COLON, JILL	10	2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
THOMAS B CONLEY ES	9/23/2016 9/23/2016	Open	61.80	1,193.00	0.00	0.00	0.00	0.00	0.00	1,254.80
ASSISTING A CHILD THROUGH	EQUIPMENT, STUDENT HEADI	BUTTED HER IN F	2,438.20	0.00	5,000.00	0.00	0.00	0.00	0.00	7,438.20
Total by Claim Number 1	Claim		2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
			61.80	1,193.00	0.00	0.00	0.00	0.00	0.00	1,254.80
			2,438.20	0.00	5,000.00	0.00	0.00	0.00	0.00	7,438.20

Claim Number: 16WC08147W



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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 - WOR Claim Number: 16WC08										
16WC08147W	SCHNYDERITE, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DELAWARE VALLEY REG HS	9/22/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
AFTER WASHING HIS HANDS SL	LIPPED AND FELL HITTIG HEA	d and l hand oi	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3148B									
16WC08148B	REPASY, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GARFIELD HS	9/20/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DOING PHYSICAL THERAPY WIT	TH STUDENT TRIPPED AND FE	ELL BACKWARDS	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3149Y									
16WC08149Y	FERRAIOLO, TONIANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE MS	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REFILLING WATER BOTTLE, STU	UDENT OPENED A DOOR HITT	ING HER IN 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: 16WC08150F



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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 - WO Claim Number: 16WC0										
16WC08150F	BELLACH, ELIZABETH	10	2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
PERRY L. DREW E.S.	9/21/2016 9/21/2016	Open	131.33	1,193.00	430.82	0.00	0.00	0.00	0.00	1,755.15
KNEELING ON BENCH, STUDE	NTS PICKED UP THE END OF B	ENCH CAUSING F	2,368.67	0.00	4,569.18	0.00	0.00	0.00	0.00	6,937.85
Total by Claim Number	I Claim		2,500.00	1,193.00	5,000.00	0.00	0.00	0.00	0.00	8,693.00
			131.33	1,193.00	430.82	0.00	0.00	0.00	0.00	1,755.15
			2,368.67	0.00	4,569.18	0.00	0.00	0.00	0.00	6,937.85
Claim Number: 16WC0	8151B									
16WC08151B	CALAMANCO, WILLIAM	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RARITAN VALLEY ES	9/22/2016 9/23/2016	Open	2,186.41	243.00	0.00	0.00	0.00	0.00	0.00	2,429.41
LIFTING GARBAGE BAG AND A	CAN INSIDE PIERCE THROUG	H BAG CUTTING F	313.59	2.00	0.00	0.00	0.00	0.00	0.00	315.59
Total by Claim Number	I Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			2,186.41	243.00	0.00	0.00	0.00	0.00	0.00	2,429.41
			313.59	2.00	0.00	0.00	0.00	0.00	0.00	315.59
Claim Number: 16WC0	8152W									
16WC08152W	FOSTER, CAROL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY EARLY CHILDHOOD	CTR 9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKED TO RETRIEVE A CHIL	D FROM MONKEY BARS ENT D	OWN STOOOD B#	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	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: 16WC08153V



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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 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 - WC Claim Number: 16WC	RKERS' COMPENSATION 08153V									
16WC08153V	BANKS, MARY	10	45,000.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	81,193.00
JOSEPH J CATENA E.S.	9/23/2016 9/23/2016 C	pen	1,942.37	1,193.00	2,488.58	0.00	0.00	0.00	0.00	5,623.95
IN GYM DURING PE CLASS, W	ALKING BACKWARDS TRIPPED OVE	R STUDENT	43,057.63	0.00	32,511.42	0.00	0.00	0.00	0.00	75,569.05
Total by Claim Number	1 Claim		45,000.00	1,193.00	35,000.00	0.00	0.00	0.00	0.00	81,193.00
			1,942.37	1,193.00	2,488.58	0.00	0.00	0.00	0.00	5,623.95
			43,057.63	0.00	32,511.42	0.00	0.00	0.00	0.00	75,569.05
Claim Number: 16WC	08154B									
16WC08154B	SANTOS, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEHAUNSEY	9/20/2016 9/23/2016 C	pen	37.70	243.00	0.00	0.00	0.00	0.00	0.00	280.70
PULLING A STACK OF CHAIRS	S IN THE GYM, SHE SUSTAINED INJU	RY TO HER L	2,462.30	2.00	0.00	0.00	0.00	0.00	0.00	2,464.30
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			37.70	243.00	0.00	0.00	0.00	0.00	0.00	280.70
			2,462.30	2.00	0.00	0.00	0.00	0.00	0.00	2,464.30
Claim Number: 16WC	08155W									
16WC08155W	CARUSO, SUZANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUT SWAMP ES	9/23/2016 9/23/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKED UP A STUDENT FROM	I LUNCH & SLIPPED ON PEANUT BU	TTER & INJUI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08156Y



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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 - WOR Claim Number: 16WC08										
16WC08156Y	CUMMINES-HUCK, LORI	14	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
VINELAND SENIOR H.S. SOUTH	11 0/6/2016 9/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CONSTRUCTION TAKING PLACE	IN BLDG, EXPERIENCING DIFF	ICULTY BREAT	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1	Claim		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Claim Number: 16WC08	157B									
16WC08157B	STUMPP, CHARLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL ES	9/13/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE IN CLASSROOM A SPEC	ED STUDENT HEAD-BUTTED CL	_MT IN THE FAC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	158B									
16WC08158B	ALLISON, WILLIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HENRY HUDSON REG HS	9/15/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP A BOX IN THE CUST	ODIAL HALLWAY IT SLIPPED F	ELL ON CLMT'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: 16WC08159W



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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 - WO Claim Number: 16WC0										
16WC08159W	MORGAN, RICHARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AMERIGO A ANASTASIA	9/21/2016 9/26/2016	Open	250.02	243.00	0.00	0.00	0.00	0.00	0.00	493.02
WHILE IN SUPPLY ROOM EMP	TYING BUCKET INTO SINK HAN	DLE OF MOP BUC	2,249.98	2.00	0.00	0.00	0.00	0.00	0.00	2,251.98
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			250.02	243.00	0.00	0.00	0.00	0.00	0.00	493.02
			2,249.98	2.00	0.00	0.00	0.00	0.00	0.00	2,251.98
Claim Number: 16WC0	8160B									
16WC08160B	AHERN, CHRISTINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KENNEDY ES	9/23/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHEN CLMT WAS OUTSIDE W	ITH STUDENTS DURING GYM R	ECESS SPEC ED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8161F									
16WC08161F	FRESOLI, ANN	15	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
VOORHEES H S	9/20/2016 9/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GETTING SUPPLIES WALKING	IN THE GUIDANCE CONFEREN	CE ROOM CLMT 5	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: 16WC08162Y



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September 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										
16WC08162Y	MEI, YING SHEUE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EVERGREEN ES	9/23/2016 9/25/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING A STUDENT'S HAND	DURING FIREDRILL, STUDENT	PULLED AWAY, 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	8163B									
16WC08163B	MOBLEY, GARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING MAIL OUT OF THE MA	AILBOX & A PIECE OF MAIL HIT	HIM IN THE LT EY	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8166B									
16WC08166B	CESARIO, JESSICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORCHARD HILL ES	9/23/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE KICKED HER IN ABDO	MEN 8 WEEKS PF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08167W



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September 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: 16WC08										
16WC08167W	WELLS, DIANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUSTIN SCHOENLY SCHOOL	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENTS WITH SIT	TING FOR PICTURE DAY LEA	NED OVER TO TA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08 ⁴	168W									
16WC08168W	RUSSELL, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHARON ELEMENTARY	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT, STUD	ENT JUMPED UP AS SHE WA	S LEANING OVEI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08 ⁴	169Y									
16WC08169Y	JULIANO, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HCST NORTH HUDSON CENTER	9/16/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLIMBING DOWN LADDER FROM	SERVICING AC UNIT, STEPP	ED DOWN TWIST	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08170B



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September 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										
16WC08170B	HENDERSON, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #1 E.S.	9/26/2016 9/27/2016	Open	160.00	243.00	0.00	0.00	0.00	0.00	0.00	403.00
TURNING OFF COMPUTER ST	JDENT GRABBED HER HAND AI	ND BENT IT BACK	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	8171Y									
16WC08171Y	BAILEY, ALICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BUILDING	9/23/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING OUT OF RESTROOM	SHE SLIPPED & FELL ON A PIE	CE OF PAPER 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	8172Y									
16WC08172Y	KELLY, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EDISON SCHOOL	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	RAL OUTBURST STRUCK HER I	N THE RT EYE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08173F



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September 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 - WORI Claim Number: 16WC08										
16WC08173F	MURPHY, TARA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
RAVINE DRIVE ES	9/7/2016 9/27/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING CHILD, CHILDS HE	EAD RUBBED ON HER CHEST	DEVELOPED A 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: 16WC08	174B									
16WC08174B	SURMICK, JENNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOPE COMMUNITY CHARTER	9/26/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING UP STAIRS SLIPPED S	TRUCK R ELBOW CAUSING II	NJURY	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	175Y									
16WC08175Y	WHITE, STEPHANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRITON HS	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP A FIGHT BETWEE	N STUDENTS SHE WAS PUNC	CHED MULTIPLE 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: 16WC08176Y



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September 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: 16WC08										
16WC08176Y	GARCIA, LAURA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNION HIGH SCHOOL (UNION)	9/26/2016 9/27/2016	10/18/2016	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING IN CHAIR, WHEEL FELL	OFF THE CHAIR LEG AND FE	LL ON HER BACK	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: 16WC08 ⁷	177W									
16WC08177W	BIAGI, JOHANNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	9/26/2016 9/26/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STEPPING INTO THE BUS WHEN	HER RT KNEE TWISTED CAU	JSING INJURY	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08 ⁴	178W									
16WC08178W	PARISI, VICTORIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REG. DAY SCHOOL AT PISCA	TW 9/26/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORA	L FLIPPED THE DESK UP CA	USING DESK 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: 16WC08179B



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10/18/2016 3:05:53PM

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September 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: 10 - WO Claim Number: 16WC0	RKERS' COMPENSATION 08179B									
16WC08179B	HERMAN, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN HIGH SCHOOL	9/19/2016 9/27/2016 O	ben	223.91	243.00	0.00	0.00	0.00	0.00	0.00	466.91
SHE TRIPPED ON WET STEPS	AND FELL INJURED L SHOULDER, H	AND	2,276.09	2.00	0.00	0.00	0.00	0.00	0.00	2,278.09
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			223.91	243.00	0.00	0.00	0.00	0.00	0.00	466.91
			2,276.09	2.00	0.00	0.00	0.00	0.00	0.00	2,278.09
Claim Number: 16WC0)8180B									
16WC08180B	BRANDON, JEROME	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	9/26/2016 9/27/2016 O	ben	25.08	243.00	0.00	0.00	0.00	0.00	0.00	268.08
CLMT WAS PLACING A TAIL G	ATE ON THE BACK OF THE TRUCK T	HAT IS A CA	2,474.92	2.00	0.00	0.00	0.00	0.00	0.00	2,476.92
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			25.08	243.00	0.00	0.00	0.00	0.00	0.00	268.08
			2,474.92	2.00	0.00	0.00	0.00	0.00	0.00	2,476.92
Claim Number: 16WC0)8181B									
16WC08181B	CALANTONE, JULIEANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RYERSON E.S.	9/26/2016 9/26/2016 O	ben	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	RAL CONTINUOUSLY STRUCK & SCF	RATCHED 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: 16WC08182I



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September 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: 16WC08										
16WC08182I	BOHMER, ANGELA	10	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
JAMES MADISON SCHOOL	9/27/2016 9/27/2016	9/30/2016	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
TRIPPED & FELL GOING UP ENT	RANCE STAIRS INJURING HE	R NOSE, FACE, B	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16WC08	183B									
16WC08183B	TEATOR, MICHELE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE JOHN GLENN PRE	SCF 9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE CUTTING PAPER ON A PA	APER CUTTING BOARD, SHE	CUT HER LT INDE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	184F									
16WC08184F	LACHENAUER, STEFANI	E 10	32,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	48,693.00
MONTGOMERY UPPER MS	9/27/2016 9/27/2016	Open	0.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	2,935.00
SITTING AT PICNIC TABLE WHIL	E ON LUNCH DUTY WAS STR	UCK ACCIDENTL)	32,500.00	0.00	13,258.00	0.00	0.00	0.00	0.00	45,758.00
Total by Claim Number 1	Claim		32,500.00	1,193.00	15,000.00	0.00	0.00	0.00	0.00	48,693.00
			0.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	2,935.00
			32,500.00	0.00	13,258.00	0.00	0.00	0.00	0.00	45,758.00

Claim Number: 16WC08185Y



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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										
16WC08185Y	DUDLO, KRISTINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON AVE ES	9/27/2016 9/27/2016	Open	29.95	243.00	0.00	0.00	0.00	0.00	0.00	272.95
TRIED TO PREVENT STUDENT	FROM HURTING HIMSELF WAS	S ELBOWED IN M(2,470.05	2.00	0.00	0.00	0.00	0.00	0.00	2,472.05
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			29.95	243.00	0.00	0.00	0.00	0.00	0.00	272.95
			2,470.05	2.00	0.00	0.00	0.00	0.00	0.00	2,472.05
Claim Number: 16WC0	8187Y									
16WC08187Y	CAPELLA, JOAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DENNIS TWP ES	9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN HALLWAY, FR	RONT PORTION OF RUBBER SC	LE SHOE BECAM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8188Y									
16WC08188Y	BRACCO, TAMMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHILD FAMILY CENTER ES	9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOING UP STAIRCASE WHEN H	HER RT FOOT STRUCK AGAINS	ST STEP CAUSING	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08189Y



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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 - WOR Claim Number: 16WC08										
16WC08189Y	VARANO, BETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODROW WILSON SCHOOL	9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WAS ENGAGING IN AC	GGRESSIVE BEHAVIOR, STUD	ENT HEADBUTTE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	190Y									
16WC08190Y	STEPHENS, MARTHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRENTON CENTRAL HS MAIN CA	AMI 9/23/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTIN WEIGHT BASE OF TENNIS	S RACKS, 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	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	191Y									
16WC08191Y	BENDER-GREVENITZ, LO	RRAINE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RYERSON E.S.	9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE RUNNING AFTER A STUD	ENT SHE ROLLED HER RT AN	IKLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08192W



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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 - WO Claim Number: 16WC0										
16WC08192W	RIESS, HOLLIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAINESPORT ES	9/27/2016 9/27/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HANGING UP POSTERS STEPP	PED AND ROLLED R ANKLE/FOC	т	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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)8194W									
16WC08194W	CHIARIEILO, ROBIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOMS RIVER CENTER	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING THROUGH WAREHC	OUSE SHE STRUCK HER RT HAN	D AGAINST A PIE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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)8195V									
16WC08195V	JONES, AILEEN	10	25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
VETERANS MEMORIAL	9/27/2016 9/28/2016	Open	0.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	2,935.00
WALKING DOWN THE STAIRS	WITH ANOTHER TEACHER LOST	FOOTING AND	25,000.00	0.00	23,258.00	0.00	0.00	0.00	0.00	48,258.00
Total by Claim Number	1 Claim		25,000.00	1,193.00	25,000.00	0.00	0.00	0.00	0.00	51,193.00
			0.00	1,193.00	1,742.00	0.00	0.00	0.00	0.00	2,935.00
			25,000.00	0.00	23,258.00	0.00	0.00	0.00	0.00	48,258.00

Claim Number: 16WC08196W



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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										
16WC08196W	RUCKER, SHIRLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY ES	9/27/2016 9/28/2016	Open	96.96	243.00	0.00	0.00	0.00	0.00	0.00	339.96
STUDENT ATTEMPTING TO ATT	TACK ANOTHER STUDENT AS S	HE WAS BLOCK	2,403.04	2.00	0.00	0.00	0.00	0.00	0.00	2,405.04
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			96.96	243.00	0.00	0.00	0.00	0.00	0.00	339.96
			2,403.04	2.00	0.00	0.00	0.00	0.00	0.00	2,405.04
Claim Number: 16WC0	8197Y									
16WC08197Y	LAMELA, KAREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SUMMERFIELD SCHOOL INCLU	IDIN: 9/27/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE STRUCK HER TWICE IN	I L UPPER 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	8198Y									
16WC08198Y	MONTANEZ, ZULMA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY ACADEMY CHART	ER + 9/20/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN THE HALLWAY	Y SLIPPED AND FELL ON MAYO	NNAISE INJUREI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08199B



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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 - WO Claim Number: 16WC	RKERS' COMPENSATION 08199B									
16WC08199B	TEREBECKI, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ARBOR E.S.	9/27/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RESTRAIN STUDE	INT HAVING BEHAVIORAL ISSUE	STUDENT SCRA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	08201B									
16WC08201B	AVILA, GLADYS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLIN POWELL	9/23/2016 9/23/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BENT OVER TO PLACE BOOK	S ON CABINET, AS SHE RAISED	HER HEAD SHE {	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC	08203W									
16WC08203W	HADDAD, JANICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROSELLE PARK HS	9/23/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BENT DOWN TO RETRIEVE IT	EM FROM PRINTER WHEN HER	L SIDE CHEST ST	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08204W



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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 - WOR Claim Number: 16WC08										
16WC08204W	STEWART, ANGELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PINELANDS HIGH SCHOOL	9/27/2016 9/28/2016	Open	110.69	243.00	0.00	0.00	0.00	0.00	0.00	353.69
STRAINED HER LOWER BACK V	WHILE LIFTING STUDENT		2,389.31	2.00	0.00	0.00	0.00	0.00	0.00	2,391.31
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			110.69	243.00	0.00	0.00	0.00	0.00	0.00	353.69
			2,389.31	2.00	0.00	0.00	0.00	0.00	0.00	2,391.31
Claim Number: 16WC08	8205W									
16WC08205W	OCHIPINTI, STEPHANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WHEN SHE HIT L BIG	TOE ON AN OPEN CABINET D	RAWER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8206B									
16WC08206B	VASTO, BRIDGET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MT. PLEASANT MS	9/27/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO RETRIEVE A TESTIN	NG KIT TO EVALUATE CHILD V	VHEN TOTE BAG	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08207Y



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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 - WOR Claim Number: 16WC082										
16WC08207Y	WILSON, DAVID	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODBRIDGE JUNIOR HIGH SCH	HO 9/27/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING BY DOOR WAS ACCID	ENTLY SLAMMED INTO BY A	STUDENT WEAR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC082	208Y									
16WC08208Y	PATEL, PARAFULA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HIGH SCHOOL (UNION)	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
A STUDENT WAS RUNNING AND	RAN INTO HER SHE FELL IN.	JURED R LEG, SH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC082	209B									
16WC08209B	HEUSSAFF, MORGAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	9/27/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING A CHILD & INJURE	D HER BACK & RT SIDE OF F	RIB CAGE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 (Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08210T



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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 - WORK Claim Number: 16WC082										
16WC08210T	SANDERS, MARC	10	25,000.00	1,193.00	20,110.40	0.00	0.00	0.00	0.00	46,303.40
UNION HIGH SCHOOL (UNION)	9/24/2016 9/28/2016	Open	0.00	1,193.00	1,128.40	0.00	0.00	0.00	0.00	2,321.40
CLEANING STADIUM AFTER GAM	E, WALKING DOWN BLEACHER	S WITH BUCKE	25,000.00	0.00	18,982.00	0.00	0.00	0.00	0.00	43,982.00
Total by Claim Number 1 C	Claim		25,000.00	1,193.00	20,110.40	0.00	0.00	0.00	0.00	46,303.40
			0.00	1,193.00	1,128.40	0.00	0.00	0.00	0.00	2,321.40
			25,000.00	0.00	18,982.00	0.00	0.00	0.00	0.00	43,982.00
Claim Number: 16WC082	211W									
16WC08211W	SMALL, CHANTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	9/28/2016 9/28/2016	Open	56.54	243.00	0.00	0.00	0.00	0.00	0.00	299.54
STUDENT HAVING A BEHAVIORA	L BIT HER IN THE LT BREAST B	REAKING THE	2,443.46	2.00	0.00	0.00	0.00	0.00	0.00	2,445.46
Total by Claim Number 1 0	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			56.54	243.00	0.00	0.00	0.00	0.00	0.00	299.54
			2,443.46	2.00	0.00	0.00	0.00	0.00	0.00	2,445.46
Claim Number: 16WC082	212Y									
16WC08212Y	GREIFF, MADELINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERRY L. DREW E.S.	9/21/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RAN OVER TO ASSIST STUDENT	WHO FELL SHE TRIPPED ON UI	NEVEN PAVME	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: 16WC08213Y



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10/18/2016 3:05:53PM

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September 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: 16WC08										
16WC08213Y	FREESTONE, VALLI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO STOP STUDENT FRO	OM BITING THEIR HANDS, STU	IDENT BIT ON BC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3214Y									
16WC08214Y	MORGAN, IDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARY F JANVIER E.S.	9/26/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING NEAR GYM DOOR S	TUDENT SWUNG DOOR OPEN	HITTING HER R 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: 16WC08	3215B									
16WC08215B	KANEASTER, BRENDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCMANUS MIDDLE SCHOOL	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOING DOWN STEPS SOMEON	E CALLED FOR HER TO HOLD	DOOR TURNED (2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08216V



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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 - WOR Claim Number: 16WC08										
16WC08216V	SCOTT, JESSIE	10	14,500.00	1,195.00	26,500.00	0.00	0.00	0.00	0.00	42,195.00
ESSEX CO. VOCATIONAL	9/28/2016 9/28/2016	Open	643.40	1,193.00	1,689.90	0.00	0.00	0.00	0.00	3,526.30
SHOES WERE SLIPPERY DUE T	O OIL ON GROUND AS SHE B	OARDING BUS SL	13,856.60	2.00	24,810.10	0.00	0.00	0.00	0.00	38,668.70
Total by Claim Number 1	Claim		14,500.00	1,195.00	26,500.00	0.00	0.00	0.00	0.00	42,195.00
			643.40	1,193.00	1,689.90	0.00	0.00	0.00	0.00	3,526.30
			13,856.60	2.00	24,810.10	0.00	0.00	0.00	0.00	38,668.70
Claim Number: 16WC08	3217B									
16WC08217B	SKALSKI, ALEXANDER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KINGSWAY REG. HS	9/26/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING SOCCER DRILL HE HEA	ADBUTTED THE BALL CAUSIN	G INJURY TO 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: 16WC08	3218W									
16WC08218W	WILSON, ARTHRETTA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALMOND ROAD PRE SCHOOL	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING STUDENTS TO PLA	AYGROUND LIFTED GATE HEF	R HAND SLIPPED /	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08219W



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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 - WOR Claim Number: 16WC08										
16WC08219W	MESSICK, JACQUELINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP #4 E.S.	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT GRABBED AN ITEM A	ND STRUCK HER L HAND WIT	H OBJECT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	220G									
16WC08220G	LEWIS, AMANDA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
BUCKSHUTEM ROAD E.S.	9/23/2016 9/28/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
NOTICED PAIN IN R SHOULDER	DUE TO HEAVY LIFTING IN K	ITCHEN	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: 16WC08	3221W									
16WC08221W	GERDING, CHRYSTAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THE SHORE CENTER FOR STUE	DEN 9/28/2016 9/28/2016	Open	18.91	243.00	0.00	0.00	0.00	0.00	0.00	261.91
STUDENT ATTEMPTED TO LOCI	K HIMSELF IN RESTROOM SH	E PLACED HERSE	2,481.09	2.00	0.00	0.00	0.00	0.00	0.00	2,483.09
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			18.91	243.00	0.00	0.00	0.00	0.00	0.00	261.91
			2,481.09	2.00	0.00	0.00	0.00	0.00	0.00	2,483.09

Claim Number: 16WC08222W



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September 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										
16WC08222W	D'ANTONA, NAOMI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTHWOOD ES	9/27/2016 9/28/2016	Open	27.88	243.00	0.00	0.00	0.00	0.00	0.00	270.88
SLIPPED ON FRESHLY MOPPE	D FLOOR LANDING ON L SIDE	OF BUTTOCKS	2,472.12	2.00	0.00	0.00	0.00	0.00	0.00	2,474.12
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			27.88	243.00	0.00	0.00	0.00	0.00	0.00	270.88
			2,472.12	2.00	0.00	0.00	0.00	0.00	0.00	2,474.12
Claim Number: 16WC0	8223B									
16WC08223B	LAWLOR, CAITLYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HERMA S SIMMONS ES	9/28/2016 9/28/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIO	RAL BIT HER RT WRIST CAUSIN	IG THE SKIN TO 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: 16WC0	8224W									
16WC08224W	LEE, ROSEANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY DEMARES	ST HE 9/28/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO LOUNGE FOOT @	GOT STUCK IN CREASE ON TILE	AND FELL INJUF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08225Y



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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 - WOR Claim Number: 16WC082										
16WC08225Y	GRISHAM, CHARLES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN CTY SPEC SVCS BOE	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTENDING TO STUDENT HAVIN	G BEHAVIORAL ISSUE WAS	SCRATCHED 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: 16WC082	27W									
16WC08227W	RAIMONDO, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAWRENCEVILLE ES	9/28/2016 9/29/2016	Open	8.74	243.00	0.00	0.00	0.00	0.00	0.00	251.74
WHILE ON BUS DUTY TRIPPED O	N UNEVEN SIDEWALK AND F	ELL INJURED NC	2,491.26	2.00	0.00	0.00	0.00	0.00	0.00	2,493.26
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			8.74	243.00	0.00	0.00	0.00	0.00	0.00	251.74
			2,491.26	2.00	0.00	0.00	0.00	0.00	0.00	2,493.26
Claim Number: 16WC082	28Y									
16WC08228Y	SCHULTZ, DAWN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN TWP H.S.	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TEACHING PE CLASS DEMONST	RATING DOUBLE DUTCH JUN	IPED AND 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: 16WC08229W



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September 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										
16WC08229W	MARTINEZ, YARITZA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BROAD STREET SCHOOL	9/28/2016 9/29/2016	Open	36.48	243.00	0.00	0.00	0.00	0.00	0.00	279.48
WALKING IN HALLWAY SLIPPE	D AND FELL INJURED L KNEE A	ND R WRIST	2,463.52	2.00	0.00	0.00	0.00	0.00	0.00	2,465.52
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			36.48	243.00	0.00	0.00	0.00	0.00	0.00	279.48
			2,463.52	2.00	0.00	0.00	0.00	0.00	0.00	2,465.52
Claim Number: 16WC0	8230B									
16WC08230B	SHALA, FILLORETA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #4 ES	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUNCTURED HER LT INDEX FI	NGER WITH STPALER WHILE P	UTTING UP POST	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8231B									
16WC08231B	LOPEZ, SAMUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLARA BARTON ES	9/28/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOPPING GYM FLOOR FROM	SIDE TO SIDE FELT SHARP PAII	N IN L SHOULDEF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08232Y



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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 - WOR Claim Number: 16WC08		N								
16WC08232Y	RODRIGUEZ, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DUAL LANGUAGE SCHOOL	9/27/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SIDEWALK TWISTED I	R ANKLE ON ROCK		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	233W									
16WC08233W	BURGIN, LINDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLENWOOD ES	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING A STUDENT & WAS	SPEAKING TO THE AIDE WH	EN THE STUDENT '	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3234W									
16WC08234W	HERNANDEZ, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED ON WET FLOOR AND F	FELL INJURED BOTH HANDS	, L ELBOW, LEG, 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: 16WC08235Y



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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 - WOR Claim Number: 16WC08										
16WC08235Y	BURGOS-BROOKS, ROSA	ALIE 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSIDE HS	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STEPS MISJU	DGED LAST STEP AND FELL IN	JURED R KNEE, 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: 16WC08	3236W									
16WC08236W	MCGOWEN, ROSE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLENWOOD ES	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING NEXT TO STUDENT WH	HEN STUDENT VOMITED INTO	R EYE, R EAR, R	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3237W									
16WC08237W	CHLAN, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CENTRAL E.S.	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	AL BIT ON HER LT FOREARM	CAUSING SKIN T(2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08238W



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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 - WOR Claim Number: 16WC08										
16WC08238W	GROGAN, JILL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARMONY TWP ES	9/27/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN HALLWAY SLI	PPED AND FELL IN WATER INJU	URED 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: 16WC08	3239W									
16WC08239W	HOWARD, CAMILLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RD WOOD ES	9/22/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO ASSIST A STU	DENT WAS KICKED IN 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: 16WC08	3240B									
16WC08240B	STRAZZELLA, SARAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
C RICHARD APPLEGATE E.S.	9/27/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHILD HAVING BEHAVIOR OUT	BURST BIT HER L HAND WAS V	VEARING PROTE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08241Y



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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										
16WC08241Y	BECAN, STACEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON ES	9/28/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUSHED CARTS AND HEAVY P	IECE OF WOOD FELL AND STRU	CK R FOOT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC0	8242Y									
16WC08242Y	ALEKSANDROWICZ, LYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTFIELD SENIOR HS	9/29/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED UP FIRST STEP LAND	DING ON R LOWER SHIN		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8243G									
16WC08243G	HERNANDEZ, MARIA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
TRANSPORTATION DEPT	9/21/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
NOTICED RED MARK ON L LEG	WHEN SHE ARRIVED HOME, PO	SSIBLE INSEC1	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: 16WC08244B



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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 - WOR Claim Number: 16WC08										
16WC08244B	MASON, KIMBERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHNSTONE E.S.	9/29/2016 9/29/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO RESTRAIN A S	STUDENT, STUDENT BIT HER C	N HER RT SHOU	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3245W									
16WC08245W	SAVARD, JANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FRANKLIN SCHOOL	9/19/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED IN WATER AND FELL II	NJURED R ELBOW AND R ANK	LE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3246Y									
16WC08246Y	MOBLEY, GARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTING GYM NET, NET	CAUGHT ON THE DOOR & TH	E DOOR SALEED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08247Y



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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 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: 16WC08										
16WC08247Y	GRIFFIS, COLLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EMILY C. REYNOLDS M.S.	9/30/2016 9/30/2016 0	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INTO BLDG WHEN SH	E SLIPPED AND FELL ON L KNEE		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	248W									
16WC08248W	KUTNER-ERNST, BARBARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN H. WINSLOW E.S.	9/29/2016 9/30/2016 0	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE & BIT HER IN R THIGH, BR	EAKING THE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	249B									
16WC08249B	BELTRAN-RHEIN, SONIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN ACADEMY SCIENCE/TE	CH 9/30/2016 9/30/2016 C	pen	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUSTODIAN REPLACED BOARD	S & A BOARD FELL & STRUCK HE	R RT 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: 16WC08250Y



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10/18/2016 3:05:53PM

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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 - WOR Claim Number: 16WC08		I								
16WC08250Y	KEHOE, CHRISTINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL E.S.	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INTO BLDG SLIPPED	ON SLIPPERY FLOOR INJURE	D R KNEE, R ANK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8251Y									
16WC08251Y	CONNOR, KRISTIANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL E.S.	9/29/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS BITTEN BY STUDENT ON I	_ FOREARM		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	8252B									
16WC08252B	LABARBERA, ANTHONY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHANGING WATER HEATER WI	HEN HE FELT A POP IN R ELB	OW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08253W



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September 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: 16WC082										
16WC08253W	MESSLER, SCOTT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HIGH SCHOOL (UNION)	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING STUDENT BACK AFTER	BREAKING UP FIGHT TRIP	PED FELT PAIN IN	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: 16WC082	54B									
16WC08254B	ARAKAWA-BASS, SONYA	A 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VALLEY PROGRAM	9/27/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ON SCHOOL BUS CLMT SLIPPED	AND FELL ON WET CONCRI	ETE INJ LOWER B.	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 C	laim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC082	255Y									
16WC08255Y	PENA, LACEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VALLEY PROGRAM	9/29/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL I	SSUE BIT HER 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 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: 16WC08256W



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September 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: 16WC08										
16WC08256W	CASTRO, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	9/29/2016 9/30/2016	Open	20.30	243.00	0.00	0.00	0.00	0.00	0.00	263.30
SITTING BEHIND STUDENT WHE	N THE STUDENT STARTED T	O PULL HER HAIF	2,479.70	2.00	0.00	0.00	0.00	0.00	0.00	2,481.70
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			20.30	243.00	0.00	0.00	0.00	0.00	0.00	263.30
			2,479.70	2.00	0.00	0.00	0.00	0.00	0.00	2,481.70
Claim Number: 16WC08	257W									
16WC08257W	WILLISCROFT, JEANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MEMORIAL SCHOOL	9/29/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WAS HOLDING DOOR	OPEN SHE WALKED OUT STU	JDENT LET GO 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: 16WC08	258Y									
16WC08258Y	BENNETT, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHORE REG HS	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WHEN BOTTOM OF SH	IOE CAUGHT ON TILE FLOOR	R HE FELL INJURE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08259B



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September 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: 16WC08										
16WC08259B	ETTORE, JANET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STANDING IN CLASSROOM WH	EN A STUDENT KICKED HER II	N BACK OF R KNE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3261B									
16WC08261B	SCHLOSSER, KELLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHREWBURY E.S.	9/28/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INTO CLASSROOM W	ITH STUDENTS, STUDENT CA	LLED HER NAME	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3262Y									
16WC08262Y	RENNE, GIUSEPPE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GEORGE WASHINGTON M.S.	9/1/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING A BOOK SHELF TOGE	THER WEDGED HIS L RING FI	NGER BETWEEN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08263W



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September 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: 16WC08										
16WC08263W	BASSETT, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE ELEMENTRY	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING STUDENT OUTSIDE	E CLASSROOM STUDENT TRIP	PED AND FELL 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: 16WC08	3264Y									
16WC08264Y	FERIA, CLARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY CTY SPEC SERVICE	S H: 9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO REMOVE A MA	RKER FROM STUDENTS MOU	TH STUDENT BIT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	265Y									
16WC08265Y	ALVARADO, CHRISTINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ISELIN JUNIOR HIGH SCHOOL	9/23/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COLLECTING GARDENING TOO	LS IN COURT YARD, STEPPED	ON RUSTY MET/	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08266W



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September 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: 16WC08										
16WC08266W	NEGLIA, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GLASSBORO H.S.	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER A WIRE CONNE	CTED TO OUTLET AND FELL IN	JURED 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: 16WC08	3267B									
16WC08267B	IUCOLINO, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN WITHERSPOON MS	9/29/2016 9/30/2016	Open	8.64	243.00	0.00	0.00	0.00	0.00	0.00	251.64
SLIPPED ON MOPPED FLOOR A	ND FELL INJURED BOTH WRIS	TS AND HANDS	2,491.36	2.00	0.00	0.00	0.00	0.00	0.00	2,493.36
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			8.64	243.00	0.00	0.00	0.00	0.00	0.00	251.64
			2,491.36	2.00	0.00	0.00	0.00	0.00	0.00	2,493.36
Claim Number: 16WC08	3268Y									
16WC08268Y	BIONDO, STEFANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THEUNIS DEY E.S.	9/28/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING AWAY IPADS SHE SLI	PPED ON A GRAPE AND FELL L	ANDING ON R K	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08269B



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September 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										
16WC08269B	MURPHY, STACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
STILLWATER TWP ES	9/30/2016 10/3/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIDING DESK DRAW OPEN CU	JT R MIDDLE FINGER		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	8270Z									
16WC08270Z	KNOPF, SHANNON	10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JUDD SCHOOL	9/28/2016 10/3/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STOOD UP FROM CHAIR FOOT	CAUGHT ON TABLE LEG FELT	POP IN L KNEE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8272G									
16WC08272G	MATTHEWS, ADAM	10	17,500.00	5,195.00	20,000.00	0.00	0.00	0.00	0.00	42,695.00
NJ REGIONAL DAY-JACKSON	9/27/2016 10/3/2016	Open	22.06	1,193.00	920.06	0.00	0.00	0.00	0.00	2,135.12
STRIPPING FLOORS IN CLASS	ROOM SLIPPED ON WATER FEI	LL INJ LOWER BA	17,477.94	4,002.00	19,079.94	0.00	0.00	0.00	0.00	40,559.88
Total by Claim Number	Claim		17,500.00	5,195.00	20,000.00	0.00	0.00	0.00	0.00	42,695.00
			22.06	1,193.00	920.06	0.00	0.00	0.00	0.00	2,135.12
			17,477.94	4,002.00	19,079.94	0.00	0.00	0.00	0.00	40,559.88

Claim Number: 16WC08273Y



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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 - WO Claim Number: 16WC	RKERS' COMPENSATION 08273Y									
16WC08273Y	VELTRI, DINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MT. PLEASANT MS	9/30/2016 10/3/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN THE HALL WITH A	A HEAVY BACKPACK HEARD SO	MEONE BEHIND 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: 16WC)8282B									
16WC08282B	JOHNSON, MONICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DECATUR AVE	9/23/2016 10/3/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RUSHING STUDENTS AWAY F	ROM SPIDERS IN THE MULCH, S	SHE WAS BIT ON	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC)8284W									
16WC08284W	COSTA, CARISSA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLUMBUS E.S.	9/28/2016 10/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RESTRAINING STUDENT HAVI	NG BEHAVIORAL ISSUE BIT HEF	R ON L CALF 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: 16WC08287W



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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 - WOR Claim Number: 16WC08										
16WC08287W	AYALA, JEANAE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SHARON ELEMENTARY	9/26/2016 10/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET SPOT AND FE	LL ON R LOWER ARM, HAND,	PINKY FINGER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	293B									
16WC08293B	CHELI, CHARLENE	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
JOHNSTONE E.S.	9/22/2016 10/5/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHEEL CHAIR HIT A STONE ON	SIDEWALK THE CHAIR TIPPE	D OVER INJURED	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1	Claim		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Claim Number: 16WC08	294B									
16WC08294B	DIMEO, KIMBERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARY ETHEL COSTELLO	9/30/2016 10/4/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS ITCHING ON R ANKLE/FOO	OT SAW SMALL BROWN BUG H	IAS BITES ONF R	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08297T



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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										
16WC08297T	JOHNSON, LORRAINE	14	25,001.00	0.00	29,592.00	0.00	0.00	0.00	0.00	54,593.00
BAYVILLE ES	9/19/2016 10/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HELPING STUDENT WITH BACK	KPACK TRIPPED AN FELL ONTO	O WOOD CUBICLE	25,001.00	0.00	29,592.00	0.00	0.00	0.00	0.00	54,593.00
Total by Claim Number 1	Claim		25,001.00	0.00	29,592.00	0.00	0.00	0.00	0.00	54,593.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			25,001.00	0.00	29,592.00	0.00	0.00	0.00	0.00	54,593.00
Claim Number: 16WC0	8299B									
16WC08299B	FARRELL, SYDNEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SALEM CAMPUS	9/26/2016 10/5/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT SQUEEZED HER R H	AND DUE TO STRESS		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	8303Y									
16WC08303Y	KELLY, ANNMARIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WOODMERE SCHOOL	9/30/2016 9/30/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT DROPPED TO THE F	LOOR CAUSING HER TO FALL	OVER THE STUDE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08318Y



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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 - WOR Claim Number: 16WC08										
16WC08318Y	WALLIS, LORI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	9/26/2016 10/6/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT ACCIDENTLY STEPPE	ED ON R BIG TOE		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	3321B									
16WC08321B	KHALAILEH, RAID	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINWOOD MIDDLE SCHOOL	9/29/2016 10/6/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS SLIPP	ED AND FELL DUE TO RAIN IN.	JURED R SIDE OF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 16WC08	329W									
16WC08329W	HOLLANDER, JAMES	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
WAREHOUSE/BLDG & GROUND	S 9/2/2016 10/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING CEILING TILES FELT A	CLICK IN R SHOULDER		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number 1	Claim		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00

Claim Number: 16WC08331B



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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 - WO Claim Number: 16WC	RKERS' COMPENSATION 08331B									
16WC08331B	SHUPEL, LORI	14	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
PERRY L. DREW E.S.	9/9/2016 10/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON WAXED FLOOR A	AND FELL INJURED R SIDE BODY,	ABDOMEN, LO\	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number	1 Claim		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Claim Number: 16WC0	08334B									
16WC08334B	THOMSON, PHYLLIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POINT PLEASANT HS	9/30/2016 10/6/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO STOP STUDENT F	ROM HURTING ANOTHER STUDE	NT, STUDENT G	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	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	08342Z									
16WC08342Z	HERZOG, KRISTEN	14	1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	1,500.00
JOHN E. RILEY E.S.	9/20/2016 10/7/2016	Open	267.29	0.00	0.00	0.00	0.00	0.00	0.00	267.29
CARRYING A STORAGE CONT	AINER FILLED WITH SNACKS ON	TO STAGE FELT	1,232.71	0.00	0.00	0.00	0.00	0.00	0.00	1,232.71
Total by Claim Number	1 Claim		1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	1,500.00
-			267.29	0.00	0.00	0.00	0.00	0.00	0.00	267.29
			1,232.71	0.00	0.00	0.00	0.00	0.00	0.00	1,232.71

Claim Number: 16WC08366M



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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 - WOR Claim Number: 16WC08										
16WC08366M	PATTON, CAROLE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ANTHONY ROSSI INTERMEDIAT	ES 9/2/2016 10/10/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TECHNIQUE TRAINING IN GYM	HER PARTNERS BODY LANDE	D ON HER CHES	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: 16WC08	3369B									
16WC08369B	MISIEWICZ, JUDY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PITTSGROVE TWP MS	9/27/2016 10/10/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET FLOOR AND F	FELL INJURED R KNEE, LOWEF	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: 16WC08	3370W									
16WC08370W	KLEIN, KIMBERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RICHARD BUTLER BOE	9/27/2016 10/10/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ENTERING TEACHERS LOUNGE	SLIPPED IN WATER TWSITED	R 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: 16WC08382V



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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 - WO Claim Number: 16WC0	RKERS' COMPENSATION									
16WC08382V	WAGNER, BARBARA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
INDIAN HILL E.S.	9/9/2016 10/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WATER PIPE BROKE AND FLO	ODED OFFICE, BEGAN TO EXPE	ERIENCE SWELLI	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)8388Y									
16WC08388Y	CARNEY, KIM	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
ADMIN BLDG	9/28/2016 10/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED OVER KEYBOARD ST	TAND AND FELL INJURED R LOV	VER LEG	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Total by Claim Number	1 Claim		2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
Claim Number: 16WC0	18392Y									
16WC08392Y	BOSTOCK, THERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PATRICK MCGAHERAN	9/30/2016 10/11/2016	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ROLLING METAL GATES, GATE	E BECAME WEDGED, SHE PULL	ED GATE & IT LAI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

Claim Number: 16WC08400F



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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 - WOI Claim Number: 16WC0									
16WC08400F	CARTOLANO-GOMEZ, EMILIA 14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
CENTRAL ES	9/9/2016 10/12/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TEACHING SHE BEGAN TO EXI	PERIENCE LIGHT HEADEDNESS, NAUSEA, FELT	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	8410W								
16WC08410W	WRIGGINS, ERICA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BUCKSHUTEM ROAD E.S.	9/29/2016 10/12/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS SITTING WITH STUDENT	WHEN ANOTHER STUDENT JUMPED ONTO 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	8427B								
16WC08427B	GILMARTIN, JOYA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INST	ITUT 9/16/2016 10/13/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SAT IN CHAIR AND FELL TO FL	OOR INJURED TAILBONE AND 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: 16WC08471B



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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 - W Claim Number: 16W	ORKERS' COMPENSATION C08471B									
16WC08471B	MASSARO, LYNETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ELWOOD SCHOOL	9/28/2016 9/28/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED & FELL ON WATER	R FROM A/C UNIT INJURING HER RT	KNEE, RT HIP	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
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	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
Total by Major Covera	age 493 Claims		2,115,512.57	184,810.00	1,161,993.18	0.00	0.00	13,000.00	0.00	3,475,315.75
			103,294.28	170,381.00	95,150.01	0.00	0.00	0.00	0.00	368,825.29
			2,012,218.29	14,429.00	1,066,843.17	0.00	0.00	13,000.00	0.00	3,106,490.46
Major Coverage: 20 - G Claim Number: 16G										
16GL00628S	MCLEOD, NICOLE	20	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
LACEY TWP H.S	9/3/2016 9/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SPECTATOR AT F	OOTBALL GAME SLIPPED AND FELL	COMING OUT	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number	er 1 Claim		5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Claim Number: 16G	L00635S									
16GL00635S	KAZAN, CATHY	21	0.00	500.00	10,000.00	0.00	0.00	0.00	0.00	10,500.00
WAYNE TWP BOE	9/2/2016 9/10/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGS TITLE 18A ETHICS	CHARGES		0.00	500.00	10,000.00	0.00	0.00	0.00	0.00	10,500.00



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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: 20 - GENE	RAL LIABILITY								
Total by Claim Number 1 (Claim	0.00	500.00	10,000.00	0.00	0.00	0.00	0.00	10,500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	500.00	10,000.00	0.00	0.00	0.00	0.00	10,500.00
Claim Number: 16GL006	37E								
16GL00637E	SHACKLEFORD, BOSTONIAN DE 20	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
DIONNE WARWICK INSTITUTE	9/7/2016 9/12/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TEACHER USING IMPR	OPER RESTRAINT BOTH FELL	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	10,000.00
Total by Claim Number 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: 16GL006	40E								
16GL00640E	KNEUER, MARY 21	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
PHILIPS ACADEMY CHARTER BO	E 9/12/2016 9/14/2016 10/18/2016	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
ALLEGES CINDERBLOCK WALL F	ELL ON VEHICLE	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	750.00	0.00	0.00	0.00	0.00	750.00
		0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16GL006	46E								
16GL00646E	ABDELWAHAB, ABDELWAHAB 20	7,500.00	500.00	0.00	0.00	0.00	0.00	0.00	8,000.00
MLK JR, #11 ES	9/15/2016 9/16/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TEACHER TAPED HAND	DS TO DESK	7,500.00	500.00	0.00	0.00	0.00	0.00	0.00	8,000.00



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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: 20 - GENE										
Total by Claim Number 1 C	Claim		7,500.00	500.00	0.00	0.00	0.00	0.00	0.00	8,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			7,500.00	500.00	0.00	0.00	0.00	0.00	0.00	8,000.00
Claim Number: 16GL006	51L									
16GL00651L	DAVIS, SHANAYAH	21	0.00	100.00	300.00	0.00	0.00	0.00	0.00	400.00
STILLMAN ES	9/7/2016 9/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WINDSHIELD WAS CRA	CKED DUE TO SOCCER BAL	L	0.00	100.00	300.00	0.00	0.00	0.00	0.00	400.00
Total by Claim Number 1	Claim		0.00	100.00	300.00	0.00	0.00	0.00	0.00	400.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	100.00	300.00	0.00	0.00	0.00	0.00	400.00
Claim Number: 16GL006	52D									
16GL00652D	MAJKET, ANDREW	21	0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
FORDS JUNIOR HIGH SCHOOL	9/7/2016 9/16/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TREE FELL CAUSING D	AMAGE TO FENCE ON NEIGH	HBORING PROPE	0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
Total by Claim Number 1 C	Claim		0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
Claim Number: 16GL006	55S									
16GL00655S	DUGUID, TRINITY	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
PISCATAWAY TWP BOE	9/21/2016 9/22/2016	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES RUNNING IN GYM STUE	DENT TRIPPED & FELL		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00



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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: 20 - GEN	IERAL LIABILITY									
Total by Claim Number	I 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: 16GL0	0656E									
16GL00656E	CLMT, UNKNOWN	20	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
ESSEX FELLS ES	9/20/2016 9/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FALL WHILE HOPPIN	G A FENCE AND BROKE HIS ARM	1	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number	I Claim		5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
Claim Number: 16GL00)657D									
16GL00657D	HENDERSON, BILAL	20	25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
NEPTUNE HIGH SCHOOL	9/7/2016 9/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES ASSAULT BY ANOTH	ER STUDENT ON SCHOOL PREM	ISES	25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
Total by Claim Number	I Claim		25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
Claim Number: 16GL0	0658S									
16GL00658S	KHEMDAT, BHAASKAR	22	0.00	500.00	0.00	0.00	0.00	0.00	1,000.00	1,500.00
WILSON E.S.	9/20/2016 9/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WAS PUSHED IN FOO	OTBALL GYM CLASS BY ANOTHE	R STUDENT HI	0.00	500.00	0.00	0.00	0.00	0.00	1,000.00	1,500.00



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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: 20 - GENER										
Total by Claim Number 1 Cl	aim		0.00	500.00	0.00	0.00	0.00	0.00	1,000.00	1,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	0.00	0.00	0.00	0.00	1,000.00	1,500.00
Claim Number: 16GL0067	0S									
16GL00670S	STARR, JAYDA	20	15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
PASSAIC BOARD OF EDUCATION	9/15/2016 9/26/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FELL INTO A SEWER DIT	СН		15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
Total by Claim Number 1 Cl	aim		15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
Claim Number: 16GL0067	1S									
16GL00671S	KOTUSKY, WILLIAM	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
BERKELEY ES	9/22/2016 9/27/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FELL ON BASKETBALL C	OURT DURING RECESS		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1 Cl	aim		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: 16GL0067	5S									
16GL00675S	GARCIA, CHRISTINA	20	1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
ELIZABETH BOARD OF EDUCATIO	N 9/13/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REQUEST THE RELEASE OF STUD	ENTS FILE		1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00



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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: 20 - GEN										
Total by Claim Number	1 Claim		1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
Claim Number: 16GL0	0677E									
16GL00677E	TILLMAN, JOSEPH	22	0.00	1,500.00	0.00	0.00	0.00	0.00	5,000.00	6,500.00
GIBBSBORO E.S.	9/27/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CHILD FELL FROM M	IONKEY BARS		0.00	1,500.00	0.00	0.00	0.00	0.00	5,000.00	6,500.00
Total by Claim Number	1 Claim		0.00	1,500.00	0.00	0.00	0.00	0.00	5,000.00	6,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,500.00	0.00	0.00	0.00	0.00	5,000.00	6,500.00
Claim Number: 16GL0	0679D									
16GL00679D	ACACIA-BORDERS, SOFIA	22	0.00	0.00	0.00	0.00	0.00	0.00	1,500.00	1,500.00
MARTIN LUTHER KING E.S.	9/29/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CHILD SLIPPED IN W	ATER NEAR DRINGKING FOUNTA	IN & FELL	0.00	0.00	0.00	0.00	0.00	0.00	1,500.00	1,500.00
Total by Claim Number	1 Claim		0.00	0.00	0.00	0.00	0.00	0.00	1,500.00	1,500.00
			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	0.00	1,500.00	1,500.00
Claim Number: 16GL0	0686D									
16GL00686D	STUDENTS, VARIOUS	20	1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
LINCOLN HS	9/27/2016 10/3/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES VARIOUS STUDENTS	S INVOLVED IN ALTERCATION		1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00



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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: 20 - GEN	ERAL LIABILITY									
Total by Claim Number 1	Claim		1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	500.00	0.00	0.00	0.00	0.00	0.00	501.00
Claim Number: 16GL00	691E									
16GL00691E	COLEMAN, ZY'NAY	20	10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
PS #22	9/30/2016 10/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES TEACHER BERATED	STUDENT		10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
Total by Claim Number 1	Claim		10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
Claim Number: 16GL00	710S									
16GL00710S	WYNTER, LATAMIER	20	15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
UNIVERSITY HEIGHTS CHARTE	R SI 9/21/2016 10/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STUDENT HAD TO HA	VE SURGERY; UNKNOWN CIR	CUMSTANCES	15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
Total by Claim Number 1	Claim		15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			15,000.00	500.00	0.00	0.00	0.00	0.00	0.00	15,500.00
Claim Number: 16GL00	730E									
16GL00730E	SCOCOZZA, WILLIAM	20	10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
NORTH WARREN REG HS	9/15/2016 10/17/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SEXUAL ASSAULT			10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00



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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: 20 - GEN	IERAL LIABILITY									
Total by Claim Number	Claim		10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	10,500.00
Claim Number: 16GL0	0760E									
16GL00760E	DUARTE, LUIS	22	0.00	250.00	0.00	0.00	0.00	0.00	5,000.00	5,250.00
THOMAS JEFFERSON M.S.	9/19/2016 10/10/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FELT SHORT OF BRE	EATH AFTER PLAYING SOCCER V	VENT TO SIT DO	0.00	250.00	0.00	0.00	0.00	0.00	5,000.00	5,250.00
Total by Claim Number	Claim		0.00	250.00	0.00	0.00	0.00	0.00	5,000.00	5,250.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	0.00	0.00	0.00	0.00	5,000.00	5,250.00
Total by Major Coverage	21 Claims		102,502.00	8,350.00	16,050.00	0.00	0.00	0.00	22,500.00	149,402.00
			0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
			102,502.00	8,350.00	15,300.00	0.00	0.00	0.00	22,500.00	148,652.00
Major Coverage: 30 - AUT Claim Number: 16AL00										
16AL00423L	ZAMORA, JESUS	31	0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
LODI BOE	9/9/2016 9/12/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV BACKING UP STRUCK OV			0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
Total by Claim Number	Claim		0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00

Claim Number: 16AL00424L



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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: 30 - AUTO Claim Number: 16AL004										
16AL00424L	HERTZ	31	0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
WAYNE TWP BOE	9/6/2016 9/12/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE			0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
Total by Claim Number 1	Claim		0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	2,000.00	0.00	0.00	0.00	0.00	2,250.00
Claim Number: 16AL004	426L/01									
16AL00426L/01	RIZZITELLO, EVAN	31	0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
BRICK TWP. BOARD OF EDUCAT	FIOI 9/6/2016 9/14/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV MAKING R TURN HITTING OV	PARKED IMPROPERLY		0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
Total by Claim Number 1	Claim		0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
Claim Number: 16AL004	428E/01									
16AL00428E/01	CLMT, UNKNOWN	31	0.00	0.00	3,500.00	0.00	0.00	0.00	0.00	3,500.00
WEST DEPTFORD TWP BOE	9/12/2016 9/14/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV REARENDED OV			0.00	0.00	3,500.00	0.00	0.00	0.00	0.00	3,500.00
Total by Claim Number 1	Claim		0.00	0.00	3,500.00	0.00	0.00	0.00	0.00	3,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	3,500.00	0.00	0.00	0.00	0.00	3,500.00

Claim Number: 16AL00429L



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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: 30 - AUTO Claim Number: 16AL004										
16AL00429L	DEVEREUX, DEBRA	31	0.00	251.30	994.51	0.00	0.00	0.00	0.00	1,245.81
BRICK TWP. BOARD OF EDUCAT	OI 9/6/2016 9/15/2016	9/27/2016	0.00	251.30	994.51	0.00	0.00	0.00	0.00	1,245.81
IV STRUCK PARKED VEHICLE			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 (Claim		0.00	251.30	994.51	0.00	0.00	0.00	0.00	1,245.81
			0.00	251.30	994.51	0.00	0.00	0.00	0.00	1,245.81
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL004	32L									
16AL00432L	PUMARADA, JASON	31	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
HUNTERDON COUNTY ED. SERV	IC 9/20/2016 9/20/2016	10/ 6/2016	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
IV REAR ENDED OV AT STOP LIG	HT		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	750.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL004	33L/01									
16AL00433L/01	NORTH PLAINFIELD BOE	31	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
BRANCHBURG BOARD OF EDUC	AT 9/17/2016 10/5/2016	10/11/2016	0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
IV COLLIDED WITH CHAIN LINK F	ENCE		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	750.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	750.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 16AL00435L



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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: 30 - AUTC Claim Number: 16AL004										
16AL00435L	PRICE, KANESHIA	31	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	1,000.00
SANDHILL CAMPUS	9/12/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK 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: 16AL004	136S									
16AL00436S	PRINCETON CHURCH OF C	HRIS 31	0.00	1,000.00	30,000.00	0.00	0.00	0.00	0.00	31,000.00
PRINCETON BOE	9/20/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV MAKING TURN AROUND CHUI	RCH PARKING LOT HIT UNDER H	HANG	0.00	1,000.00	30,000.00	0.00	0.00	0.00	0.00	31,000.00
Total by Claim Number 1	Claim		0.00	1,000.00	30,000.00	0.00	0.00	0.00	0.00	31,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,000.00	30,000.00	0.00	0.00	0.00	0.00	31,000.00
Claim Number: 16AL004	138L									
16AL00438L	VICUNA-MENOSCAL, PAOLA	A 31	0.00	198.00	1,396.67	0.00	0.00	0.00	0.00	1,594.67
HUDSON CNTY VO-TECH	9/20/2016 9/22/2016	10/18/2016	0.00	198.00	1,396.67	0.00	0.00	0.00	0.00	1,594.67
IV STRUCK PARKED VEHICLE			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		0.00	198.00	1,396.67	0.00	0.00	0.00	0.00	1,594.67
			0.00	198.00	1,396.67	0.00	0.00	0.00	0.00	1,594.67
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Claim Number: 16AL00444L



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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: 30 - AUT Claim Number: 16AL00										
16AL00444L	CHOTO, ALEXANDER	31	0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
HARRISON BOE	9/12/2016 9/23/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV BACKING OUT OF DRIVEWAY	Y STRUCK OV		0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Total by Claim Number 1	Claim		0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Claim Number: 16AL00	9449L									
16AL00449L	CLMT, UNKNOWN	31	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
MANCHESTER TWP BOARD OF	EDI 9/27/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK A COLUMN CAUSIN	IG DAMAGE		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: 16AL00	9450L									
16AL00450L	HANSON, CAROLYN	31	0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
ELIZABETH BOARD OF EDUCAT	TION 9/12/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV IN REAR			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Total by Claim Number 1	Claim		0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00

Claim Number: 16AL00453L



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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 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: 16AL0045										
16AL00453L	GIAMBRA, RACHAEL	31	0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
PISCATAWAY TWP BOE	9/13/2016 9/30/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV IN REAR			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Total by Claim Number 1 C	laim		0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
·			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Claim Number: 16AL0045	57L									
16AL00457L	SCRIVANICH, GUIDO	31	0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
MATAWAN-ABERDEEN REG	9/8/2016 10/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV AND OV COLLIDED			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Total by Claim Number 1 C	laim		0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	500.00	0.00	0.00	0.00	0.00	750.00
Claim Number: 16AL0046	58L									
16AL00468L	SANCHEZ, CHARLES	31	0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
JERSEY CITY PUBLIC SCHOOLS	9/6/2016 10/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV			0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 C	laim		0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00

Claim Number: 16AL00469L



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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: 30 - AUT Claim Number: 16AL00									
16AL00469L	DREIBACH, LESLIE 31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
WAYNE TWP BOE	9/23/2016 10/11/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK OV MIRROR WHILE	PASSING	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number	1 Claim	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Major Coverage	17 Claims	0.00	2,949.30	56,392.18	0.00	0.00	0.00	0.00	59,341.48
		0.00	449.30	3,891.18	0.00	0.00	0.00	0.00	4,340.48
		0.00	2,500.00	52,501.00	0.00	0.00	0.00	0.00	55,001.00
Major Coverage: 40 - AUT Claim Number: 16AL0									
16AL00418L	HUNTERDON CENTRAL/FLEMIN(40	0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
HUNTERDON CENTRAL HS & F	ELEM 9/6/2016 9/6/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV HIT IV IN REAR		0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
Total by Claim Number	1 Claim	0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
Claim Number: 16AL0	0420L								
16AL00420L	BELLEVILLE BOE 40	881.39	267.80	0.00	0.00	0.00	0.00	0.00	1,149.19
BELLEVILLE BOARD OF EDUC	ATIOI 9/3/2016 9/6/2016 10/11/2016	881.39	267.80	0.00	0.00	0.00	0.00	0.00	1,149.19
THEFT OF DISTRICT VEHICLE	& CONTENTS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



-178-The reports provided by NJSIG do not include all Errors and Omissions claims. You must combine the reports provided by NJSIG with the reports provided by Summit Risk Services to complete the actual Errors and Omissions claim counts, Paid amounts, reserved amounts and total incurred amounts with respect to the Errors and Omissions line of coverage. Any questions or concerns regarding the reports provided by Summit Risk Services should be addressed directly to Alice Ivers at 10/18/2016 3:05:53PM



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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: 40 - AUTC										
Total by Claim Number 1	Claim		881.39	267.80	0.00	0.00	0.00	0.00	0.00	1,149.19
			881.39	267.80	0.00	0.00	0.00	0.00	0.00	1,149.19
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL004	421L									
16AL00421L	HUDSON CTY VOC BOE	40	0.00	250.00	5,000.00	0.00	0.00	0.00	0.00	5,250.00
HUDSON CNTY VO-TECH	9/9/2016 9/12/2016	Open	0.00	199.00	1,284.10	0.00	0.00	0.00	0.00	1,483.10
OV STRUCK IV			0.00	51.00	3,715.90	0.00	0.00	0.00	0.00	3,766.90
Total by Claim Number 1	Claim		0.00	250.00	5,000.00	0.00	0.00	0.00	0.00	5,250.00
			0.00	199.00	1,284.10	0.00	0.00	0.00	0.00	1,483.10
			0.00	51.00	3,715.90	0.00	0.00	0.00	0.00	3,766.90
Claim Number: 16AL004	426L									
16AL00426L	BRICK TWP BOE	40	0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
BRICK TWP. BOARD OF EDUCAT	FIOI 9/6/2016 9/14/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV MAKING R TURN HITTING OV	PARKED IMPROPERLY		0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
Total by Claim Number 1	Claim		0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
Claim Number: 16AL004	428E									
16AL00428E	WEST DEPTFORD BOE	40	0.00	99.00	1,373.60	0.00	0.00	0.00	0.00	1,472.60
WEST DEPTFORD TWP BOE	9/12/2016 9/14/2016	10/11/2016	0.00	99.00	1,373.60	0.00	0.00	0.00	0.00	1,472.60
IV REARENDED OV			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



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September 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 - AUT										
Total by Claim Number 1	1 Claim		0.00	99.00	1,373.60	0.00	0.00	0.00	0.00	1,472.60
			0.00	99.00	1,373.60	0.00	0.00	0.00	0.00	1,472.60
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16AL00	0434L									
16AL00434L	CLIFFSIDE PARK BOE	40	0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
CLIFFSIDE PARK BOARD OF EI	DUC: 9/20/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV INVOLVED IN MVA			0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
Total by Claim Number 1	1 Claim		0.00	500.00	2,500.00	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	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
Claim Number: 16AL00	0436S/01									
16AL00436S/01	PRINCETON PUBLIC BOE	40	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
PRINCETON BOE	9/20/2016 9/21/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV MAKING TURN AROUND CHI	URCH PARKING LOT HIT UNDEF	R HANG	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1	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: 16AL00	0437L									
16AL00437L	SHORE REG HS BOE	40	0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
SHORE REGIONAL BOARD OF	EDU 9/22/2016 9/22/2016	Open	0.00	285.00	4,387.15	0.00	0.00	0.00	0.00	4,672.15
IV WAS PARKED OV STRUCK F	REAR OF IV		0.00	215.00	3,112.85	0.00	0.00	0.00	0.00	3,327.85



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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: 40 - AUTO									
Total by Claim Number 1 C	Claim	0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
		0.00	285.00	4,387.15	0.00	0.00	0.00	0.00	4,672.15
		0.00	215.00	3,112.85	0.00	0.00	0.00	0.00	3,327.85
Claim Number: 16AL004	40L								
16AL00440L	HOPEWELL VALLEY REG BOE 40	0.00	500.00	3,500.00	0.00	0.00	0.00	0.00	4,000.00
HOPEWELL VALLEY REG BOE	9/22/2016 9/22/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV IN REAR		0.00	500.00	3,500.00	0.00	0.00	0.00	0.00	4,000.00
Total by Claim Number 1 C	Claim	0.00	500.00	3,500.00	0.00	0.00	0.00	0.00	4,000.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	500.00	3,500.00	0.00	0.00	0.00	0.00	4,000.00
Claim Number: 16AL004	45D								
16AL00445D	WAYNE TWP BOE 40	0.00	250.00	15,000.00	0.00	0.00	0.00	0.00	15,250.00
WAYNE TWP BOE	9/22/2016 9/26/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES OV RAN STOP SIGN ST	RIKING IV	0.00	250.00	15,000.00	0.00	0.00	0.00	0.00	15,250.00
Total by Claim Number 1 C	Claim	0.00	250.00	15,000.00	0.00	0.00	0.00	0.00	15,250.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	250.00	15,000.00	0.00	0.00	0.00	0.00	15,250.00
Claim Number: 16AL004	48L								
16AL00448L	PISCATAWAY BOE 40	0.00	250.00	6,500.00	0.00	0.00	0.00	0.00	6,750.00
PISCATAWAY TWP BOE	9/26/2016 9/27/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV		0.00	250.00	6,500.00	0.00	0.00	0.00	0.00	6,750.00



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September 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 - AUTO	PHYSICAL DAMAGE									
Total by Claim Number 1 C	laim		0.00	250.00	6,500.00	0.00	0.00	0.00	0.00	6,750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	6,500.00	0.00	0.00	0.00	0.00	6,750.00
Claim Number: 16AL0044	I9L/01									
16AL00449L/01	MANCHESTER TWP BOE	40	0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
MANCHESTER TWP BOARD OF EI	DL 9/27/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK A COLUMN CAUSING	DAMAGE		0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
Total by Claim Number 1 C	laim		0.00	500.00	2,500.00	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	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
Claim Number: 16AL004	51L									
16AL00451L	HOPEWELL VALLEY REG	BOE 40	0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
HOPEWELL VALLEY REG BOE	9/29/2016 9/29/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV RAN RED LIGHT STRIKING IV I	N INTERSECTION		0.00	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
Total by Claim Number 1 C	laim		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: 16AL0045	55L									
16AL00455L	BRICK TWP BOE	40	0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
BRICK TWP. BOARD OF EDUCATION	OI 9/26/2016 10/3/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK IV			0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00



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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: 40 - AUTO	PHYSICAL DAMAGE									
Total by Claim Number 1 C	laim		0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	250.00	2,500.00	0.00	0.00	0.00	0.00	2,750.00
Claim Number: 16AL004	56L									
16AL00456L	WINSLOW TWP BOE	40	0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
WINSLOW TWP BOE (CAMDEN)	9/29/2016 10/3/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK BY OV THAT RAN THE	LIGHT		0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
Total by Claim Number 1 C	laim		0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	7,500.00	0.00	0.00	0.00	0.00	8,000.00
Claim Number: 16AL004	58L									
16AL00458L	MATAWAN ABERDEEN R	EG BOE 40	1.00	250.00	0.00	0.00	0.00	0.00	0.00	251.00
MATAWAN-ABERDEEN REG	9/21/2016 10/4/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT WINDOW AND BROKE	WINDOW		1.00	250.00	0.00	0.00	0.00	0.00	0.00	251.00
Total by Claim Number 1 C	laim		1.00	250.00	0.00	0.00	0.00	0.00	0.00	251.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	250.00	0.00	0.00	0.00	0.00	0.00	251.00
Claim Number: 16AL004	70L									
16AL00470L	PLAINFIELD BOE	40	0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
PLAINFIELD BOARD OF EDUCATION	OI 9/23/2016 10/11/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BUS HIT CAR DOOR OF PASSENC	GER GETTING OUT		0.00	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00



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September 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 - AUTO	PHYSICAL DAMAGE									
Total by Claim Number 1 C	Claim		0.00	500.00	2,500.00	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	500.00	2,500.00	0.00	0.00	0.00	0.00	3,000.00
Total by Major Coverage 1	7 Claims		882.39	5,366.80	73,873.60	0.00	0.00	0.00	0.00	80,122.79
			881.39	850.80	7,044.85	0.00	0.00	0.00	0.00	8,777.04
			1.00	4,516.00	66,828.75	0.00	0.00	0.00	0.00	71,345.75
Major Coverage: 70 - PROP Claim Number: 16PR002										
16PR00250E	NORTHERN VALLEY REG	BOE 70	5,000.00	0.00	25,000.00	0.00	0.00	0.00	473.52	30,473.52
NORTHERN VALLEY REG BOE	9/1/2016 9/2/2016	9/22/2016	5,000.00	0.00	25,000.00	0.00	0.00	0.00	473.52	30,473.52
ALLEGES MOLD IN WING F			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	Claim		5,000.00	0.00	25,000.00	0.00	0.00	0.00	473.52	30,473.52
			5,000.00	0.00	25,000.00	0.00	0.00	0.00	473.52	30,473.52
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16PR002	51D									
16PR00251D	SOUTH BRUNSWICK BOE	E 70	0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
SOUTH BRUNSWICK H S	9/1/2016 9/2/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES MOLD FOUND			0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
Total by Claim Number 1 C	Claim		0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	5,000.00	0.00	0.00	0.00	0.00	5,500.00

Claim Number: 16PR00252D



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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: 70 - PROP Claim Number: 16PR002										
16PR00252D	NORTHERN VALLEY REC	G BOE 70	0.00	750.00	10,000.00	0.00	0.00	0.00	0.00	10,750.00
NORTHERN VALLEY OLD TAPPA	NF 9/1/2016 9/1/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES MOLD FOUND IN WING	F F		0.00	750.00	10,000.00	0.00	0.00	0.00	0.00	10,750.00
Total by Claim Number 1	Claim		0.00	750.00	10,000.00	0.00	0.00	0.00	0.00	10,750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	750.00	10,000.00	0.00	0.00	0.00	0.00	10,750.00
Claim Number: 16PR002	254L									
16PR00254L	TRENTON BOE	70	0.00	500.00	1,000.00	0.00	0.00	0.00	0.00	1,500.00
HEDGEPETH-WILLIAMS MIDDLE	SC 9/1/2016 9/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES ASBESTOS CONCERN	S		0.00	500.00	1,000.00	0.00	0.00	0.00	0.00	1,500.00
Total by Claim Number 1	Claim		0.00	500.00	1,000.00	0.00	0.00	0.00	0.00	1,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	1,000.00	0.00	0.00	0.00	0.00	1,500.00
Claim Number: 16PR002	255L									
16PR00255L	BELLEVILLE BOE	70	0.00	5,000.00	70,000.00	0.00	0.00	0.00	0.00	75,000.00
BELLEVILLE BOARD OF EDUCAT	IOI 9/3/2016 9/6/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES DISTRICT VEHICLE & C	CONTENTS STOLEN		0.00	5,000.00	70,000.00	0.00	0.00	0.00	0.00	75,000.00
Total by Claim Number 1	Claim		0.00	5,000.00	70,000.00	0.00	0.00	0.00	0.00	75,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	5,000.00	70,000.00	0.00	0.00	0.00	0.00	75,000.00

Claim Number: 16PR00256L



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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: 70 - PRO Claim Number: 16PR00										
16PR00256L	PORT REPUBLIC BOE	70	0.00	0.00	0.00	0.00	0.00	0.00	1,069.98	1,069.98
PORT REPUBLIC E.S.	9/6/2016 9/9/2016	10/12/2016	0.00	0.00	0.00	0.00	0.00	0.00	1,069.98	1,069.98
ALLEGES PROBLEM WITH FLUS	SHING OF TOILETS, ROOF VEN	ITS STUFFED WI1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Total by Claim Number 1 Claim			0.00	0.00	0.00	0.00	0.00	1,069.98	1,069.98
			0.00	0.00	0.00	0.00	0.00	0.00	1,069.98	1,069.98
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16PR00)257E									
16PR00257E	MIDDLESEX BORO BOE	70	5,000.00	0.00	2,125.83	0.00	0.00	0.00	0.00	7,125.83
MIDDLESEX HS	9/9/2016 9/9/2016	9/27/2016	5,000.00	0.00	2,125.83	0.00	0.00	0.00	0.00	7,125.83
ALLEGES PIPE BURST CAUSING	G WATER DAMAGE		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	2,125.83	0.00	0.00	0.00	0.00	7,125.83
			5,000.00	0.00	2,125.83	0.00	0.00	0.00	0.00	7,125.83
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 16PR00)258S									
16PR00258S	EAST HANOVER BOE	70	0.00	1,500.00	15,000.00	0.00	0.00	0.00	1,500.00	18,000.00
EAST HANOVER M S	9/2/2016 9/9/2016	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES MOLD FOUND			0.00	1,500.00	15,000.00	0.00	0.00	0.00	1,500.00	18,000.00
Total by Claim Number 1	Claim		0.00	1,500.00	15,000.00	0.00	0.00	0.00	1,500.00	18,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,500.00	15,000.00	0.00	0.00	0.00	1,500.00	18,000.00

Claim Number: 16PR00260E



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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: 70 - PROI Claim Number: 16PR00										
16PR00260E	PLAINFIELD BOE	70	0.00	500.00	15,000.00	0.00	0.00	0.00	1,100.00	16,600.00
PLAINFIELD HS	9/6/2016 9/14/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FAN CAUGHT FIRE CA	USING SMOKE DAMAGE		0.00	500.00	15,000.00	0.00	0.00	0.00	1,100.00	16,600.00
Total by Claim Number 1	Claim		0.00	500.00	15,000.00	0.00	0.00	0.00	1,100.00	16,600.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	500.00	15,000.00	0.00	0.00	0.00	1,100.00	16,600.00
Claim Number: 16PR00	262D									
16PR00262D	SOUTH ORANGE/MAPLE	EWOOD E 70	0.00	0.00	100,000.00	0.00	0.00	0.00	1,500.00	101,500.00
SOUTH ORANGE/MAPLEWOOD	BRI 9/17/2016 9/19/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CEILING COLLAPSE			0.00	0.00	100,000.00	0.00	0.00	0.00	1,500.00	101,500.00
Total by Claim Number 1	Claim		0.00	0.00	100,000.00	0.00	0.00	0.00	1,500.00	101,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	100,000.00	0.00	0.00	0.00	1,500.00	101,500.00
Claim Number: 16PR00	263S									
16PR00263S	SALEM CITY BOE	70	0.00	1,000.00	15,000.00	0.00	0.00	0.00	0.00	16,000.00
SALEM M S	9/19/2016 9/20/2016	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES CEILING FELL DOWN	CAUSE UNKNOWN		0.00	1,000.00	15,000.00	0.00	0.00	0.00	0.00	16,000.00
Total by Claim Number 1	Claim		0.00	1,000.00	15,000.00	0.00	0.00	0.00	0.00	16,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,000.00	15,000.00	0.00	0.00	0.00	0.00	16,000.00

Claim Number: 16PR00264D



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Claim Number Claimant Name Cov Incurred Incurred	Incurred Paid Out Rsv	Incurred Paid Out Rsv
Description of Loss Out Rsv Out Rsv Out Rsv Out Rsv Out Rsv	Out Rsv	
		Out Rsv
Major Coverage: 70 - PROPERTY	1 200 00	
Claim Number: 16PR00264D	1 200 00	
16PR00264D GLOUCESTER CTY VOC BOE 71 0.00 1,000.00 20,000.00 0.00 0.00 0.00	1,200.00	22,200.00
GLOUCESTER CO. TECH & VOC HS 9/12/2016 9/21/2016 Open 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	0.00	0.00
ALLEGES POWER OUTAGE CAUSED ALOT OF DAMAGE INCLUDING DAMAGE \ 0.00 1,000.00 20,000.00 0.00 0.00 0.00 0.00	1,200.00	22,200.00
Total by Claim Number 1 Claim 0.00 1,000.00 20,000.00 0.00 0.00 0.00 0.00	1,200.00	22,200.00
0.00 0.00 0.00 0.00 0.00 0.00	0.00	0.00
0.00 1,000.00 20,000.00 0.00 0.00 0.00	1,200.00	22,200.00
Claim Number: 16PR00265E		
16PR00265E TEAM ACADEMY CHARTER BOE 70 0.00 1,500.00 15,000.00 0.00 0.00 0.00	0.00	16,500.00
TEAM ACADEMY CHARTER BOE 9/19/2016 9/22/2016 Open 0.00	0.00	0.00
ALLEGES SEVERAL FENCE BARS BROKEN, 3 WINDOWS BROKEN APPEARS R(0.00 1,500.00 15,000.00 0.00 0.00 0.00	0.00	16,500.00
Total by Claim Number 1 Claim 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00	16,500.00
0.00 0.00 0.00 0.00 0.00 0.00	0.00	0.00
0.00 1,500.00 15,000.00 0.00 0.00 0.00	0.00	16,500.00
Claim Number: 16PR00267L		
16PR00267L LITTLE FALLS TWP BOE 70 0.00 250.00 2,500.00 0.00 0.00 0.00	0.00	2,750.00
LITTLE FALLS TWP BOE 9/20/2016 9/26/2016 Open 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00	0.00
ALLEGES UNKNOWN CLMTS BACKED UP INTO INSURED'S FENCE 0.00 250.00 2,500.00 0.00 0.00 0.00	0.00	2,750.00
Total by Claim Number 1 Claim 0.00 250.00 2,500.00 0.00 0.00 0.00	0.00	2,750.00
0.00 0.00 0.00 0.00 0.00 0.00	0.00	0.00
0.00 250.00 2,500.00 0.00 0.00 0.00	0.00	2,750.00

Claim Number: 16PR00268D



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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: 70 - PROPERTY Claim Number: 16PR00268D								
16PR00268D MONMOUTH CTY VOC BOE 70	0.00	1,500.00	10,000.00	0.00	0.00	0.00	0.00	11,500.00
MONMOUTH COUNTY VOCATIONAL 9/24/2016 9/28/2016 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES POWER OUTAGE DUE TO A VEHICLE STRUCK TELEPHONE POLE AE	0.00	1,500.00	10,000.00	0.00	0.00	0.00	0.00	11,500.00
Total by Claim Number 1 Claim	0.00	1,500.00	10,000.00	0.00	0.00	0.00	0.00	11,500.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	1,500.00	10,000.00	0.00	0.00	0.00	0.00	11,500.00
Total by Major Coverage 15 Claims	10,000.00	14,000.00	305,625.83	0.00	0.00	0.00	6,843.50	336,469.33
	10,000.00	0.00	27,125.83	0.00	0.00	0.00	1,543.50	38,669.33
	0.00	14,000.00	278,500.00	0.00	0.00	0.00	5,300.00	297,800.00
Grand Totals: 563 Claims	2,228,896.96	215,476.10	1,613,934.79	0.00	0.00	13,000.00	29,343.50	4,100,651.35
	114,175.67	171,681.10	133,961.87	0.00	0.00	0.00	1,543.50	421,362.14
	2,114,721.29	43,795.00	1,479,972.92	0.00	0.00	13,000.00	27,800.00	3,679,289.21



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