

February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01										
17WC01416W	MAHONEY, GERALDINE	11	121.14	243.00	0.00	0.00	0.00	0.00	0.00	364.14
MIDDLETOWN-NORTH HS	2/1/2017 2/1/2017	3/ 9/2017	121.14	243.00	0.00	0.00	0.00	0.00	0.00	364.14
AN ACOUSTIC GUITAR FELL FR	OM CABINET AND STRUCK HE	R HEAD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		121.14	243.00	0.00	0.00	0.00	0.00	0.00	364.14
			121.14	243.00	0.00	0.00	0.00	0.00	0.00	364.14
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC01	I421B									
17WC01421B	COLODNER, ANN	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
VON E MAUGER MS	2/1/2017 2/1/2017	3/ 2/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIED TO SIT DOWN AT TABLE	MISSED THE CHAIR AND FELL	INJURED BUTTC	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: 17WC01	I424K									
17WC01424K	ALBRIGHT, ANGELINE	11	328.22	243.00	0.00	0.00	0.00	0.00	0.00	571.22
BANKBRIDGE REG DEVELOPME	ENT. 2/1/2017 2/1/2017	2/28/2017	328.22	243.00	0.00	0.00	0.00	0.00	0.00	571.22
STUDENT HAVING BEHAVIORAL	LISSUE BIT R LOWER ARM		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		328.22	243.00	0.00	0.00	0.00	0.00	0.00	571.22
			328.22	243.00	0.00	0.00	0.00	0.00	0.00	571.22
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

#### Claim Number: 17WC01425B



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC0										
17WC01425B	HILL, LYNNAE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	2/1/2017 2/1/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GOING DOWN STEPS SHE THI	NKS SHE MAY HAVE PASSED (	OUT WOKE UP 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: 17WC0	1428W									
17WC01428W	ROSA, KYLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLEARVIEW REGIONAL HS	2/1/2017 2/1/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TOWARDS RESTROO	OM LOST CONSCIOUSNESS AN	ID FELL INJURED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1429K									
17WC01429K	LORDI, ALESSANDRA	11	236.14	243.00	0.00	0.00	0.00	0.00	0.00	479.14
WARREN DEVELOP. LEARNING	CTI 2/1/2017 2/1/2017	3/ 7/2017	236.14	243.00	0.00	0.00	0.00	0.00	0.00	479.14
UPSET STUDENT BEGAN TO P	UNCH HER L ARM, SQUEEZED	L WRIST	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		236.14	243.00	0.00	0.00	0.00	0.00	0.00	479.14
			236.14	243.00	0.00	0.00	0.00	0.00	0.00	479.14
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

#### Claim Number: 17WC01431B



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ivers@summitrisk.com

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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC0										
17WC01431B	ABRAU, JOANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLIE K PARKER	2/1/2017 2/1/2017	Open	260.35	243.00	0.00	0.00	0.00	0.00	0.00	503.35
SLIPPED ON WET FLOOR AND I	L ANKLE TWISTED SHE FELL		2,239.65	2.00	0.00	0.00	0.00	0.00	0.00	2,241.65
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			260.35	243.00	0.00	0.00	0.00	0.00	0.00	503.35
			2,239.65	2.00	0.00	0.00	0.00	0.00	0.00	2,241.65
Claim Number: 17WC0 <sup>2</sup>	1432Y									
17WC01432Y	PETRUCELLI, DANIEL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MIDDLETOWN-NORTH HS	2/1/2017 2/1/2017	3/ 2/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP AN ALTERCATIO	N BETWEEN STUDENTS REST	RAINING INJURE	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: 17WC0 <sup>2</sup>	1435Y									
17WC01435Y	ZISA, JENNIFER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FANNY MEYER HILLERS	2/1/2017 2/2/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STOPPIN A CHAIR FROM FALLI	NG ON STUDENT SHE FELL OU	JT OF HER CHAIF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01440K



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February 2017

		Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name C	ov Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Statu		Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss	·	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOI Claim Number: 17WC0									
17WC01440K	CAPANAS, MISTY	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
P.J. HILL SCHOOL	2/1/2017 2/1/2017 Open	297.96	243.00	0.00	0.00	0.00	0.00	0.00	540.96
PUNCHED BY A STUDENT ON F	HER LOWER BACK	2,202.04	2.00	0.00	0.00	0.00	0.00	0.00	2,204.04
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		297.96	243.00	0.00	0.00	0.00	0.00	0.00	540.96
		2,202.04	2.00	0.00	0.00	0.00	0.00	0.00	2,204.04
Claim Number: 17WC0	1441W								
17WC01441W	NOVATKOWSKI, EDWARD	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NEW EGYPT HS	2/1/2017 2/2/2017 Open	85.34	243.00	0.00	0.00	0.00	0.00	0.00	328.34
REPAIRING SHINGLES ON ROO	OF TWISTED LOWER BACK	2,414.66	2.00	0.00	0.00	0.00	0.00	0.00	2,416.66
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		85.34	243.00	0.00	0.00	0.00	0.00	0.00	328.34
		2,414.66	2.00	0.00	0.00	0.00	0.00	0.00	2,416.66
Claim Number: 17WC0	1442C								
17WC01442C	COFRANCESCO, JOSEPH	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTWOOD JR/SR HS	2/1/2017 2/2/2017 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REMOVED A DUMBELL, USED	TO KEEP DOOR OPEN, FELT PULL IN L	GROIN 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: 17WC01443K



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01										
17WC01443K	VANCLIEF, KRISTEN	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
NORTHERN HILLS ACADEMY	2/1/2017 2/2/2017	3/ 2/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HEADBUTTED HER CH	IN & TWISTED HER RT ARM		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC01	444W									
17WC01444W	GOLDBERG, ROSEMARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE HILLS H.S.	2/2/2017 2/2/2017	Open	214.92	243.00	0.00	0.00	0.00	0.00	0.00	457.92
WALKING IN THE HALLWAY SLIP	PED ON ICE MELT FELL ON F	RT SIDE INJ HIP, T	2,285.08	2.00	0.00	0.00	0.00	0.00	0.00	2,287.08
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			214.92	243.00	0.00	0.00	0.00	0.00	0.00	457.92
			2,285.08	2.00	0.00	0.00	0.00	0.00	0.00	2,287.08
Claim Number: 17WC01	445Y									
17WC01445Y	SANCHEZ, IRIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/1/2017 2/2/2017	Open	313.98	243.00	0.00	0.00	0.00	0.00	0.00	556.98
WHILE DRIVING BUS INVOLVED	IN MVA INJ BACK, NECK, BOT	H SHOULDERS	2,186.02	2.00	0.00	0.00	0.00	0.00	0.00	2,188.02
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			313.98	243.00	0.00	0.00	0.00	0.00	0.00	556.98
			2,186.02	2.00	0.00	0.00	0.00	0.00	0.00	2,188.02

#### Claim Number: 17WC01446K



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01										
17WC01446K	HARTSUIKER, MICHELLE	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
KATHERINE D MALONE ES	2/1/2017 2/2/2017	3/ 3/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SUPERVISING STUDENTS DURI	NG RECESS A STUDENT THRE	W A BEAN BAG	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: 17WC01	1448K									
17WC01448K	VAUGHN-PURCELL, ELIZA	ABETH 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATIVE OFFICES	2/2/2017 2/2/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED & FELL OVER DUST CA	AUSING INJURY TO LT KNEE		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	I449Y									
17WC01449Y	MILTNER, LEWIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN PARK MS	2/2/2017 2/2/2017	Open	87.20	243.00	0.00	0.00	0.00	0.00	0.00	330.20
CLMT SLIPPED AND FELL ON TA	APE TRYING TO PUT THE BLEA	ACHERS IN FELL	2,412.80	2.00	0.00	0.00	0.00	0.00	0.00	2,414.80
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			87.20	243.00	0.00	0.00	0.00	0.00	0.00	330.20
			2,412.80	2.00	0.00	0.00	0.00	0.00	0.00	2,414.80

#### Claim Number: 17WC01450K



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01										
17WC01450K	VARGAS, BLANCA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS EDISON SCHOOL	2/2/2017 2/2/2017	Open	92.51	243.00	0.00	0.00	0.00	0.00	0.00	335.51
STUDENT GETTING OUT FROM	UNDER A TABLE ACCIDENTA	LLY HEAD BUTTE	2,407.49	2.00	0.00	0.00	0.00	0.00	0.00	2,409.49
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			92.51	243.00	0.00	0.00	0.00	0.00	0.00	335.51
			2,407.49	2.00	0.00	0.00	0.00	0.00	0.00	2,409.49
Claim Number: 17WC01	451B									
17WC01451B	POSADA, NIKKO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/2/2017 2/3/2017	Open	170.33	243.00	0.00	0.00	0.00	0.00	0.00	413.33
WALKING WITH STUDENT WITH	HIS ARM OVER THE STUDEN	TS SHOULDER, C	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: 17WC01	452Y									
17WC01452Y	PETRUCELLI, DANIEL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MIDDLETOWN-NORTH HS	2/2/2017 2/3/2017	3/ 2/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO DIFFUSE AN ALTERO	CATION BETWEEN STUDENTS	S WENT TO THE G	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: 17WC01453K



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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: 17WC01										
17WC01453K	SKAKUM, JESSICA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WARREN DEVELOP. LEARNING	CTI 2/2/2017 2/3/2017	3/ 3/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING ISSUE POKEE	HER IN R EYE		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: 17WC01	455W									
17WC01455W	CRUZ, ROSA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTATION DEPT	2/2/2017 2/3/2017	2/27/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE DRIVING BUS WAS INVOL	VED IN MVA INJURED BOTH	SHOULDERS, UP	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: 17WC01	457W									
17WC01457W	WARDLE, MARIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THEUNIS DEY E.S.	2/2/2017 2/3/2017	Open	83.80	243.00	0.00	0.00	0.00	0.00	0.00	326.80
SLIPPED AND FELL OVER MELT	ED ICE INJURED L WRIST, R F	KNEE	2,416.20	2.00	0.00	0.00	0.00	0.00	0.00	2,418.20
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			83.80	243.00	0.00	0.00	0.00	0.00	0.00	326.80
			2,416.20	2.00	0.00	0.00	0.00	0.00	0.00	2,418.20

#### Claim Number: 17WC01458Y



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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: 17WC01										
17WC01458Y	SIMPSON, SOLANGE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AUDREY W CLARK	2/2/2017 2/3/2017	Open	25.07	243.00	0.00	0.00	0.00	0.00	0.00	268.07
WALKING IN HALLWAY WITH STU	JDENT WAS CAUGHT IN BET	WEEN AN ALTER(	2,474.93	2.00	0.00	0.00	0.00	0.00	0.00	2,476.93
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			25.07	243.00	0.00	0.00	0.00	0.00	0.00	268.07
			2,474.93	2.00	0.00	0.00	0.00	0.00	0.00	2,476.93
Claim Number: 17WC01	459B									
17WC01459B	MURRAY, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/2/2017 2/2/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORA	AL STRUCK HER RT MIDDLE F	INGER WITH 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: 17WC01	460K									
17WC01460K	BETALCES, ARACELIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/2/2017 2/3/2017	Open	171.80	243.00	0.00	0.00	0.00	0.00	0.00	414.80
BUS WAS INVOLVED IN MVA CAU	JSED WHIPLASH INJURED N	ECK	2,328.20	2.00	0.00	0.00	0.00	0.00	0.00	2,330.20
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			171.80	243.00	0.00	0.00	0.00	0.00	0.00	414.80
			2,328.20	2.00	0.00	0.00	0.00	0.00	0.00	2,330.20

#### Claim Number: 17WC01461W



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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: 17WC014										
17WC01461W	NUNEZ, ISABEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUDSON SCHOOL	2/3/2017 2/3/2017	Open	556.01	243.00	0.00	0.00	0.00	0.00	0.00	799.01
STUDENT RUSHED AT HER AND	JUMPED ON TO HER L HAND	WHILE SITTING	1,943.99	2.00	0.00	0.00	0.00	0.00	0.00	1,945.99
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			556.01	243.00	0.00	0.00	0.00	0.00	0.00	799.01
			1,943.99	2.00	0.00	0.00	0.00	0.00	0.00	1,945.99
Claim Number: 17WC014	162Y									
17WC01462Y	BEECHER, BIANCA	11	180.87	243.00	0.00	0.00	0.00	0.00	0.00	423.87
MARLBORO EARLY LEARNING C	EN 2/3/2017 2/3/2017	2/28/2017	180.87	243.00	0.00	0.00	0.00	0.00	0.00	423.87
STUDENT HAVING BEHAVIOR IS	SUE BIT HER R WRIST		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		180.87	243.00	0.00	0.00	0.00	0.00	0.00	423.87
			180.87	243.00	0.00	0.00	0.00	0.00	0.00	423.87
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC014	463W									
17WC01463W	LEDERS, ERIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GROVER CLEVELAND SCHOOL	2/3/2017 2/3/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING STUDENTS IN BATHF	OOM WITH THEIR CLOTHING	G WHILE HOLDING	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01464Y



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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: 17WC01										
17WC01464Y	GREGER, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPME	NT. 2/3/2017 2/3/2017	Open	239.36	243.00	0.00	0.00	0.00	0.00	0.00	482.36
BENDING A PIECE OF FLORAL W	/IRE FOR CRAFTS PROJECT	PUNCTURED L IN	2,260.64	2.00	0.00	0.00	0.00	0.00	0.00	2,262.64
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			239.36	243.00	0.00	0.00	0.00	0.00	0.00	482.36
			2,260.64	2.00	0.00	0.00	0.00	0.00	0.00	2,262.64
Claim Number: 17WC01	465Y									
17WC01465Y	SOWDEN, KATELYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/3/2017 2/3/2017	Open	244.07	243.00	0.00	0.00	0.00	0.00	0.00	487.07
STUDENT HAVING BEHAVIORAL	ISSUE REACHED OVER TABI	LE AND BIT HER F	2,255.93	2.00	0.00	0.00	0.00	0.00	0.00	2,257.93
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			244.07	243.00	0.00	0.00	0.00	0.00	0.00	487.07
			2,255.93	2.00	0.00	0.00	0.00	0.00	0.00	2,257.93
Claim Number: 17WC01	466K									
17WC01466K	VALENTE, MARILYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SAMUEL E. SHULL M.S.	2/3/2017 2/3/2017	Open	249.19	243.00	0.00	0.00	0.00	0.00	0.00	492.19
WRITING ON BOARD STUDENT F	RAN INTO AND GRABBED HE	R BACK AREA	2,250.81	2.00	0.00	0.00	0.00	0.00	0.00	2,252.81
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			249.19	243.00	0.00	0.00	0.00	0.00	0.00	492.19
			2,250.81	2.00	0.00	0.00	0.00	0.00	0.00	2,252.81

#### Claim Number: 17WC01467W



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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: 17WC01										
17WC01467W	CORNELIO, ANDREA	11	195.27	243.00	0.00	0.00	0.00	0.00	0.00	438.27
EMERSON MS	2/3/2017 2/3/2017	3/ 7/2017	195.27	243.00	0.00	0.00	0.00	0.00	0.00	438.27
STRUCK HER L HAND ON MOBIL	LE WHITE BOARD WHEN SHE	WALKED INTO IT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		195.27	243.00	0.00	0.00	0.00	0.00	0.00	438.27
			195.27	243.00	0.00	0.00	0.00	0.00	0.00	438.27
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC01	1468V									
17WC01468V	CARRINO, KIMBERLEY	10	10,000.00	1,193.00	8,500.00	0.00	0.00	0.00	0.00	19,693.00
NEPTUNE TOWNSHIP BOARD O	OFE 2/3/2017 2/6/2017	Open	261.34	1,193.00	3,366.64	0.00	0.00	0.00	0.00	4,820.98
RESTRAINING STUDENT DURIN	G BEHAVIORAL ISSUE STUDE	NT PUSHED CHA	9,738.66	0.00	5,133.36	0.00	0.00	0.00	0.00	14,872.02
Total by Claim Number 1	Claim		10,000.00	1,193.00	8,500.00	0.00	0.00	0.00	0.00	19,693.00
			261.34	1,193.00	3,366.64	0.00	0.00	0.00	0.00	4,820.98
			9,738.66	0.00	5,133.36	0.00	0.00	0.00	0.00	14,872.02
Claim Number: 17WC01	I469B									
17WC01469B	BERNIER, RUEBEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GANTNER AVE ES	2/3/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER CHAIR AND FEL	L INJURED HEAD, TAILBONE,	L HAND	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01470W



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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: 17WC01										
17WC01470W	BURGOS, JAIME	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH	9 & 2/6/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SETTING UP VOLLEYBALL NET	N GYM ROPE SNAPPED CAU	SING EQUIPMENT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	471R									
17WC01471R	KARASKA, MAUREEN	10	6,700.00	1,193.00	6,628.00	0.00	0.00	0.00	0.00	14,521.00
WESTAMPTON	2/3/2017 2/6/2017	Open	326.60	243.00	1,657.76	0.00	0.00	0.00	0.00	2,227.36
TRANSPORTING STUDENT IN W	HEELCHAIR SHE LOST HER I	BALANCE AND FE	6,373.40	950.00	4,970.24	0.00	0.00	0.00	0.00	12,293.64
Total by Claim Number 1	Claim		6,700.00	1,193.00	6,628.00	0.00	0.00	0.00	0.00	14,521.00
			326.60	243.00	1,657.76	0.00	0.00	0.00	0.00	2,227.36
			6,373.40	950.00	4,970.24	0.00	0.00	0.00	0.00	12,293.64
Claim Number: 17WC01	472R									
17WC01472R	HAAKE, JOSEPH	10	25,000.00	1,193.00	47,915.00	0.00	0.00	0.00	0.00	74,108.00
MAINTENANCE DEPT	2/2/2017 2/3/2017	Open	341.49	1,193.00	3,528.00	0.00	0.00	0.00	0.00	5,062.49
STANDING ON LADDER REPAIR	ING BOILER HE FELL FRACTU	JRED 2 R SIDE RIE	24,658.51	0.00	44,387.00	0.00	0.00	0.00	0.00	69,045.51
Total by Claim Number 1	Claim		25,000.00	1,193.00	47,915.00	0.00	0.00	0.00	0.00	74,108.00
			341.49	1,193.00	3,528.00	0.00	0.00	0.00	0.00	5,062.49
			24,658.51	0.00	44,387.00	0.00	0.00	0.00	0.00	69,045.51

### Claim Number: 17WC01473R



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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: 17WC0										
17WC01473R	BUURMAN, RICHARD	10	8,550.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	24,079.00
RYERSON SCHOOL	2/6/2017 2/6/2017	Open	55.15	1,193.00	3,584.00	0.00	0.00	0.00	0.00	4,832.15
MOVING A 55 GALLON DRUM F	ILLED WITH DIESEL LOST GRI	P of drum r hai	8,494.85	0.00	10,752.00	0.00	0.00	0.00	0.00	19,246.85
Total by Claim Number	1 Claim		8,550.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	24,079.00
			55.15	1,193.00	3,584.00	0.00	0.00	0.00	0.00	4,832.15
			8,494.85	0.00	10,752.00	0.00	0.00	0.00	0.00	19,246.85
Claim Number: 17WC0	1474K									
17WC01474K	FRANCOBIBO, SILA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK MS	2/6/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PUSHED ANOTHER	STUDENT CAUSING HIM TO FA	LL BACK INTO 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: 17WC0	1475W									
17WC01475W	SELDEN, CHERYL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERGEN ARTS & SCIENCE CH	ARTE 2/6/2017 2/6/2017	Open	380.00	243.00	0.00	0.00	0.00	0.00	0.00	623.00
TURNED LEFT ONTO HALLWAY	Y SLIPPED TWISTING R KNEE		2,120.00	2.00	0.00	0.00	0.00	0.00	0.00	2,122.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			380.00	243.00	0.00	0.00	0.00	0.00	0.00	623.00
			2,120.00	2.00	0.00	0.00	0.00	0.00	0.00	2,122.00

#### Claim Number: 17WC01476Y



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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: 17WC01										
17WC01476Y	SGOTTO, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE JOHN GLENN PRES	SCF 2/3/2017 2/6/2017	Open	119.60	243.00	0.00	0.00	0.00	0.00	0.00	362.60
WITH STUDENT WAITING FOR B	US WHEN STUDENT ACCIDEN	NTALLY HEADBUT	2,380.40	2.00	0.00	0.00	0.00	0.00	0.00	2,382.40
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			119.60	243.00	0.00	0.00	0.00	0.00	0.00	362.60
			2,380.40	2.00	0.00	0.00	0.00	0.00	0.00	2,382.40
Claim Number: 17WC01	477 <b>W</b>									
17WC01477W	LEARDO, TRACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 5 ES	2/6/2017 2/6/2017	Open	452.98	243.00	0.00	0.00	0.00	0.00	0.00	695.98
STRAINED HER R WRIST TRYING	G TO RESTRAIN A STUDENT H	HAVING BEHAVIO	2,047.02	2.00	0.00	0.00	0.00	0.00	0.00	2,049.02
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			452.98	243.00	0.00	0.00	0.00	0.00	0.00	695.98
			2,047.02	2.00	0.00	0.00	0.00	0.00	0.00	2,049.02
Claim Number: 17WC01	478W									
17WC01478W	LADSON, KIMBERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADAMSVILLE E S	2/6/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SETTING UP SOUND SYSTEM RE	EMOVING LID OFF SOUND BR	OAD AND CUT 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: 17WC01479B



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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: 17WC01										
17WC01479B	QUINN, JUSTIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HARRISON TWP. ES	2/3/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REPAIRING VACUUM MOTOR C	UT SKIN OFF L INDEX FINGER	WHEN HIS HAND	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1480Y									
17WC01480Y	SAKOWICZ, JULIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIGHT BEGINNINGS LEARNING	G CI 2/3/2017 2/6/2017	Open	509.30	243.00	0.00	0.00	0.00	0.00	0.00	752.30
STUDENT HAVING BEHAVIOR IS	SSUE BIT L HAND		1,990.70	2.00	0.00	0.00	0.00	0.00	0.00	1,992.70
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			509.30	243.00	0.00	0.00	0.00	0.00	0.00	752.30
			1,990.70	2.00	0.00	0.00	0.00	0.00	0.00	1,992.70
Claim Number: 17WC01	I481B									
17WC01481B	MILLER, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOTT SCHOOL (NEW)	2/1/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTED TO PULL OFF A ST	UDENT THAT WAS ATTACKIN	G ANOTHER STUI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01482W



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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: 17WC01										
17WC01482W	RODRIGUEZ, MADELINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	2/3/2017 2/6/2017	Open	532.95	243.00	0.00	0.00	0.00	0.00	0.00	775.95
MOPPING SHE SLIPPED AND FE	ELL OVER WET FLOOR INJURE	D L KNEE	1,967.05	2.00	0.00	0.00	0.00	0.00	0.00	1,969.05
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			532.95	243.00	0.00	0.00	0.00	0.00	0.00	775.95
			1,967.05	2.00	0.00	0.00	0.00	0.00	0.00	1,969.05
Claim Number: 17WC01	483Y									
17WC01483Y	ROBERTS, ASHLEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	CTI 2/6/2017 2/6/2017	Open	186.00	243.00	0.00	0.00	0.00	0.00	0.00	429.00
STUDENT PULLED HER RT ARM	CAUSING A POP IN HER RT EI	LBOW	2,314.00	2.00	0.00	0.00	0.00	0.00	0.00	2,316.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			186.00	243.00	0.00	0.00	0.00	0.00	0.00	429.00
			2,314.00	2.00	0.00	0.00	0.00	0.00	0.00	2,316.00
Claim Number: 17WC01	484K									
17WC01484K	MCDONOUGH, SHARON	11	91.43	243.00	0.00	0.00	0.00	0.00	0.00	334.43
WESTWOOD JR/SR HS	2/6/2017 2/6/2017	3/ 7/2017	91.43	243.00	0.00	0.00	0.00	0.00	0.00	334.43
STEPPED ON A TWIG WALKING	INTO BLDG CAUSING L KNEE	TO TWIST	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		91.43	243.00	0.00	0.00	0.00	0.00	0.00	334.43
			91.43	243.00	0.00	0.00	0.00	0.00	0.00	334.43
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

#### Claim Number: 17WC01485P



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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: 17WC0										
17WC01485P	ROCCO, SANDRA	11	208.98	243.00	0.00	0.00	0.00	0.00	0.00	451.98
CAMBRIDGE ES	2/6/2017 2/6/2017	3/ 7/2017	208.98	243.00	0.00	0.00	0.00	0.00	0.00	451.98
WAS DANCING WITH STUDENT	S ACCIDENTALLY TRIPPED AN	ID FELL OVER ST	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		208.98	243.00	0.00	0.00	0.00	0.00	0.00	451.98
			208.98	243.00	0.00	0.00	0.00	0.00	0.00	451.98
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC0 <sup>-</sup>	1486Y									
17WC01486Y	KORTE, DANIELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY EARLY CHILDHOOD	CTR 2/6/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS WASHING HER HANDS WI	HEN SOAP FLEW INTO 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: 17WC0 <sup>4</sup>	1487R									
17WC01487R	WOITAS, TAMARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LAKESIDE MS	2/6/2017 2/6/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PURPOSELY BODY SLAM	MED BY A STUDENT INJURED I	L SHOULDER, UP	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01488Y



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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: 17WC01										
17WC01488Y	BODDEN, ALBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	2/3/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHASING STUDENT HAVING BE	HAVIORAL ISSUE STARTED H	AVING BACK SPA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	489B									
17WC01489B	DAVIS, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PITTSGROVE MIDDLE SCHOOL	2/6/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE STRUCK HER ABDOM	EN USING FIST, 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: 17WC01	490K									
17WC01490K	DAVIS, TERESA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLLY HEIGHTS ES	2/6/2017 2/7/2017	3/ 6/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER THROW RUG AN	ND FELL INJURED L SIDE OF H	IEAD AND R KNEI	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: 17WC01491V



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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: 17WC0										
17WC01491V	COHEN, MEGAN	10	14,500.00	1,193.00	22,500.00	0.00	0.00	0.00	0.00	38,193.00
COPELAND MS	2/3/2017 2/7/2017	Open	0.00	1,193.00	5,376.00	0.00	0.00	0.00	0.00	6,569.00
TRIPPED OVER BEAN BAG CHA	AIR INJURED R ELBOW		14,500.00	0.00	17,124.00	0.00	0.00	0.00	0.00	31,624.00
Total by Claim Number 1	Claim		14,500.00	1,193.00	22,500.00	0.00	0.00	0.00	0.00	38,193.00
			0.00	1,193.00	5,376.00	0.00	0.00	0.00	0.00	6,569.00
			14,500.00	0.00	17,124.00	0.00	0.00	0.00	0.00	31,624.00
Claim Number: 17WC0 <sup>2</sup>	1492B									
17WC01492B	MCCALIN, BONNIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	2/7/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ENTERING CAFETERIA ACCIDE	NTLY SLAMMED HER L RING F	INGER IN DOOR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1494B									
17WC01494B	LEPORE, LISA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/7/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO ASSIST STUDENT V	OMITING SLIPPED AND FELL	NJURED NOSE, 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: 17WC01495K



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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: 17WC0										
17WC01495K	WILDMAN, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN CITY HS	2/6/2017 2/7/2017	Open	210.46	243.00	0.00	0.00	0.00	0.00	0.00	453.46
WHILE IN BETWEEN FRYER AN	ID TILT TABLE STRUCK HIS HE	AD ON HAYLON F	2,289.54	2.00	0.00	0.00	0.00	0.00	0.00	2,291.54
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			210.46	243.00	0.00	0.00	0.00	0.00	0.00	453.46
			2,289.54	2.00	0.00	0.00	0.00	0.00	0.00	2,291.54
Claim Number: 17WC0	1496G									
17WC01496G	CUCCINOTTA, ANITA	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
CLAYTON HS	2/2/2017 2/7/2017	Open	166.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,359.95
TRIPPED OVER WRESTLING M	AT WHEN HER HEAD STRUCK	AGAINST WALL	2,333.05	0.00	0.00	0.00	0.00	0.00	0.00	2,333.05
Total by Claim Number 1	Claim		2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
			166.95	1,193.00	0.00	0.00	0.00	0.00	0.00	1,359.95
			2,333.05	0.00	0.00	0.00	0.00	0.00	0.00	2,333.05
Claim Number: 17WC0	1498W									
17WC01498W	MERCADO, RAQUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH	9 & 2/3/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING STUDENT AFTER	A FIGHT ANOTHER STUDENT A	ATTACKED 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: 17WC01499Y



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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: 17WC01										
17WC01499Y	CAPONE, PETER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMILTON NORTH NOTTINGHAM	AH 2/6/2017 2/6/2017	Open	143.81	243.00	0.00	0.00	0.00	0.00	0.00	386.81
SETTING UP FOR A BASKETBAL	L GAME HE STRUCK HIS HEAD	UNDER THE BL	2,356.19	2.00	0.00	0.00	0.00	0.00	0.00	2,358.19
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			143.81	243.00	0.00	0.00	0.00	0.00	0.00	386.81
			2,356.19	2.00	0.00	0.00	0.00	0.00	0.00	2,358.19
Claim Number: 17WC01	500B									
17WC01500B	MOHAMMED, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERTH AMBOY H.S.	2/6/2017 2/7/2017	Open	12.44	243.00	0.00	0.00	0.00	0.00	0.00	255.44
SLIPPED ON OILY SUBSTANCE	AND FELL INJURED R KNEE, R	UPPER LEG, R L	2,487.56	2.00	0.00	0.00	0.00	0.00	0.00	2,489.56
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			12.44	243.00	0.00	0.00	0.00	0.00	0.00	255.44
			2,487.56	2.00	0.00	0.00	0.00	0.00	0.00	2,489.56
Claim Number: 17WC01	501W									
17WC01501W	LASHER, GINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JUNIOR HIGH SCHOOL, INCL.	2/7/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER A EXTENSION C	ORD CAUSING L KNEE TO TWI	ST AND FELL 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: 17WC01502K



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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: 17WC01										
17WC01502K	SOUSA, RAQUEL	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GRACE WILDAY SCHOOL	2/7/2017 2/7/2017	3/ 7/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TAKING STUDENT LAPTOPS OU	T OF A CART ONE FELL ON R	FOOT/R GREAT	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: 17WC01	503B									
17WC01503B	BIANCAMANO, STEPHAN	IE 11	258.72	243.00	0.00	0.00	0.00	0.00	0.00	501.72
THOMAS EDISON SCHOOL	2/7/2017 2/7/2017	3/ 7/2017	258.72	243.00	0.00	0.00	0.00	0.00	0.00	501.72
PREVENTING A STUDENT FROM	I LEAVING CLASS, STUDENT	STOMPED ON L F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		258.72	243.00	0.00	0.00	0.00	0.00	0.00	501.72
			258.72	243.00	0.00	0.00	0.00	0.00	0.00	501.72
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC01	504Y									
17WC01504Y	KASSAR, PETER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/7/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING HIS LUNCH WAS STRU	CK IN FACE WITH A BASKETB	ALL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01505K



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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: 17WC01									
17WC01505K	FULLER, TRACI 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	2/7/2017 2/7/2017 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TALKING TO STUDENT, STUDEN	T PUNCHED HER IN NOSE/FACE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	508Y								
17WC01508Y	COPPOLA, MARILYN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLONIA JUNIOR HIGH SCHOOL	2/6/2017 2/7/2017 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER GRAVEL TWISTE	D ANKLE, SHE FELL INJURED L ANKLE, 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: 17WC01	509Z								
17WC01509Z	RICHARDSON, CONSTANCE 10	6,800.00	1,193.00	10,752.00	0.00	0.00	0.00	0.00	18,745.00
JOYCE KILMER SCHOOL	2/7/2017 2/7/2017 Open	1,311.11	1,193.00	3,584.00	0.00	0.00	0.00	0.00	6,088.11
WAS ACCIDENTALLY KNOCKED	OVER BY A STUDENT RUNNING FELL ON R KN	5,488.89	0.00	7,168.00	0.00	0.00	0.00	0.00	12,656.89
Total by Claim Number 1 (	Claim	6,800.00	1,193.00	10,752.00	0.00	0.00	0.00	0.00	18,745.00
		1,311.11	1,193.00	3,584.00	0.00	0.00	0.00	0.00	6,088.11
		5,488.89	0.00	7,168.00	0.00	0.00	0.00	0.00	12,656.89

### Claim Number: 17WC01512K



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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: 17WC01										
17WC01512K	BARRETT, ADALGO	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTATION DEPT	2/7/2017 2/7/2017	3/ 7/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING IN BUS, ANOTHER BUS	STRUCK BUS FROM BEHIND I	NJURING HIS RT	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: 17WC01	I513W									
17WC01513W	ARANGUREN, WILLIAMS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PAUL ROBESON ES	2/7/2017 2/7/2017	Open	386.14	243.00	0.00	0.00	0.00	0.00	0.00	629.14
TAKING THE TRASH OUT WHEN	I HE STEPPED IN A POTHOLE I	NJURING HIS LT	2,113.86	2.00	0.00	0.00	0.00	0.00	0.00	2,115.86
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			386.14	243.00	0.00	0.00	0.00	0.00	0.00	629.14
			2,113.86	2.00	0.00	0.00	0.00	0.00	0.00	2,115.86
Claim Number: 17WC01	I514R									
17WC01514R	STEELE, DEBRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CONOVER ROAD ES	2/6/2017 2/7/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LEAVING CAFETERIA SHE TRIP	PED WALKING IN HER KNEE W	ALKER INJURING	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01515Y



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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: 17WC0										
17WC01515Y	ACKERMAN, GERALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
G HAROLD ANTRIM ES	2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PINCHED L HAND/FINGERS ON	TABLE TOP HE WAS FIXING		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1516B									
17WC01516B	MADDALONI, NATALIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM A MILLER ES	2/7/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS SITTING NEXT TO HEATER	R VENT WHEN DEBRIS FLEW IN	NTO HER EYES	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1517W									
17WC01517W	GOLDBERG, MARCIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNTAIN WAY SCHOOL	2/7/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CUSTODIAN SPRAYED SUBSTA	ANCE DUE TO INSECTS ON WA	LL SHE FELT DIZ	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01518Y



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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: 17WC0										
17WC01518Y	CRUZ, KATHY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
INDIAN HILL E.S.	2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PULLED CHAIR OUT	CAUSED HER TO TRIP OVER	CHAIR LEG INJUR	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: 17WC0	1519K									
17WC01519K	SANCHEZ, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
IGNACIO CRUZ EARLY CHILDH	OOE 2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SHE TRIPPED AND FELL OVER	THE CHAIR LEG INJURED L PI	NKY FINGER	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: 17WC0	1520R									
17WC01520R	VALENTINO, JOSEPH	15	7,600.00	245.00	11,742.00	0.00	0.00	0.00	0.00	19,587.00
PHILIP VROOM SCHOOL	2/8/2017 2/8/2017	Open	162.33	243.00	2,935.48	0.00	0.00	0.00	0.00	3,340.81
STEPPED OFF PLATFORM SLIF	PPED ON SLIPPERY STEPS HO	LDING ONTO RAII	7,437.67	2.00	8,806.52	0.00	0.00	0.00	0.00	16,246.19
Total by Claim Number	I Claim		7,600.00	245.00	11,742.00	0.00	0.00	0.00	0.00	19,587.00
			162.33	243.00	2,935.48	0.00	0.00	0.00	0.00	3,340.81
			7,437.67	2.00	8,806.52	0.00	0.00	0.00	0.00	16,246.19

### Claim Number: 17WC01521Y



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC0										
17WC01521Y	GOLDBERG, JORDAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARK AVE ES	2/7/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO STOP A STUDENT	FROM RUNNING OUT OF ROOM	I, ACCIDENTLY 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: 17WC0	1522Z									
17WC01522Z	KREMPECKI, DAWN	10	7,500.00	1,246.00	5,000.00	0.00	0.00	0.00	0.00	13,746.00
TRANSPORTATION DEPT	2/8/2017 2/8/2017	Open	0.00	1,246.00	2,064.93	0.00	0.00	0.00	0.00	3,310.93
COMING OFF BUS SLIPPED OV	ER WET STEPS AND FELL INJU	JRED TAILBONE,	7,500.00	0.00	2,935.07	0.00	0.00	0.00	0.00	10,435.07
Total by Claim Number 1	Claim		7,500.00	1,246.00	5,000.00	0.00	0.00	0.00	0.00	13,746.00
			0.00	1,246.00	2,064.93	0.00	0.00	0.00	0.00	3,310.93
			7,500.00	0.00	2,935.07	0.00	0.00	0.00	0.00	10,435.07
Claim Number: 17WC0	1523B									
17WC01523B	TREADAWAY, EDMUND	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT TRANSPORTATION	2/8/2017 2/8/2017	Open	86.37	243.00	0.00	0.00	0.00	0.00	0.00	329.37
RESTRAINING STUDENT HAVIN	IG BEHAVIORAL ISSUE WAS SO	CRATCHED BY TF	2,413.63	2.00	0.00	0.00	0.00	0.00	0.00	2,415.63
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			86.37	243.00	0.00	0.00	0.00	0.00	0.00	329.37
			2,413.63	2.00	0.00	0.00	0.00	0.00	0.00	2,415.63

### Claim Number: 17WC01524K



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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: 17WC0										
17WC01524K	DISALVO, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SITTING ON ROLLING CHAIR, C	HAIR SLIPPED OUT FROM UND	DER HER LANDEL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1525Y									
17WC01525Y	NECHAMKIN, ALYSON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOYCE KILMER SCHOOL	2/7/2017 2/8/2017	Open	12.44	243.00	0.00	0.00	0.00	0.00	0.00	255.44
WALKING FROM OFFICE SLIPP	ED AND FELL INJURED L ANKL	E, L KNEE, LOWE	2,487.56	2.00	0.00	0.00	0.00	0.00	0.00	2,489.56
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			12.44	243.00	0.00	0.00	0.00	0.00	0.00	255.44
			2,487.56	2.00	0.00	0.00	0.00	0.00	0.00	2,489.56
Claim Number: 17WC0 <sup>4</sup>	1526W									
17WC01526W	MCNICHOL, SHERYL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MOUNTAIN WAY SCHOOL	2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ACCIDENTALLY JAMMED R PIN	KY FINGER AS SHE OPENED D	OOR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01527K



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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: 17WC0										
17WC01527K	LIUZZA, ALYSIA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COPELAND MS	2/8/2017 2/8/2017	3/ 8/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE BIT R FOREARM		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: 17WC0 <sup>-</sup>	1528R									
17WC01528R	WEISENSTEIN, ALEXAND	RA 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	2/8/2017 2/8/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING FIRE DRILL IN THE PO	LE BARN A HAND TRUCK FELL	HITTING L THIGH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>-</sup>	15291									
17WC01529I	HERZIG, LORI	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ORANGE PREP ACADEMY	2/8/2017 2/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING HER HEEL CAUGHT	ON BOW OF HER SHOE AND FE	ELL INJURED BOT	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: 17WC01530B



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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: 17WC01										
17WC01530B	LUBIN, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARLBORO EARLY LEARNING C	CEN 2/8/2017 2/8/2017	Open	129.02	243.00	0.00	0.00	0.00	0.00	0.00	372.02
ATTEMPTING TO RESTRAIN STU	JDENT, STUDENT CRAWLED U	NDER HER LEGS	2,370.98	2.00	0.00	0.00	0.00	0.00	0.00	2,372.98
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			129.02	243.00	0.00	0.00	0.00	0.00	0.00	372.02
			2,370.98	2.00	0.00	0.00	0.00	0.00	0.00	2,372.98
Claim Number: 17WC01	531K									
17WC01531K	RUDNICK, RICHARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY TWP H.S.	2/8/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REMOVING 50LB SUB PUMP IN E	BASEMENT THE LID SLID HITTI	NG HEAD, FELT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	532W									
17WC01532W	MICHELLE, CHRISTOPHER	R 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 5 ES	2/8/2017 2/10/2017	Open	267.29	243.00	0.00	0.00	0.00	0.00	0.00	510.29
BREAKING UP A DISPUTE BETW	EEN STUDENTS WAS SITTING	ON GYM FLOOF	2,232.71	2.00	0.00	0.00	0.00	0.00	0.00	2,234.71
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			267.29	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: 17WC01533Y



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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: 17WC0										
17WC01533Y	CORRINGTON, CHERYL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MILDRED MAGOWAN ELEMENT	ARI 2/7/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMTPING TO KEEP STUDEN	NT FROM COLLAPSING STUDE	ENT KEPT PULLIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1534K									
17WC01534K	WALLACE, AMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN F. KENNEDY E.S.	2/8/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REFILLING FISH TANK CUT L HA	AND ON EDGE OF TANK		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1535R									
17WC01535R	KLING, ANN	11	5,500.00	245.00	0.00	0.00	0.00	0.00	0.00	5,745.00
MEMORIAL INTERMEDIATE SCH	HOO 2/9/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PUNCHED BY A STUDENT	ON HER FACE INJURED MOU	TH/JAW	5,500.00	2.00	0.00	0.00	0.00	0.00	0.00	5,502.00
Total by Claim Number 1	Claim		5,500.00	245.00	0.00	0.00	0.00	0.00	0.00	5,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			5,500.00	2.00	0.00	0.00	0.00	0.00	0.00	5,502.00

### Claim Number: 17WC01536Y



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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: 17WC015										
17WC01536Y	LAMPARIELLO, SARAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ETHEL HOPPOCK ELEMENTARY	2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WET STEPS AND FEI	L INJURED NECK, ELBOWS	, L THIGH, BUTTC	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: 17WC015	38K									
17WC01538K	TOLEDO, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	2/8/2017 2/10/2017	Open	15.82	243.00	0.00	0.00	0.00	0.00	0.00	258.82
WALKING ACROSS STREET FROM	I GARAGE TWISTED HER L	ANKLE AND FELL	2,484.18	2.00	0.00	0.00	0.00	0.00	0.00	2,486.18
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
			15.82	243.00	0.00	0.00	0.00	0.00	0.00	258.82
			2,484.18	2.00	0.00	0.00	0.00	0.00	0.00	2,486.18
Claim Number: 17WC015	39B									
17WC01539B	BOWMAN, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALEXANDRIA MS	2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DUR8ING A VOLLEYBALL GAME W	ENT TO BALL WITH HIS HA	NDS ABOVE HIS F	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: 17WC01540Y



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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: 17WC0										
17WC01540Y	MOSS, DANIELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE KICKED HER R HAND/FIN	IGERS	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1541K									
17WC01541K	BATISTA, MIGUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLE SCHOOL	2/9/2017 2/10/2017	Open	21.09	243.00	0.00	0.00	0.00	0.00	0.00	264.09
CLEANING UP SIDEWALK FROM	M SNOW, SLIPPED ON BLACK ICE	INJURED BUT	2,478.91	2.00	0.00	0.00	0.00	0.00	0.00	2,480.91
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			21.09	243.00	0.00	0.00	0.00	0.00	0.00	264.09
			2,478.91	2.00	0.00	0.00	0.00	0.00	0.00	2,480.91
Claim Number: 17WC0	1542B									
17WC01542B	NOLAN, SCOTT	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 2/10/2017 2/10/2017	Open	238.12	243.00	0.00	0.00	0.00	0.00	0.00	481.12
CLEANING AND MOVING BOXE	S, DUST GOT INTO R EYE		2,261.88	2.00	0.00	0.00	0.00	0.00	0.00	2,263.88
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			238.12	243.00	0.00	0.00	0.00	0.00	0.00	481.12
			2,261.88	2.00	0.00	0.00	0.00	0.00	0.00	2,263.88

#### Claim Number: 17WC01543R



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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: 17WC0										
17WC01543R	RODRIGUEZ, RONALD	15	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN HIGH SCHOOL	2/9/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLING CORD MULTI TIMES C	N SNOW PLOW LATER FELT F	PAIN IN R SHOULE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1544Y									
17WC01544Y	MANUPELLO, SHARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BLDG	2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING WITH STUDENT DOW	N HALLWAY FELT A POP IN R	CALF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1545K									
17WC01545K	LIGHTCAP, KAREN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRANSPORTING STUDENT TO	CRISIS ROOM STUDENT TRIPP	PED CAUSING 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: 17WC01546Y



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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: 17WC01										
17WC01546Y	HINTON, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN'S PROMISE CHARTER	BO 2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT SHUT DOOR ACCIDE	NTALLY HITTING HER L MIDDI	E AND RING FINC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	547B									
17WC01547B	JONES, THERESA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK MS	2/8/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS DOING HOME INSTRUCTIO	N AT HOLLEY CENTER SHE T	RIPPED AND FEL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	548K									
17WC01548K	JOHNSON, MARLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CUMBERLAND REG HS	2/8/2017 2/10/2017	Open	218.00	243.00	0.00	0.00	0.00	0.00	0.00	461.00
WALKING INTO CLASSROOM ST	UDENT WALKING OUT WHEN	THE DOOR STRU	2,282.00	2.00	0.00	0.00	0.00	0.00	0.00	2,284.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			218.00	243.00	0.00	0.00	0.00	0.00	0.00	461.00
			2,282.00	2.00	0.00	0.00	0.00	0.00	0.00	2,284.00

#### Claim Number: 17WC01549W



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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: 17WC015										
17WC01549W	MERCADO, RAQUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH 9	& 2/10/2017 2/10/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING DOOR OPEN FOR STUD	ENT, STUDENT PUNCHED 1	THE DOOR SMASH	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: 17WC015	50K									
17WC01550K	BOYKIN, JEPIERA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK PRIMARY	2/10/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL IS	SSUE KICKED HER IN FACE	MOUTH/TEETH	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: 17WC015	51B									
17WC01551B	VERES, GREGORY	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DEVEL LC - NEW PROVIDENCE	2/8/2017 2/13/2017	2/24/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UPSET STUDENT BIT R WRIST			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	laim		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: 17WC01552Y



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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: 17WC01										
17WC01552Y	KASMER, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFF	FICE 2/9/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SHOVELING SNOW HE FELL TW	ICE INJURED 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: 17WC01	553W									
17WC01553W	BAROSKA, CAROL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TINTON FALLS MS	2/8/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
VOLLEYBALL POLE FELL TOWA	RDS STUDENT SHE RAN TO C	CATCH IT STRAINE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	554Y									
17WC01554Y	CAMPANELLI, JESSE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RAHWAY HIGH SCHOOL	2/10/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SEPARATING A FIGHT BETWEE	N STUDENTS WHEN HE WAS	STRUCK ON JAW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01555K



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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: 17WC01										
17WC01555K	SPATAFORE, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH	9 & 2/10/2017 2/13/2017	Open	198.31	243.00	0.00	0.00	0.00	0.00	0.00	441.31
TRYING TO HOLD STUDENT THA	AT WAS TRYING TO ATTACK A	NOTHER STUDE	2,301.69	2.00	0.00	0.00	0.00	0.00	0.00	2,303.69
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			198.31	243.00	0.00	0.00	0.00	0.00	0.00	441.31
			2,301.69	2.00	0.00	0.00	0.00	0.00	0.00	2,303.69
Claim Number: 17WC01	556B									
17WC01556B	FOOTE, HEATHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY EARLY CHILDHOOD C	TR 2/8/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WAS CUTTING PAPER	WITH SCISSORS THE STUDE	ENT ACCIDENTAL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	557Y									
17WC01557Y	MERRITT-GRAHAM, TON	l 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RED BANK PRIMARY	2/6/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE KICKED HER 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: 17WC01558W



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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: 17WC0										
17WC01558W	BUTLER, CHARLENE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLIFFWOOD AVENUE ES	2/8/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT FELL OFF CHAIR AND	) HIS BODY HIT HER L LEG		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1559B									
17WC01559B	GREEN, FRANCIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINDEN HIGH SCHOOL	2/10/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COACHING STUDENTS A 12LB	SHOT PUT RICOCHETED OFF \	WALL HITTING 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: 17WC0	1560K									
17WC01560K	CHESTER, VIVIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE MS	2/10/2017 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO REMOVE PUT	TY FROM A STUDENT, STUDE	NT CLIMBED ON 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: 17WC01561V



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Claim Number Cla	mant Name ate Rpt Date	Cov								
	ate Rpt Date		Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location Loss D		Status	Paid	Paid	Paid	Paid	Paid	Paid	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' CO Claim Number: 17WC01561V	MPENSATION	I								
17WC01561V MCCOY	, PATRICK	10	14,500.00	1,193.00	12,500.00	0.00	0.00	0.00	0.00	28,193.00
PASSAIC COUNTY ADULT SCHOOL 2/9/201	2/13/2017	Open	0.00	1,193.00	2,462.36	0.00	0.00	0.00	0.00	3,655.36
SHOVELING SNOW SLIPPED ON ICE AND FE	ll on r hip ani	D LOWER BACK	14,500.00	0.00	10,037.64	0.00	0.00	0.00	0.00	24,537.64
Total by Claim Number 1 Claim			14,500.00	1,193.00	12,500.00	0.00	0.00	0.00	0.00	28,193.00
			0.00	1,193.00	2,462.36	0.00	0.00	0.00	0.00	3,655.36
			14,500.00	0.00	10,037.64	0.00	0.00	0.00	0.00	24,537.64
Claim Number: 17WC01562K										
17WC01562K FALDA,	SHANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE HIGH SCHOOL 2/10/20	7 2/13/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON BLACK ICE AND FELL INJURED	L WRIST AND HE	EAD	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 Claim			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01564M										
17WC01564M MATSK	D, MARLENE	10	17,500.00	1,193.00	20,000.00	0.00	0.00	0.00	0.00	38,693.00
MEMORIAL SR HS 2/11/20	7 2/14/2017	Open	565.32	1,193.00	1,792.00	0.00	0.00	0.00	0.00	3,550.32
DURING A MUSICAL THE CURTAIN OPENED	SHE TWISTED H	ER L FOOT ATTEN	16,934.68	0.00	18,208.00	0.00	0.00	0.00	0.00	35,142.68
Total by Claim Number 1 Claim			17,500.00	1,193.00	20,000.00	0.00	0.00	0.00	0.00	38,693.00
			565.32	1,193.00	1,792.00	0.00	0.00	0.00	0.00	3,550.32
			16,934.68	0.00	18,208.00	0.00	0.00	0.00	0.00	35,142.68

#### Claim Number: 17WC01565W



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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: 17WC015										
17WC01565W	LATEINER, RON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION HIGH SCHOOL (UNION)	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJUF	RED L ANKLE, LEG, BACK, PI	NKY FINGER	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: 17WC015	66K									
17WC01566K	BORGERS, CAROLINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOSE MARTI SCHOOL	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER STUDENTS FOOT	AND FELL LANDING ON R K	NEE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
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
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC015	68Y									
17WC01568Y	RUPPERT, LINDSEY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
S. AMBOY ELEMENTARY SCHOO	L / 2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS KICKED IN HEAD BY STUDE	NT HAVING BEHAVIORAL ISS	SUE	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: 17WC01569B



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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		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 - WOR Claim Number: 17WC01										
17WC01569B	STROTHERS, SHARONDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	2/13/2017 2/14/2017 Ope	en	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL ON I	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: 17WC01	570B									
17WC01570B	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	2/13/2017 2/14/2017 Ope	en	59.26	243.00	0.00	0.00	0.00	0.00	0.00	302.26
CUTTING WOOD FOR CLASS A	CHUNK OF WOOD POPPED OUT CU	TTING BOT	2,440.74	2.00	0.00	0.00	0.00	0.00	0.00	2,442.74
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			59.26	243.00	0.00	0.00	0.00	0.00	0.00	302.26
			2,440.74	2.00	0.00	0.00	0.00	0.00	0.00	2,442.74
Claim Number: 17WC01	571W									
17WC01571W	SADOWSKI, JUSTIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PERTH AMBOY VO-TECH	2/13/2017 2/14/2017 Ope	en	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PICKING THE GARBAGE A	BRANCH FROM TREE SWUNG AND	HIT HIS L 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: 17WC01572I



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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 Sta	atus	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 17WC01										
17WC01572I	SMITH, MATILDA	11	2,500.00	245.00	7,500.00	0.00	0.00	2,800.00	0.00	13,045.00
ADMINISTRATION BUILDING	2/13/2017 2/14/2017 Op	ben	320.67	243.00	0.00	0.00	0.00	0.00	0.00	563.67
TRIPPED WALKING DOWN STEP	S FELL FACE DOWN LANDING ON F	R KNEE	2,179.33	2.00	7,500.00	0.00	0.00	2,800.00	0.00	12,481.33
Total by Claim Number 1	Claim		2,500.00	245.00	7,500.00	0.00	0.00	2,800.00	0.00	13,045.00
			320.67	243.00	0.00	0.00	0.00	0.00	0.00	563.67
			2,179.33	2.00	7,500.00	0.00	0.00	2,800.00	0.00	12,481.33
Claim Number: 17WC01	573B									
17WC01573B	AUERBACH, JOANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/8/2017 2/14/2017 Op	ben	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT PUSHED HER CAUSIN	IG HER TO STRAIN UPPER BACK, N	IECK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	574K									
17WC01574K	ANDREWS, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ETHEL HOPPOCK ELEMENTARY	2/10/2017 2/14/2017 Op	ben	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP WOODEN DOOR ST	OP ON FLOOR STRUCK HIS HEAD	ON TABLE 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: 17WC01575Y



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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: 17WC01										
17WC01575Y	MELENDEZ, MATILDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMARSKJOLD M.S.	2/9/2017 2/14/2017	Open	27.88	243.00	0.00	0.00	0.00	0.00	0.00	270.88
PUSHING SNOW BLOWER IN FR	RONT OF SCHOOL INJURED UP	PPER BACK	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: 17WC01	576W									
17WC01576W	SILVA, DANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINWOOD MIDDLE SCHOOL	2/13/2017 2/14/2017	Open	137.10	243.00	0.00	0.00	0.00	0.00	0.00	380.10
HAPPY STUDENT HEAD BUTTE	D HER IN HEAD		2,362.90	2.00	0.00	0.00	0.00	0.00	0.00	2,364.90
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			137.10	243.00	0.00	0.00	0.00	0.00	0.00	380.10
			2,362.90	2.00	0.00	0.00	0.00	0.00	0.00	2,364.90
Claim Number: 17WC01	577B									
17WC01577B	FOLK, CATHY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
USING PUTTY KNIFE TO REMOV	/E GLUE OFF WOOD PUTTY K	NIFE SLIPPED 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: 17WC01578K



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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: 17WC0										
17WC01578K	WALKER, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EDISON SCHOOL	2/10/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING HANDS WITH STUDE	NT HAVING BEHAVIORAL ISSU	E STUDENT PULL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1579R									
17WC01579R	DICKSON, DENISE	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
Garfield School #7	2/10/2017 2/14/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
WALKING TO CLOSE GATES, S	LIPPED ON ICE TWISTED L KN	EE	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: 17WC0	1580K									
17WC01580K	JACKSON, TOY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAPLEWOOD JUNIOR HIGH SC	CHOC 2/13/2017 2/14/2017	Open	337.28	243.00	0.00	0.00	0.00	0.00	0.00	580.28
WALKING ON SIDE OF SCHOOL	SLIPPED ON ICE AND FELL IN	IJURED R ARM, R	2,162.72	2.00	0.00	0.00	0.00	0.00	0.00	2,164.72
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			337.28	243.00	0.00	0.00	0.00	0.00	0.00	580.28
			2,162.72	2.00	0.00	0.00	0.00	0.00	0.00	2,164.72

#### Claim Number: 17WC01581Y



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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: 17WC0										
17WC01581Y	CABALLERO, DENISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDTOWN COMMUNITY	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTING A CRATE OF MILK DOW	VNSTAIRS CAFETERIA FELT P	OP IN L THUMB	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1582W									
17WC01582W	FARMER, ALAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LIVINGSTON SENIOR HS	2/13/2017 2/14/2017	Open	170.33	243.00	0.00	0.00	0.00	0.00	0.00	413.33
WAS SALTING WALKWAY SLIPF	PED AND FELL INJURED R ELB	OW/FOREARM	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: 17WC0 <sup>4</sup>	1583W									
17WC01583W	RODRIGUEZ, BETINA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLIN POWELL	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJU	JRED L ELBOW		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01584K



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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: 17WC0										
17WC01584K	CIESLAK, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMARSKJOLD M.S.	2/13/2017 2/14/2017	Open	41.39	243.00	0.00	0.00	0.00	0.00	0.00	284.39
ASSISTING STUDENT OPENING	G THEIR LOCKER WSA BITTEN C	N R FOREARM	2,458.61	2.00	0.00	0.00	0.00	0.00	0.00	2,460.61
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			41.39	243.00	0.00	0.00	0.00	0.00	0.00	284.39
			2,458.61	2.00	0.00	0.00	0.00	0.00	0.00	2,460.61
Claim Number: 17WC0	1585B									
17WC01585B	RETTINO, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARKER ES	2/13/2017 2/14/2017	Open	116.95	243.00	0.00	0.00	0.00	0.00	0.00	359.95
MOVING A LUNCH TABLE TO G	ET BALL, FELT PULL IN L SHOU	LDER	2,383.05	2.00	0.00	0.00	0.00	0.00	0.00	2,385.05
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			116.95	243.00	0.00	0.00	0.00	0.00	0.00	359.95
			2,383.05	2.00	0.00	0.00	0.00	0.00	0.00	2,385.05
Claim Number: 17WC0	1586Y									
17WC01586Y	CARUSO, SUZANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUT SWAMP ES	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON BLACK ICE AND F	ELL INJURED R ANKLE, R ELBO	W AND SHOULD	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01587R



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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: 17WC01										
17WC01587R	COVENEY, MARIE	10	12,650.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	28,179.00
WESTFIELD BOE	2/13/2017 2/14/2017	Open	0.00	1,193.00	2,688.00	0.00	0.00	0.00	0.00	3,881.00
WALKING TO SCHOOL SLIPPED	ON ICE AND FELL HITTING H	ER HEAD	12,650.00	0.00	11,648.00	0.00	0.00	0.00	0.00	24,298.00
Total by Claim Number 1	Claim		12,650.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	28,179.00
			0.00	1,193.00	2,688.00	0.00	0.00	0.00	0.00	3,881.00
			12,650.00	0.00	11,648.00	0.00	0.00	0.00	0.00	24,298.00
Claim Number: 17WC01	588Y									
17WC01588Y	CROSS, JOYY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUNTERDON TRANSPORTATIO	ND 2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL ON E	BUTTOCKS		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	589W									
17WC01589W	ROWE, AUDRINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN AVENUE SCHOOL	2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN CLASSROOM STUE	DENT TRIPPED HER SHE FELL	ON L KNEE, HEA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01590K



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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: 17WC0										
17WC01590K	SPENCER, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ATLANTIC CO VOTECH	2/10/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SAT ON ROLLING CHAIR, THE C	CHAIR SLIPPED FROM UNDER	HIM HE FELL LAN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1591Z									
17WC01591Z	KERR, YVONNE	10	7,500.00	1,193.00	7,200.00	0.00	0.00	0.00	0.00	15,893.00
LEONARD V. MOORE SCHOOL	2/13/2017 2/15/2017	Open	0.00	243.00	2,944.00	0.00	0.00	0.00	0.00	3,187.00
COMING OUT OF RESTROOM S	TRUCK ANKLE ON CART SHE	FELL INJURED L ,	7,500.00	950.00	4,256.00	0.00	0.00	0.00	0.00	12,706.00
Total by Claim Number 1	Claim		7,500.00	1,193.00	7,200.00	0.00	0.00	0.00	0.00	15,893.00
			0.00	243.00	2,944.00	0.00	0.00	0.00	0.00	3,187.00
			7,500.00	950.00	4,256.00	0.00	0.00	0.00	0.00	12,706.00
Claim Number: 17WC0 <sup>4</sup>	1592W									
17WC01592W	RODRIGUEZ, JOSE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JAMES J. FLYNN E.S.	2/9/2017 2/15/2017	Open	38.05	243.00	0.00	0.00	0.00	0.00	0.00	281.05
DRIVING SNOW REMOVAL MAC	CHINE WHICH STRUCK AGAINS	ST METAL CAUSIN	2,461.95	2.00	0.00	0.00	0.00	0.00	0.00	2,463.95
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			38.05	243.00	0.00	0.00	0.00	0.00	0.00	281.05
			2,461.95	2.00	0.00	0.00	0.00	0.00	0.00	2,463.95

#### Claim Number: 17WC01593R



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3/10/2017 11:09:05AM

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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: 17WC01										
17WC01593R	LUONGO, LINDA	14	7,450.00	245.00	14,336.00	0.00	0.00	0.00	0.00	22,031.00
FRANKLIN NO. 3 ELEM.	2/13/2017 2/15/2017	Open	0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
WALKING TOWARDS SCHOOL S	SLIPPED ON ICE AND FELL INJU	URED L HAND/WI	7,450.00	2.00	12,544.00	0.00	0.00	0.00	0.00	19,996.00
Total by Claim Number 1	Claim		7,450.00	245.00	14,336.00	0.00	0.00	0.00	0.00	22,031.00
			0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
			7,450.00	2.00	12,544.00	0.00	0.00	0.00	0.00	19,996.00
Claim Number: 17WC01	594K									
17WC01594K	D'AUGOSTINE, DENNIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALLACE MIDDLE SCHOOL	2/10/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO DIFFUSE AN A	LTERCATION BETWEEN STUD	ENTS STRUCK 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: 17WC01	595Z									
17WC01595Z	KOBLIN, ALISON	10	37,728.00	1,193.00	20,000.00	0.00	0.00	0.00	0.00	58,921.00
ORCHARD HILL ES	2/14/2017 2/14/2017	Open	0.00	1,193.00	1,920.00	0.00	0.00	0.00	0.00	3,113.00
DOING A HOME EVALUATION @	A STUDENT'S HOME SHE SLIF	PPED & FELL ON	37,728.00	0.00	18,080.00	0.00	0.00	0.00	0.00	55,808.00
Total by Claim Number 1	Claim		37,728.00	1,193.00	20,000.00	0.00	0.00	0.00	0.00	58,921.00
			0.00	1,193.00	1,920.00	0.00	0.00	0.00	0.00	3,113.00
			37,728.00	0.00	18,080.00	0.00	0.00	0.00	0.00	55,808.00

### Claim Number: 17WC01596K



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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: 17WC0										
17WC01596K	MADARAS, ANTOINETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN ES	2/13/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS GLIDING WITH HER STUD	ENTS SAW TWO STUDENTS IN	A SCUFFLE LOS	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>-</sup>	1597K									
17WC01597K	MARIN, RAQUEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	2/13/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO ANOTHER BLDG I	N PARKING LOT SHE FELL INJ	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: 17WC0 <sup>-</sup>	1598V									
17WC01598V	MASSARO, JENNIFER	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
ALTERNATIVE ACADEMIC HS	2/13/2017 2/15/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
THREATENED BY HER SUPERV	ISOR, FELT DIZZY, B/P ELEVA	TED, CHEST PAIN	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: 17WC01599R



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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: 17WC01										
17WC01599R	SOLE, SALVATORE	10	4,850.00	1,193.00	12,277.00	0.00	0.00	0.00	0.00	18,320.00
MEMORIAL MS	2/13/2017 2/15/2017	Open	0.00	243.00	1,534.62	0.00	0.00	0.00	0.00	1,777.62
PUTTING A WATER BOTTLE INT	O A WATER COOLER INJURED	R SHOULDER	4,850.00	950.00	10,742.38	0.00	0.00	0.00	0.00	16,542.38
Total by Claim Number 1	Claim		4,850.00	1,193.00	12,277.00	0.00	0.00	0.00	0.00	18,320.00
			0.00	243.00	1,534.62	0.00	0.00	0.00	0.00	1,777.62
			4,850.00	950.00	10,742.38	0.00	0.00	0.00	0.00	16,542.38
Claim Number: 17WC01	600R									
17WC01600R	CABRERA, JUSTIN	10	2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
JOHN F. KENNEDY NO.7 ELEM.	2/13/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PULLING TABLES OFF THE TRU	CK HAND GOT STUCK BETWE	EN TABLES COW	2,500.00	950.00	0.00	0.00	0.00	0.00	0.00	3,450.00
Total by Claim Number 1	Claim		2,500.00	1,193.00	0.00	0.00	0.00	0.00	0.00	3,693.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	950.00	0.00	0.00	0.00	0.00	0.00	3,450.00
Claim Number: 17WC01	601W									
17WC01601W	FAY, TARA	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 2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS TACKLED BY STUDENT HA	VING BEHAVIORAL ISSUE AND	D FELL INJURED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01602Y



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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: 17WC016										
17WC01602Y	WALLACE, BRITTANY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MAYS LANDING CAMPUS	2/8/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING BACK FROM LUNCH W	ITH HER STUDENTS, STUDE	NT STRUCK TOP	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC016	603K									
17WC01603K	CARRUBBA, LUCILLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING WITH STUDENT AND V	VAS BITTEN 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: 17WC016	604W									
17WC01604W	YIKE, JUDITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH	& 2/7/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT GAVE HER A BEAR HU	G LIFTING HER OFF FLOOR	FELT A POP IN L 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: 17WC01606V



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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: 17WC01		N								
17WC01606V	GEORGINOW, ROMY	10	17,500.00	1,193.00	10,000.00	0.00	0.00	0.00	0.00	28,693.00
OCEAN TWP H.S.	2/14/2017 2/15/201	7 Open	0.00	1,193.00	1,445.77	0.00	0.00	0.00	0.00	2,638.77
BENDING DOWN TO GRAB PAPE	ERS FROM SHELF STUDEN	T LIFTED A CHAIR A	17,500.00	0.00	8,554.23	0.00	0.00	0.00	0.00	26,054.23
Total by Claim Number 1	Claim		17,500.00	1,193.00	10,000.00	0.00	0.00	0.00	0.00	28,693.00
			0.00	1,193.00	1,445.77	0.00	0.00	0.00	0.00	2,638.77
			17,500.00	0.00	8,554.23	0.00	0.00	0.00	0.00	26,054.23
Claim Number: 17WC01	607W									
17WC01607W	PACE, VERONICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INSTIT	UT 2/15/2017 2/15/201	7 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJU	RED L KNEE		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	608Y									
17WC01608Y	PETRUCELLI, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/13/2017 2/15/201	7 Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP AN ALTERCATION	I, A STUDENT GRABBED H	IM BY THE THROAT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01609K



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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: 17WC0										
17WC01609K	MCDONALD, CARLA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MANSFIELD TWP ES	2/13/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELT A POP BEHIND R KNEE W	HILE RUNNING AFTER STUDE	NT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1610W									
17WC01610W	WITT, JODI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OLD BRIDGE HS	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING BETWEEN BLDGS TW	ISTED L ANKLE/FOOT ON UNE	EVEN PAVEMENT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1611B									
17WC01611B	WAGNER, KEVIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGEWATER-RARITAN HS	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOVING VOLLEYBALL EQUIPM	ENT, UNTANGLING THE NET, T	HE BASE FELL 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: 17WC01612W



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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: 17WC01										
17WC01612W	KUREK, ANGELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO PICK UP STUDENT	THAT WAS UNDER TABLE KICK	KING AND SCREA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	613R									
17WC01613R	ABREU, DELIA	11	6,500.00	243.00	0.00	0.00	0.00	0.00	0.00	6,743.00
ADMINISTRATION BUILDING	2/14/2017 2/15/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ON HER WAY BACK TO THE BOI	E OFFICE WAS INVOLVED IN M	IVA INJURED UPI	6,500.00	243.00	0.00	0.00	0.00	0.00	0.00	6,743.00
Total by Claim Number 1	Claim		6,500.00	243.00	0.00	0.00	0.00	0.00	0.00	6,743.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			6,500.00	243.00	0.00	0.00	0.00	0.00	0.00	6,743.00
Claim Number: 17WC01	614Y									
17WC01614Y	QUINTO, LYNN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VILLA MADONNA	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING STUDENT OFF THE BU	JS SHE ROLLED HER LT ANKLI	E, FALLING 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: 17WC01615R



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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: 17WC01										
17WC01615R	ZAZWORSKY, OLIVIA	14	7.18	0.00	0.00	0.00	0.00	0.00	0.00	7.18
GROVER CLEVELAND SCHOOL	2/15/2017 2/15/2017	3/ 7/2017	7.18	0.00	0.00	0.00	0.00	0.00	0.00	7.18
STEPPED DOWN OUT OF HER C	AR, TWISTED L FOOT		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		7.18	0.00	0.00	0.00	0.00	0.00	0.00	7.18
			7.18	0.00	0.00	0.00	0.00	0.00	0.00	7.18
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17WC01	616Z									
17WC01616Z	MCGANN, KARI	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
DELRAN HIGH SCHOOL	2/13/2017 2/15/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING TO MEETING AREA SL	IPPED ON ICE AND FELL ON E	BUTTOCKS	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: 17WC01	617K									
17WC01617K	DISIMILE, ANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARL SANDBURG MS	2/15/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRYING TO BLOCK STUDENT FR	OM HURTING ANOTHER STU	DENT 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: 17WC01618Y



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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: 17WC0										
17WC01618Y	TASSIO, TONI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PISCATAWAY TWP H.S.	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS SETTING UP CONES IN G	YM STRAINED HER 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	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1619W									
17WC01619W	FINCKE, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
S. AMBOY ELEMENTARY SCHO	OOL / 2/15/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS KICKED PUNCHED AND S	CRATCHED ON L SIDE OF CHES	T, L WRIST BY ६	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1620B									
17WC01620B	MERVAT, MENA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CLARA BARTON ES	2/14/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING SHE SLIPPED AND F	ELL ON L SIDE ARM, ELBOW, AN	D HIP	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01621B



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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: 17WC01										
17WC01621B	RUTAN, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFF	TICE 2/15/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNKNOWN STUDENT SPRAY A S	SUBSTANCE CAUSING HER TO	D HAVE BREATHI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	622B									
17WC01622B	ANDINO, ZAMARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFF	ICE 2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT SPRAYED A SUBSTAN	ICE IN CAFETERIA CAUSING H	HER TO HAVE BR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	623K									
17WC01623K	WALZ, RAYMOND	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/13/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS CARRY	ING GARBAGE MISSED A STE	EP AND FELL 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: 17WC01624W



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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: 17WC01										
17WC01624W	BARNETT, JOHN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRITON HS	2/14/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WRESTLING WITH STUDENT, ST	UDENT ROLLED OVER HIS HE	EAD PINNING 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: 17WC01	625V									
17WC01625V	KALKUS, ROBERT	10	45,000.00	245.00	17,000.00	0.00	0.00	0.00	0.00	62,245.00
UNION HIGH SCHOOL (UNION)	2/14/2017 2/16/2017	Open	0.00	243.00	2,585.16	0.00	0.00	0.00	0.00	2,828.16
PICKING UP TRASH WHEN HE T	WISTED L THIGH		45,000.00	2.00	14,414.84	0.00	0.00	0.00	0.00	59,416.84
Total by Claim Number 1	Claim		45,000.00	245.00	17,000.00	0.00	0.00	0.00	0.00	62,245.00
			0.00	243.00	2,585.16	0.00	0.00	0.00	0.00	2,828.16
			45,000.00	2.00	14,414.84	0.00	0.00	0.00	0.00	59,416.84
Claim Number: 17WC01	626B									
17WC01626B	STRIFFOLINO, JOANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYONNE H.S. AND ADMIN. OFF	ICE 2/15/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
UNKNOWN STUDENT SPRAYED	A SUBSTANCE CAUSING HEF	R TO HAVE BREA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01627K



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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: 17WC01										
17WC01627K	SARIK, JEANETTE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM A MILLER ES	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING CAFETERIA TABLES A	WAY FELT PAIN IN UPPER BAG	СК	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1628R									
17WC01628R	CARHART, BETTY	11	39,800.00	1,193.00	22,312.00	0.00	0.00	0.00	0.00	63,305.00
LANOKA HARBOR E.S.	2/15/2017 2/16/2017	Open	9.60	243.00	1,792.00	0.00	0.00	0.00	0.00	2,044.60
PUTTING BOOKS ON SHELF TO	OK A STEP BACK AND FELL OF	N R WRIST	39,790.40	950.00	20,520.00	0.00	0.00	0.00	0.00	61,260.40
Total by Claim Number 1	Claim		39,800.00	1,193.00	22,312.00	0.00	0.00	0.00	0.00	63,305.00
			9.60	243.00	1,792.00	0.00	0.00	0.00	0.00	2,044.60
			39,790.40	950.00	20,520.00	0.00	0.00	0.00	0.00	61,260.40
Claim Number: 17WC01	1629B									
17WC01629B	VENNELL, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN A. CARUSI JR. SCHOOL	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS DUSTING HE TRIPPED OV	ER A HEATING VENT INJURED	L KNEE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01630Z



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ivers@summitrisk.com



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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: 17WC01										
17WC01630Z	GAZZARA, CAROLYN	10	7,500.00	1,193.00	8,000.00	0.00	0.00	0.00	0.00	16,693.00
TRANSPORTATION	2/14/2017 2/16/2017	Open	0.00	1,193.00	1,119.42	0.00	0.00	0.00	0.00	2,312.42
GETTING OFF BUS WITH STUDE	NTS, STEPPED IN POT HOLE	AND FELL FX R A	7,500.00	0.00	6,880.58	0.00	0.00	0.00	0.00	14,380.58
Total by Claim Number 1	Claim		7,500.00	1,193.00	8,000.00	0.00	0.00	0.00	0.00	16,693.00
			0.00	1,193.00	1,119.42	0.00	0.00	0.00	0.00	2,312.42
			7,500.00	0.00	6,880.58	0.00	0.00	0.00	0.00	14,380.58
Claim Number: 17WC01	631B									
17WC01631B	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	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HOLDING STUDENTS HAND, STU	JDENT BIT L HAND POINTER	FINGER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	632Y									
17WC01632Y	MINTZ, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/2/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON BANANA AND FELL	INJURED RKNEE		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01633W



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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: 17WC01										
17WC01633W	SCHLESSER, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTHERN VALLEY OLD TAPPA	NF 2/14/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON ICE AND FELL INJU	RED R PINKY, HAND, ELBOW		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	634B									
17WC01634B	BOVE, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN SOUTH HS	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS THROWING AWAY EQUIPM	IENT PICKED UP A COPY MAC	HINE AND CUT 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: 17WC01	635Y									
17WC01635Y	TIRONE, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARL SANDBURG MS	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE THREW HER INTO CAE	SINETS INJURED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01636W



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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: 17WC0										
17WC01636W	FOY, SAMANTHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIDGEWAY ES	2/14/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ON CHAIR HANGING UP POSTE	ERS, ON HER WAY DOWN SHE	FELL BACKWARE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1637K									
17WC01637K	PRESNER, ANGELA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT WALKED BY HER TU	RNED AROUND AND KICKED H	IER IN STOMACH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1638W									
17WC01638W	DUGGAN, JAMES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIDGEDALE M.S.	2/15/2017 2/15/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLEANING UP WATER ON FLO	OR, HE STOOD UP HITTING HIS	S HEAD ON A TV (	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01639B



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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: 17WC0										
17WC01639B	PERSAUD, TILKA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELL ON BOTH SHOULDERS DI	UE TO LOST HER BALANCE WH	IILE THE BUS MA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1640Y									
17WC01640Y	LUDLAM, ROSEMARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HIGH FIVED HER GR	ABBED L THUMB AND TWISTE	TI 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: 17WC0	1641K									
17WC01641K	DUCZ, JOANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WILLIAM ANNIN MS	2/16/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED UP CURB AND ELL ON	N R KNEE, CHEST/RIB, SHOULE	DER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01642W



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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: 17WC0										
17WC01642W	NATALINO, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KEANSBURG HS	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BENT DOWN TO LOOK INTO ST	ALL AS SHE STOOD UP SHE S	TRUCK HER HEA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1643R									
17WC01643R	SLATES, DAVID	10	10,000.00	1,193.00	2,100.00	0.00	0.00	0.00	0.00	13,293.00
DELSEA REG HS	2/15/2017 2/16/2017	Open	7.77	1,193.00	2,048.00	0.00	0.00	0.00	0.00	3,248.77
WAS STRUCK IN BACK OF HEA	D WITH A VOLLEYBALL CAUSI	NG INJURY	9,992.23	0.00	52.00	0.00	0.00	0.00	0.00	10,044.23
Total by Claim Number 1	Claim		10,000.00	1,193.00	2,100.00	0.00	0.00	0.00	0.00	13,293.00
			7.77	1,193.00	2,048.00	0.00	0.00	0.00	0.00	3,248.77
			9,992.23	0.00	52.00	0.00	0.00	0.00	0.00	10,044.23
Claim Number: 17WC0 <sup>2</sup>	1644T									
17WC01644T	SHARMA, RUCHI	10	27,500.00	1,193.00	44,620.00	0.00	0.00	0.00	0.00	73,313.00
CENTER FOR LIFE LONG LEARI	NINC 2/14/2017 2/16/2017	Open	0.00	1,193.00	621.00	0.00	0.00	0.00	0.00	1,814.00
STUDENT STRUCK HER FROM	BEHIND IN HER HEAD		27,500.00	0.00	43,999.00	0.00	0.00	0.00	0.00	71,499.00
Total by Claim Number 1	Claim		27,500.00	1,193.00	44,620.00	0.00	0.00	0.00	0.00	73,313.00
			0.00	1,193.00	621.00	0.00	0.00	0.00	0.00	1,814.00
			27,500.00	0.00	43,999.00	0.00	0.00	0.00	0.00	71,499.00

#### Claim Number: 17WC01645B



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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: 17WC0										
17WC01645B	YAUTZ, DEBORAH	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 2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS IN CAFETERIA STUDENT S	SPRAYED A SUBSTANCE CAUS	SING HER THROA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	16461									
17WC01646I	MORGAN, BRIENNA	10	20,000.00	1,193.00	5,376.00	0.00	0.00	0.00	0.00	26,569.00
AUTEN ROAD ES	2/16/2017 2/16/2017	Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
CUTTING CARDBOARD FOR SC	IENCE PROJECT WITH EXACT	O KNIFE CUT L TI	20,000.00	0.00	5,376.00	0.00	0.00	0.00	0.00	25,376.00
Total by Claim Number 1	Claim		20,000.00	1,193.00	5,376.00	0.00	0.00	0.00	0.00	26,569.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			20,000.00	0.00	5,376.00	0.00	0.00	0.00	0.00	25,376.00
Claim Number: 17WC0 <sup>2</sup>	1647W									
17WC01647W	CUFF, FREDRICK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARETOWN VOC	2/15/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
MOPPING FLOORS HE LOST HIS	S BALANCE AND FELL INJURE	D L LEG, GROIN 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: 17WC01648Y



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3/10/2017 11:09:05AM

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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: 17WC0										
17WC01648Y	GOTTLIEB, JODI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BEVERLY ES	2/16/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON WATER AND FELL	INJURED L ELBOW, FOOT/ANK	KLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1649B									
17WC01649B	HILL, MICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HILLSBOROUGH HS	2/16/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PUTTING SUPPLIES IN CABINE	T, CABINET DOOR CLOSED ON	L RING FINGER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1650K									
17WC01650K	EISENBERG, HENRY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALTER O KRUMBIEGEL ES	2/16/2017 2/16/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING FIRE DRILL, TRIPPED	OVER STUDENTS FOOT AND FI	ELL INJURED BO	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01651Y



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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: 17WC016										
17WC01651Y	STONE, NATASHA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TEAM ACADEMY CHARTER BOE	2/15/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
GETTING OUT OF VEHICLE STEP	PED ON BLACK ICE AND FEL	L INJURED L HAM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
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
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC016	53K									
17WC01653K	CRNISANIN, MEHDIJA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY ADULT SCHOO	DL 2/15/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP HEAVY TRASH BAGS	FELT PAIN IN MIDDLE OF LO	OWER BACK	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
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
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC016	54K									
17WC01654K	CONLEY, DENISE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WINSLOW TWP M.S.	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY STUDENT	OPENED THE RESTROOM D	OOR HITTING HE	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: 17WC01656B



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Claim NumberClaimant NameCovIncurredPaid	
Description of Loss Out Rsv <td>Incurred</td>	Incurred
Major Coverage: 10 - WORKERS' COMPENSATION Claim Number: 17WC01656B   17WC01656B FARINELLA, JOSEPHINE 11 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00   ETHEL MCKNIGHT E.S. 2/16/2017 2/17/2017 Open 0.00 243.00 0.00 0.00 0.00 0.00 0.00	Paid
Claim Number: 17WC01656B   17WC01656B FARINELLA, JOSEPHINE 11 2,500.00 245.00 0.00	Out Rsv
ETHEL MCKNIGHT E.S. 2/16/2017 2/17/2017 Open 0.00 243.00 0.00	
	2,745.00
TRIPPED OVER BASE OF MICROPHONE AND FELL ON BOTH KNEES 2,500.00 2.00 0.00	243.00
	2,502.00
Total by Claim Number 1 Claim 2,500.00 245.00 0.00	2,745.00
0.00 243.00 0.00 0.00 0.00 0.00 0.00	243.00
2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 0.0	2,502.00
Claim Number: 17WC01657K	
17WC01657K BARTHOLOMEW, GREGORY 11 2,500.00 245.00 0.00 0.00 0.00 0.00 0.00 0.00	2,745.00
VINELAND SENIOR H.S. SOUTH 11 / 2/15/2017 2/17/2017 Open 0.00 243.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	243.00
ATTEMPTING TO KEEP STUDENTS FROM FIGHTING RESTRAINING STUDENT II 2,500.00 2.00 0.00 0.00 0.00 0.00 0.00	2,502.00
Total by Claim Number 1 Claim 2,500.00 245.00 0.00	2,745.00
0.00 243.00 0.00 0.00 0.00 0.00 0.00	243.00
2,500.00 2.00 0.00 0.00 0.00 0.00 0.00 0.0	2,502.00
Claim Number: 17WC01658Z	
17WC01658Z GOHAR, ELLYN 10 7,500.00 1,193.00 2,900.00 0.00 0.00 0.00 0.00 0.00	11,593.00
MIDDLETOWN SOUTH HS 2/16/2017 2/17/2017 Open 0.00 243.00 1,711.02 0.00 0.00 0.00 0.00 0.00	1,954.02
WALKING IN CROWDED HALLWAY TRIPPED AND FELL INJURED HEAD, R LOWI 7,500.00 950.00 1,188.98 0.00 0.00 0.00 0.00	9,638.98
Total by Claim Number 1 Claim 7,500.00 1,193.00 2,900.00 </td <td>11,593.00</td>	11,593.00
0.00 243.00 1,711.02 0.00 0.00 0.00 0.00	1,954.02
7,500.00 950.00 1,188.98 0.00 0.00 0.00 0.00	9,638.98

#### Claim Number: 17WC01659Y



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01										
17WC01659Y	MOMBRUN, SALVANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INSTI	TUT 2/15/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY SLIPPED	O ON WET FLOOR AND FELL IN	JURED R SHOUL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1660B									
17WC01660B	SMITH, SARALYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VON E MAUGER MS	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DROPPING STUDENTS OFF IN C	GYM STUDENT ACCIDENTALLY	DROPPED 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: 17WC01	1661Y									
17WC01661Y	MOORE, BRENNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CEDAR HILL ES	2/14/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TRIPPED OVER A CHAIR WHILE	ATTEMPTING TO BREAK FALL	INJURED R HAN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01662Z



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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: 17WC01										
17WC01662Z	TUCKER, MICHAEL	11	5,000.00	245.00	7,500.00	0.00	0.00	0.00	0.00	12,745.00
HAZLET MIDDLE SCHOOL	2/13/2017 2/17/2017	Open	0.00	243.00	2,511.64	0.00	0.00	0.00	0.00	2,754.64
WAS LIFTING 12 FOOT TABLE V	VHEN HE FELT A PULL IN L SH	OULDER	5,000.00	2.00	4,988.36	0.00	0.00	0.00	0.00	9,990.36
Total by Claim Number 1	Claim		5,000.00	245.00	7,500.00	0.00	0.00	0.00	0.00	12,745.00
			0.00	243.00	2,511.64	0.00	0.00	0.00	0.00	2,754.64
			5,000.00	2.00	4,988.36	0.00	0.00	0.00	0.00	9,990.36
Claim Number: 17WC01	1663J									
17WC01663J	TAYLOR, KATHLEEN	14	1.00	0.00	5,000.00	0.00	0.00	2,500.00	0.00	7,501.00
PINELANDS JR HIGH SCHOOL	2/6/2017 2/17/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON STONE AND STRU	CK HEAD AGAINST CAR DOOF	R INJURED NECK,	1.00	0.00	5,000.00	0.00	0.00	2,500.00	0.00	7,501.00
Total by Claim Number 1	Claim		1.00	0.00	5,000.00	0.00	0.00	2,500.00	0.00	7,501.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			1.00	0.00	5,000.00	0.00	0.00	2,500.00	0.00	7,501.00
Claim Number: 17WC01	1664Y									
17WC01664Y	BEATTIE, SANDRA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CUISINE ON THE GREEN	2/10/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CARRYING A BOX OF STUDENT	UNIFORMS FELT PULL IN UPP	PER 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: 17WC01665B



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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: 17WC0										
17WC01665B	TATE, NICHELLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREEN GROVE SCHOOL	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORA	L ISSUE TOSSED A PAIR OF B	ULKY HEADPHON	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: 17WC0	1666K									
17WC01666K	PALADINO, JANET	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUT SWAMP ES	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INTO BLDG MISSED	A STEP AND FELL INJURED FO	REHEAD, L EYE	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: 17WC0	1667Y									
17WC01667Y	BROWN, SHAWN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	2/15/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
HE AND ANOTHER STUDENT C	OLLIDED DURING WRESTLING	PRACTICE INJUF	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: 17WC01668K



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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: 17WC01										
17WC01668K	KEETH, THOMAS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMAS EDISON ENERGYSMAR	T ( 2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REMOVING A SYRINGE FROM ST	TUDENTS BACK PACK CAP C	AME OFF NEEDLE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	669B									
17WC01669B	YVONNET, ERICA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GREATER BRUNSWICK CHARTE	R { 2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
IN GYM PLAYING KICKBALL WITH	H STUDENTS, KICKED THE B	ALL FELT SUDDE!	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	670W									
17WC01670W	HALL, PARNICE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ABRAHAM CLARK HIGH SCHOOL	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO BREAK UP ALT	ERCATION BETWEEN STUDE	NTS LOST BALAN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01671W



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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: 17WC01										
17WC01671W	THOMPSON, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NJ REGIONAL DAY-JACKSON	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE WAS HEADBUTTED TH	HEN RESTRAINED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	672Y									
17WC01672Y	SERAFIN, GALE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DEPT OF TRANSPORTATION	2/10/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING AROUND BUS, SLIPPE	ED ON ICE CAUSING HER TO J	IOLT HER NECK 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: 17WC01	673W									
17WC01673W	FISHER, STACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN C. MILANESI ES	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING BEHAVIORAL	ISSUE KICKED HER IN R KNE	E AND FACE WH	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01674B



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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: 17WC0										
17WC01674B	OSWALD, ERIC	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LUMBERTON CAMPUS	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
USING GRINDER THE TIP OF TO	OOL CAME OFF HITTING HIM I	N FOREHEAD	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1675Y									
17WC01675Y	MENDEZ, DANIEL	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 2/14/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ESCORTING STUDENT TO BUS	HELD ON STUDENTS SHOULD	DERS, STUDENT 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: 17WC0 <sup>4</sup>	1676W									
17WC01676W	LOPEZ, ALBERTO	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BELLEVILLE SENIOR HS	2/8/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
COMING DOWN FROM CLOSING	G WINDOW STEPPED DOWN C	NTO 6FT LADDEF	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01677K



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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: 17WC01										
17WC01677K	MCNALLY, MARYANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLD SPRINGS ES	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING HANDLE WITH CARE T	RAINING COWORKER BUMPEI	D HEADS CAUSIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1678K									
17WC01678K	GURCSIK, NORELL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JR. & SR. HIGH SCHOOL	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DURING HANDLE WITH CARE T	RAINING NOSE STRUCK AGAI	NST ANOTHER 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: 17WC01	1679W									
17WC01679W	CARAVELLA, PETER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GROVER CLEVELAND SCHOOL	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS PULLING CART WHEN THE	E CART CAUGHT ON SOMETHI	NG STRAINED 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: 17WC01680B



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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: 17WC0										
17WC01680B	CROMEY, MICHAEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NUMBER 8 ES	2/17/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO REMOVE REM	AINING PIECE OF BROKEN LIC	GHT BULB FROM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1681R									
17WC01681R	DIODOARDO, ERNEST	10	5,100.00	1,193.00	8,322.08	0.00	0.00	0.00	0.00	14,615.08
MAYS LANDING CAMPUS	2/15/2017 2/17/2017	Open	0.00	1,193.00	1,040.26	0.00	0.00	0.00	0.00	2,233.26
WAS VACUUMING PAIN IN R SH	OULDER AND UPPER ARM		5,100.00	0.00	7,281.82	0.00	0.00	0.00	0.00	12,381.82
Total by Claim Number 1	Claim		5,100.00	1,193.00	8,322.08	0.00	0.00	0.00	0.00	14,615.08
			0.00	1,193.00	1,040.26	0.00	0.00	0.00	0.00	2,233.26
			5,100.00	0.00	7,281.82	0.00	0.00	0.00	0.00	12,381.82
Claim Number: 17WC0 <sup>2</sup>	1683Y									
17WC01683Y	DIAZ, MOISES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GYM & SHOPS	2/16/2017 2/17/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WORKING ON STAGE WHEN HE	STARTED TO FALL OFF STAIL	RS CAUSING HIM	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01684K



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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: 17WC0										
17WC01684K	LUDWIG, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRACE WILDAY SCHOOL	2/16/2017 2/20/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN STAIRS EXPE	RIENCED A SYNCOPE EPISOD	E AND FELL ABR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1685B									
17WC01685B	SMITH, SARAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MELVIN H. KREPS E.S.	2/16/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
INJURED UPPER ARM NO DETA	AILS GIVEN		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>4</sup>	1686W									
17WC01686W	WEST, DONNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLIE K PARKER	2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BRINGING BOOKS AND PERSO	NL ITEMS ON CART, THE WHE	EL OF CART STR	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01687P



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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: 17WC0										
17WC01687P	MEADE, NANCY	10	2,500.00	245.00	15,000.00	0.00	0.00	0.00	0.00	17,745.00
STONY BROOK ES	2/17/2017 2/21/2017	Open	0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
MOVING HER CAR TO BRING IN	I COMPUTER EQUIPMENT EXIT	ING CAR SLIPPE	2,500.00	2.00	13,208.00	0.00	0.00	0.00	0.00	15,710.00
Total by Claim Number 1	Claim		2,500.00	245.00	15,000.00	0.00	0.00	0.00	0.00	17,745.00
			0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
			2,500.00	2.00	13,208.00	0.00	0.00	0.00	0.00	15,710.00
Claim Number: 17WC0	1688Z									
17WC01688Z	WHITMAN, SONJA	10	7,500.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	11,693.00
TRANSPORTATION DEPT	2/16/2017 2/21/2017	Open	0.00	243.00	717.00	0.00	0.00	0.00	0.00	960.00
ATTEMPTING TO PUT ON A STU	JDENTS SEATBELT THE STUDE	ENT PULLED ON	7,500.00	950.00	2,283.00	0.00	0.00	0.00	0.00	10,733.00
Total by Claim Number 1	Claim		7,500.00	1,193.00	3,000.00	0.00	0.00	0.00	0.00	11,693.00
			0.00	243.00	717.00	0.00	0.00	0.00	0.00	960.00
			7,500.00	950.00	2,283.00	0.00	0.00	0.00	0.00	10,733.00
Claim Number: 17WC0	1689W									
17WC01689W	AWAD, RAFAT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CARRYING LADDER FROM TRU	JCK TO ROOF FELT A PULL IN F	R SHOULDER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01690K



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3/10/2017 11:09:05AM

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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: 17WC010										
17WC01690K	CLEMENS, VON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRENTON CENTRAL HS MAIN CA	MI 2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
FELT A PULL IN LOWER BACK W	HILE HE WAS CLOSING THE	GATE	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC010	691R									
17WC01691R	DEBONIS, FELICIA	10	5,100.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	20,629.00
DEVEL LC - NEW PROVIDENCE	2/21/2017 2/21/2017	Open	0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
STUDENT RAN TOWARDS EXIT	OOR SHE RAN AFTER THE	STUDENT SHE FE	5,100.00	950.00	12,544.00	0.00	0.00	0.00	0.00	18,594.00
Total by Claim Number 1	Claim		5,100.00	1,193.00	14,336.00	0.00	0.00	0.00	0.00	20,629.00
			0.00	243.00	1,792.00	0.00	0.00	0.00	0.00	2,035.00
			5,100.00	950.00	12,544.00	0.00	0.00	0.00	0.00	18,594.00
Claim Number: 17WC010	693K									
17WC01693K	ROOF, LAURIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON SCHOOL (UNION)	2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
INHALED SMOKE FROM BURNING	G CAR TRYING TO GET STU	DENTS TO SAFET'	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01694W



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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: 17WC010										
17WC01694W	MCNULTY, KATHLEEN	11	2,501.00	243.00	0.00	0.00	0.00	0.00	0.00	2,744.00
ACADEMY SCI, MATH, & ENGN	2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PARTICIPATING IN INTERACTIVE	BASKETBALL DRILL TRIPPE	D AND FELL INJU	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: 17WC010	695W									
17WC01695W	MALONEY, PATRICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERLIN COMMUNITY ES	2/14/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SHE PICKED UP CHAIRS FROM F	RACK PLACED THEM AGAINS	T WALL INJURED	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC010	696B									
17WC01696B	COHEN, ROBERT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
COLUMBIA HIGH SCHOOL	2/17/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BUILDING A SET FOR A PLAY IN	THE WOOD ROOM DROPPED	A PIECE OF PLY	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01697Y



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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: 17WC0										
17WC01697Y	SCODARI, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOMERVILLE HS	2/20/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CHANGING A SINK VALVE UND	ER SINK WENT TO GET UP AND	D PULLED MUSCI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1698W									
17WC01698W	WEIKEL, ALEXIS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TERRILL MS	2/21/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS STRUCK ON L SIDE OF CH	HEST BY A STUDENT HAVING B	EHAVIORAL ISSL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1699K									
17WC01699K	SPELLER, AARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NORTH BRUNSWICK SENIOR H	IS 2/16/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP FIGHT BETWEEI	N STUDENT, ONE STUDENT JUI	MPED ON HIS BA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01700Y



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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: 17WC0										
17WC01700Y	DUNNE, TARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
POINT ROAD E.S.	2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN HALLWAY SLI	PPED OVER WET FLOOR TWIS	TED R ANKLE 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: 17WC0	1701W									
17WC01701W	RIVERA, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AVENEL M.S.	2/21/2017 2/21/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEPTING TO BREAK UP 2 S	TUDENTS FIGHTING, 1 STUDEN	IT PUSHED TOW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1702B									
17WC01702B	CORTES, ANIBAL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MCKINLEY NO.10 ELEM.	2/22/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING DOWN DAMPED RAM	IP SLIPPED AND FELL ON BACK	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: 17WC01703V



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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: 17WC01		N								
17WC01703V	CARBONE, MICHAEL	10	30,000.00	1,193.00	26,500.00	0.00	0.00	0.00	0.00	57,693.00
WOODBRIDGE HIGH SCHOOL	2/1/2017 2/22/2017	' Open	0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
WRESTLING WITH STUDENT WH	O HAD STAPH INFECTION	CONTRCTED THE II	30,000.00	0.00	26,500.00	0.00	0.00	0.00	0.00	56,500.00
Total by Claim Number 1	Claim		30,000.00	1,193.00	26,500.00	0.00	0.00	0.00	0.00	57,693.00
			0.00	1,193.00	0.00	0.00	0.00	0.00	0.00	1,193.00
			30,000.00	0.00	26,500.00	0.00	0.00	0.00	0.00	56,500.00
Claim Number: 17WC01	704W									
17WC01704W	SIMON, CHARLES	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CARTERET H. S.	2/21/2017 2/22/2017	' Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO DIFFUSE AN AL	TERCATION HE TWISTED I	HIS RT KNEE & HYP	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	705B									
17WC01705B	HASHAGEN, ETHAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	2/21/2017 2/22/2017	' Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
DRILLING & SAWING WOOD, THE	E DRILL TWISTED HIS RT H	AND & 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: 17WC01706W



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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: 17WC0										
17WC01706W	DISTASIO, DIANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HENRY HUDSON REG HS	2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN HALLWAY PULLING	G CART STUDENT RAN INTO CAP	RT JERKING 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: 17WC0	1707B									
17WC01707B	VALENTINO, CAROLINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SABATER ES	2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SHE HAD TO LIFT AND REMOVE	E STUDENT HAVING BEHAVIORA	L ISSUE 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: 17WC0	1708Y									
17WC01708Y	HOUSER, TARA	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
VALLEYVIEW MS	2/21/2017 2/21/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DEMONSTRATING HOW TO JUN	MP ROPE WHEN SHE ROLLED HE	R RT ANKLE	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: 17WC01712K



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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: 17WC0171										
17WC01712K	EVERT, HEATHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VILLAGE CHARTER SCHOOL	2/22/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT FIGHTING BLOCKING 1 S	STUDENT FROM RUNNING	AFTER ANOTHER	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: 17WC0171	3Y									
17WC01713Y	MOODY, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY COUNTY SPECIAL SERV	2/22/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTED WALK A STUDENT HAVI	NG BEHAVIORAL ISSUE SV	VUNG HIS ARM C	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: 17WC0171	4B									
17WC01714B	MARION, JOY	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	2/22/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORAL	SCRATCHER HER ON THE	RT HAND	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 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: 17WC01715W



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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: 17WC01										
17WC01715W	OKUNUBI, MATILDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EAST ORANGE COMMUNITY CH	IAR <sup>-</sup> 2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMTPING TO CLOSE RESTR	ROOM DOOR ACCIDENTALLY H	IT HEAD WITH D	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1716K									
17WC01716K	SCOVELL, GAIL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WASHINGTON MEM E.S.	2/14/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN PARKING LOT SLIP	PPED ON ICE TWISTED 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: 17WC01	I717Y									
17WC01717Y	PEREZ, ELBA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ELWOOD SCHOOL	2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ATTEMPTING TO AVOID STEPPI	ING ON STUDENT WHO WAS L	AYING ON FLOOI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01718W



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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: 17WC01										
17WC01718W	HERBST, KATHERINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
RIDGEFIELD PARK HIGH SCHOO	DL 2/22/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SLIPPED ON DAMPED/SLIPPERY	' FLOOR AND FELL ONTO L S	IDE, ANKLE, LOW	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	719K									
17WC01719K	CHINNICI, NICOLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VINELAND SENIOR H.S. NORTH	9 & 2/2/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TWISTED HER R KNEE WHILE IN	GYM PLAYING DODGEBALL	WITH 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: 17WC01	720Z									
17WC01720Z	FISCHER, JANE	14	317.35	0.00	0.00	0.00	0.00	0.00	0.00	317.35
RIKER HILL ES	2/15/2017 2/23/2017	Open	317.35	0.00	0.00	0.00	0.00	0.00	0.00	317.35
SLIPPED ON WET FLOOR AND F	ELL INJURED LOWER BACK,	R HIP, R LEG, R A	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		317.35	0.00	0.00	0.00	0.00	0.00	0.00	317.35
			317.35	0.00	0.00	0.00	0.00	0.00	0.00	317.35
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

### Claim Number: 17WC01721W



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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: 17WC0										
17WC01721W	PRICE, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE HILLS H.S.	2/21/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EXITING BLDG FELL INJURING	HER L KNEE, R FOREARM FLO	OR RECENTLY W	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: 17WC0	1722R									
17WC01722R	BORACK, LAUREN	10	5,300.00	1,193.00	14,308.96	0.00	0.00	0.00	0.00	20,801.96
POINT PLEASANT HS	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING INSIDE SCHOOL, SLI	PPED ON WET FLOOR & FELL I	NJURING RT FOC	5,300.00	950.00	14,308.96	0.00	0.00	0.00	0.00	20,558.96
Total by Claim Number 1	I Claim		5,300.00	1,193.00	14,308.96	0.00	0.00	0.00	0.00	20,801.96
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			5,300.00	950.00	14,308.96	0.00	0.00	0.00	0.00	20,558.96
Claim Number: 17WC0	1724B									
17WC01724B	LOMBARDI-BALL, MANDI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BAYSHORE MS	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CARRYING A STUDENT BACK I	NTO SCHOOL SHE INJURED HE	ER RT ELBOW & l	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: 17WC01725Y



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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: 17WC0										
17WC01725Y	ODONNELL, JOYCE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GYM & SHOPS	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLEANING THE BUS MIRRORS	IN THE GARAGE STEPPING DO	OWN OUT OF 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: 17WC0 <sup>2</sup>	1726K									
17WC01726K	BAKER, FRANCINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH RIVER ELEMENTARY SO	CHO 2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	S JERKED HIS HAND CAUSING	HER TO FALL INJ	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0 <sup>2</sup>	1727W									
17WC01727W	GERNE, DANIEL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PASSAIC COUNTY TECH. INSTI	TUT 2/22/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
REMOVING A RADIATIOR, LT HA	AND SLIPPED INTO RADIATOR	BRACKET CAUSI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01728Y



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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: 17WC0										
17WC01728Y	CUTLER, KELLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRANSPORTATION DEPT	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
ASSISTING A S TUDENT PUT O	N SHOE WHEN THE STUDENT	BIT HER LT BREA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1729B									
17WC01729B	VINCENT, JACQUY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HUEDEN-LOOKER ES	2/22/2017 2/22/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIOR	RAL INJURED HER LT PINKY FI	NGER	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1730K									
17WC01730K	MONELL, JOHNNY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BREAKING UP A FIGHT & LACE	RATED HIS LT THUMB WHILE T	TRYING TO RESTI	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01731W



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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: 17WC017		N								
17WC01731W	BOOKHOLDT, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ALEXANDER E.S.	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
STUDENT HAVING A BEHAVIORA	L ELBOWED THE BACK OF	HIS HEAD CAUSIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1 (	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC017	'32W									
17WC01732W	WOODWARD, AMY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ACADAMY LEARNING CENTER	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BIT BY A STUDENT ON HER LT FO	DREARM		2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC017	'33Y									
17WC01733Y	JAMES, GAYE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WALLACE MIDDLE SCHOOL	2/22/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
RSEPONDING TO A STUDENT AL	TERCATION, RAN UP 2 FLIC	GHTS OF STEPS 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: 17WC01734R



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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: 17WC	RKERS' COMPENSATION									
17WC01734R	ROCHE, DIANNE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
LINCOLN PARK MS	2/23/2017 2/23/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING SOCCER SHE FELL I	NJURING HER TAILBONE, BOTH	H SHOULDERS & I	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: 17WC	01735B									
17WC01735B	KOCH, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WESTAMPTON	2/23/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING TO GET A FORK IN	CAFETERIA SLIPPED AND FELL	ON WAXED FLOC	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC	01736Y									
17WC01736Y	GOLLIHUR, GEOFFREY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HAMMONTON MS	2/24/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
PICKING UP A BOX, HIS LT MI	DDLE FINGER SCRAPED THE W	ALL CAUSING A 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: 17WC01737K



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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: 17WC01										
17WC01737K	FELDMAN, STEWART	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THELMA L SANDMEIER E.S.	2/9/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
USING SNOW BLOWER TO CLEA	AR WALKWAYS FOR 2 HRS ST	RAIGHT AFTER 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: 17WC01	738W									
17WC01738W	REIMANN, NATHANIEL	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
CONSTABLE E S	2/22/2017 2/23/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING FROM THE PLAYGRO	JND TO THE BLACKTOP HE T	WISTED HIS RT A	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: 17WC01	739W									
17WC01739W	STUREK, JASON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KINGSWAY REG. HS	2/23/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WAS WORKING UNDER THE BU	S WHEN A PIECE OF HOT MET	TAL FLEW OFF 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: 17WC01740B



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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: 17WC01										
17WC01740B	WHITE, JAIME	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHILD FAMILY CENTER ES	2/24/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BLOCKING A SPEC ED STUDEN	T HAVING A BEHAVIORAL OU	TBURST IN THE 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: 17WC01	741B									
17WC01741B	ROPP, AMELIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN OFFICES	2/24/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CLMT TRIPPED OVER A PLUG/C	ABLE CONNECTED TO ONE C	OF THE BUSES DII	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	742Y									
17WC01742Y	SCHRIEKS, DIANE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/24/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WALKING IN THE OFFICE CLMT	TRIPPED OVER A PHONE CO	RD FALLING HIT 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: 17WC01743Y



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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: 17WC0										
17WC01743Y	HEALY, SHANAY	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
HARMONY TWP ES	2/24/2017 2/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PLAYING STUDENT/TEACHER	VOLLEYBALL WHEN ANOTHER	TEACHER ACCID	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: 17WC0	1744K									
17WC01744K	HADLEY, KATHLEEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
KNOLLWOOD ES	2/23/2017 2/27/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPEC ED STUDENT HAVING A	BEHAVIORAL OUTBURST THRC	WING ITEMS AT	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC0	1745K									
17WC01745K	KOSTER, NANCY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN DEVELOP. LEARNING	GCTI 2/24/2017 2/24/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
TURNED HER HEAD QUICKLY I	NJURING HER NECK WHILE AT	TEMPTING TO S1	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

#### Claim Number: 17WC01746Y



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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: 17WC01										
17WC01746Y	SMITH, MARY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MARTIN LUTHER KING MIDDLE	SCF 2/13/2017 2/14/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
BRINGING A BOX OF SUPPLIES	DOWN FROM A SHELF, THE BO	OX FELL CAUSIN	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	1747Y									
17WC01747Y	ERRICKSON, RONALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VILLAGE E.S.	2/23/2017 2/23/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
LIFTED A 5 GALLON BUCKET OF	F WAX & FELT A POP IN HIS LT	SHOULDER FOL	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Claim Number: 17WC01	748W									
17WC01748W	STRUCK, ANA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HASKELL ES	2/24/2017 2/27/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
WHILE WATCHING STUDENTS A	A STUDENT ACCIDENTLY HIT C	LMT IN THE HEA	2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
			2,500.00	2.00	0.00	0.00	0.00	0.00	0.00	2,502.00

### Claim Number: 17WC01749B



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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: 17WC0										
17WC01749B	RODRIGUEZ, BRIGIDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
LINCOLN NO. 5 ELEM.	2/24/2017 2/27/2017	Open	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
CARRYING CRATES OF LEFT C	OVER BREAKFAST BACK TO THE C	AFETERIA 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: 17WC0	1750R									
17WC01750R	LUDDEKE, LAURA	11	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
EDMUND HMIELESKI	2/24/2017 2/24/2017	3/ 8/2017	0.00	243.00	0.00	0.00	0.00	0.00	0.00	243.00
SPRAINED HER LOWER BACK	WHEN CARRYING/EMPTYING BOX	ES FROM HEF	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: 17WC0	1751Y									
17WC01751Y	HENDERSON-MANNING, LOI	RIAN 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
NELLIE K PARKER	2/24/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IN AUDITORIUM STANDING ON	I THE STAGE DURING A PRESENT	ATION CLMT N	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

### Claim Number: 17WC01752B



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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: 17WC0										
17WC01752B	GIAKAS, BETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
JOHN E. RILEY E.S.	2/24/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHEN WALKING TOWARD SCH	HOOL CLMT'S RT FOOT ROLLED	DAFTER STEPPIN	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: 17WC0	1753G									
17WC01753G	HAYDAK, MICHAEL	10	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	2/24/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN THE GYM GOING TH	ROUGH CONES PERFORMING	A DRILL CLMT FE	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: 17WC0	1754Z									
17WC01754Z	FILCHAK, DEBRA	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
VALLEY PROGRAM	2/14/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SQUATTING WHILE POTTY TR	AINING A STUDENT IN A VERY I	LOW CHAIR EVEF	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: 17WC01755B



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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: 17WC0										
17WC01755B	LIU, HATHAIPHAT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDTOWN COMMUNITY	2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT WAS PUTTING AWAY CO	LD LUNCHES IN THE FRIDGE V	VHEN THE DOOR	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0 <sup>4</sup>	1756W									
17WC01756W	OLIVER, JERRY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH SCHOOL	2/22/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP A FIGHT BETWE	EN 3 STUDENTS INJURED MID	AND LOWER BAC	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0	1757B									
17WC01757B	FRY, JESSE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EAST AMWELL TWP ES	2/22/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLMT SUSTAINED INJ TO RT W	RIST WHILE WORKING ON BAS	SEBALL FIELD RA	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: 17WC01758Y



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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: 17WC01										
17WC01758Y	CONNORS, BEVERLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
S. AMBOY ELEMENTARY SCHOO	DL / 2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FELL ON PAVEMENT INJURED L	HAND, R KNEE		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	759B									
17WC01759B	DIMARIA, KELLY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CHURCHILL J.H.S.	2/24/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORAL	ISSUE BIT HER ON R FOREA	RM	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: 17WC01	760B									
17WC01760B	PERAZZELLI, MARIANNE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPME	NT. 2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTEMPTING TO REDIRECT STU	JDENT, STUDENT PULLED ON	I R WRIST/L FORE	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: 17WC01761W



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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: 17WC01										
17WC01761W	EGAN, KEITH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN CO. VOC-TECH V.S. (GI	LO. 2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTEMPTED TO PREVENT A LOC	DSE DESK FROM FALLING AP	PART STRAINED N	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	762B									
17WC01762B	ZITO, HEATHER	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HELPING STUDENT TAKE COVER	R OFF AN IPAD CAME IN CON	TACT WITH BLOC	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: 17WC01	763W									
17WC01763W	PARISE, STEPHANIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HASKELL ES	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ON PLAYGROUND SUPERVISING	STUDENT, WAS STRUCK BY	A SOCCER BALL	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

### Claim Number: 17WC01764K



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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 C	ov Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Statu	s Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC01									
17WC01764K	CESARO, GINA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROBERT GORDON E.S.	2/27/2017 2/28/2017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CUTTING PAPERS USING PAPE	R CUTTER CUT L THUMB	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	1765B								
17WC01765B	GUERRERO, PATRICIA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HANOVER PARK REG HS BOE	2/24/2017 2/28/2017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT PLAYING IWTH A PIE	CE OF GLASS ON SCHOOL BUS, ATTEI	MPTED T 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	1766Y								
17WC01766Y	MCBRIDE, LAURA	11 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HACKENSACK EARLY CHILDHO	OD 2/27/2017 2/28/2017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED OVER STUDENTS FOO	OT AND FELL LANDING ON L SIDE ELBO	OW, HIP, 2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

### Claim Number: 17WC01767W



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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: 17WC0										
17WC01767W	RAND, CAPONIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEDOM PREP CHARTER SCH	HOC 2/24/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PULLING OUT DIVIDER WHILE S	SETTING UP FOR PARTY L HAN	ID BECAME WED	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: 17WC0 <sup>4</sup>	1768K									
17WC01768K	HARRISON, LORRAINE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BERLIN COMMUNITY ES	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RETURNING FROM FIRE DRILL	BADGE STRING CAUGHT ON D	OOR PULLING R	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: 17WC0 <sup>2</sup>	1769M									
17WC01769M	BRUNERT, PEGGY SUE	10	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 2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHILE IN CAFETERIA ACCIDEN	TALLY CUT R MIDDLE FINGER	CLEANING THE S	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01770K



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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: 17WC01										
17WC01770K	PORCHETTA, VIVIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #1 ES	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HIT HER WASTE AREA ON WATE	ER FOUNTAIN SHE FELL HITT	ING R EYE/HEAD	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	771W									
17WC01771W	BURLEW, BRIAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SPOTSWOOD BOE	2/3/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DRIVING SCHOOL BUS WAS INV	OLVED IN MVA NO INJURY		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: 17WC01	772Y									
17WC01772Y	GRUBE, LAURA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HOWELL TWP MEMORIAL MS	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKED BACK TO CHANGE SLI	DE TRIPPED OVER STUDENT	S LEG, AND FELL	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

### Claim Number: 17WC01773Y



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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: 17WC01										
17WC01773Y	TEWFIK, KIRSTEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BARCLAY EARLY CHILDHOOD C	CTR 2/22/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS STRUCK BY A SCOOTER C	ON R ANKLE BY STUDENT USIN	G IT	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: 17WC01	1774B									
17WC01774B	MCTAGUE, SHERRI	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
EARLY CHILDHOOD CENTER	2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
INSTRUCTED STUDENT TO SIT	WHEN THE STUDENT STRUCK	L SIDE OF 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: 17WC01	775B									
17WC01775B	FOSTER, ANNELIE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BROOKSIDE UPPER ES	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MONITORING STUDENTS DURIN	NG RECESS WAS STRUCK IN L	EYE/CHEEK BY	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: 17WC01776W



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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: 17WC01										
17WC01776W	KONIG, BARBARA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
DAYLIGHT TWILIGHT HS SOUTH	Wi 2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLEANING SINK DRAIN TURNED	AND FELL INJURED R HIP		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	777Y									
17WC01777Y	LATIMER, JED	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE PREP ACADEMY	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRAINED UPPER, LOWER BACI	K RESTRAINING STUDENT DU	JRING FIGHT	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	778K									
17WC01778K	OWEN, ELIZABETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAPE MAY CITY E.S.	2/24/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED OVER A CEMENT BUM	PER IN PARKING LOT INJURE	D FACE, R KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01779B



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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: 17WC0										
17WC01779B	NIEVES, JESUS	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BRIDGETON SENIOR H.S.	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP STUDENTS FIGH	ITING INJURED R AND L FOREA	RMS, WRISTS, F	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0	1780B									
17WC01780B	MILLS, JOANN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BENJAMIN FRANKLIN ES	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUPERVISING STUDENTS ON F	PLAYGROUND STUDENT SPINNI	NG ON RED APF	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: 17WC0	1781K									
17WC01781K	MILES, EDWARD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ORANGE PREP ACADEMY	2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STRAINED HIS RT SHOULDER	WHILE BREAKING UP A STUDEN	IT FIGHT	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01782B



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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: 17WC0										
17WC01782B	BEST, AMANDA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WARREN HILLS REG MS	2/22/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT SPRAYED COLOGNE	IS HALLWAY SHE HAD AN ALLEI	RGIC REACTIO	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: 17WC0	1783K									
17WC01783K	LEVI, KAERSTEN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
VALLEY PROGRAM	2/15/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GETTING OFF BUS TWISTED R	ANKLE ON RUNNING BOARD, SH	ie fell injure	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: 17WC0	1784Y									
17WC01784Y	KAVLUNAS, ALICIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BANKBRIDGE REG DEVELOPM	ENT. 2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT HAVIN	IG BEHAVIORAL ISSUE WAS SCR	ATCHED ON L	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: 17WC01785K



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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: 17WC0										
17WC01785K	KNOWLES, JOSEPH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CAMDEN CO. VOC-TECH V.S. (	GLO. 2/17/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING BETWEEN BLDGS FE	LL ON UNEVEN GROUND INJU	RED L KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0	1786K									
17WC01786K	PERKINS, ATIYA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL 2	2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ATTACKED BY A STUDENT WH	O INJURED HER FACE, CHEST,	& UPPER 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: 17WC0	1787B									
17WC01787B	MAHMOUD, VINCENT	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CROSSROADS M S	2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WORKING WITH STUDENT, STU	JDENT GOT UPSET & STRUCK	HIM IN THE NOSE	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: 17WC01788W



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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: 17WC0										
17WC01788W	FIORDILINO, MARIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
BURNETT JR. HIGH SCHOOL (L	JNIC 2/24/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING NEAR GARBAGE CAN	I SLIPPED ON WET FLOOR AN	D FELL ON L KNE	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: 17WC0 <sup>4</sup>	1789B									
17WC01789B	MELNICK, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/27/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT, STUD	ENT TURNED AND BIT R FORI	EARM	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: 17WC0 <sup>4</sup>	1790K									
17WC01790K	JAMISON, APRIL	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 2/24/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT DROPPED DOWN TO	FLOOR TRYING TO AVOID ST	UDENT FELL OVE	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: 17WC01791W



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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: 17WC01										
17WC01791W	BIONDO, LUCILLE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SCHOOL #28 MATTHEW JAGO	2/27/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RUNNING AFTER STUDENT ON F	PLAYGROUND STEPPED IN A H	HOLE TWISTED L	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: 17WC01	792Y									
17WC01792Y	WOLFE, ANNA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
PARKER ES	2/27/2017 2/27/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIPPED & FELL OVER BOXES I	NJURING HER LT KNEE & HIP V	WHILE BACKING	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: 17WC01	793W									
17WC01793W	JOHNSON, SUSAN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMINISTRATION BUILDING	2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REPORTING TO WORK HER SHO	E CAUGHT ON STEP CAUSING	G HER TO FALL I	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01794W



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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: 17WC01										
17WC01794W	RODRIGUEZ, FREDDY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNIVERSITY HEIGHTS CHARTE	R SI 2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BREAKING UP ALTERCATION B	ETWEEN STUDENTS, FELL OV	ER AND HIT HIS E	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	1795M									
17WC01795M	SPEAKMAN, JACOB	14	0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
TRITON HS	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLEANING CLASSROOM HE BEI	NT DOWN TWISTED L KNEE		0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	3,500.00
Claim Number: 17WC01	1796W									
17WC01796W	GEORGES, NIZAR	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
WAYNE VALLEY H.S.	2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WHEN PICKING UP GARBAGE H	IE CUT HIS RT INDEX FINGER		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01797B



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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: 17WC0										
17WC01797B	MENDEZ, JAIME	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
HIGH TECH HS	2/28/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPENING BUS HOOD, HOOD S	LIPPED FALLING ON HIS RT MID	DLE FINGER	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0	1798K									
17WC01798K	RAMIREZ, CHERYL	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
CONOVER ROAD ES	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
POURING CHEMICAL SOLUTIO	N SHE SPILLED SOLUTION ON L	ARM CHEMICAI	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: 17WC0	1799Y									
17WC01799Y	MORAN, CYNTHIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH BRUNSWICK H S	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT HAVING BEHAVIORA	AL ISSUE BIT HER R FOREARM		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: 17WC01800Z



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February 2017

			Med/BI/Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name	Cov	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date	Status	Paid	Paid	Paid	Paid	Paid	Paid	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: 17WC018										
17WC01800Z	HRUNKA, CHRISTOPHER	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
NORTH HUNTERDON H S	2/5/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SHOWING A WRESTLER A MOVE	THE WRESTLER ACCIDENTA	LLY HEAD BUTT	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 C	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: 17WC018	01R									
17WC01801R	FIELDS, STEPHANIE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
WOODBINE E.S.	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ON A CHAIR REACHING FOR SUP	PLIES STRAINED L KNEE AN	D R ANKLE STEF	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
Total by Claim Number 1 C	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: 17WC018	04B									
17WC01804B	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	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ESCORTING STUDENT UTILIZING	WALKER STUDENT FELL L	IDDLE FINGER F	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
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	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: 17WC01805Y



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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: 17WC01										
17WC01805Y	BRYAN, AARON	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ADMIN BLDG	2/17/2017 2/17/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING IN HALLWAY HE SLIP	PED ON LIQUID, FALLING INJU	JRING HIS RT SHC	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: 17WC01	1806Y									
17WC01806Y	GAULT, LENA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
SOUTH MAIN STREET SCHOOL	2/28/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
QUCKLY WALKING DOWN STEP	PS, SLIPPED ON STEP TWISTIN	NG R FOOT AS SH	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: 17WC01	1808Y									
17WC01808Y	ROTH, ROBBIN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
J.F.K. MEMORIAL HIGH SCHOOL	L 2/22/2017 3/1/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WAS PUTTING SOMETHING BAC	CK INTO CLOSET STUDENT SH	HUT DOOR ON R I	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01812B



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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: 17WC0										
17WC01812B	LINTNER, DONALD	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TOWNSHIP HS	2/23/2017 2/25/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRACTICING WRESTLING WITH	A STUDENT HE SUSTAINED I	NJURY TO HIS LT	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: 17WC0 <sup>4</sup>	1813Z									
17WC01813Z	ROSS, JOHN	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
HOWELL MS SOUTH	2/23/2017 3/2/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DURING STUDENT/STAFF BASH	KETBALL GAME JUMPED UP TO	D CATCH PASS L/	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: 17WC0 <sup>-</sup>	1815Y									
17WC01815Y	PAPILE, DONATA	11	2,501.00	0.00	0.00	0.00	0.00	0.00	0.00	2,501.00
THEUNIS DEY E.S.	2/27/2017 3/2/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ASSISTING STUDENTS OFF BU	S TURNED FELT PAIN IN L KNE	Ē	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: 17WC01817B



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		Med/Bl/(	Comp	Expense	Ind/Pd/Coll	Subrogation Recovery	Reinsurance Recovery	Legal	Rehab/Pmp/Pip Adj Exp	Total
Claim Number	Claimant Name (	Cov Inc	urred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred	Incurred
Location	Loss Date Rpt Date Stat	us	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss		Ou	t Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 10 - WOR Claim Number: 17WC01										
17WC01817B	SUAZO, DIMAS	11 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
UNION CITY HIGH SCHOOL	2/28/2017 3/1/2017 Ope	n	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EMPTYING TRASH ON THE LOA	DING DOCK HE PUNCTURED HIS LT	THUMB 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,5	00.00	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
		2,5	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	826B									
17WC01826B	LUNDY, ELIZA	11 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
<b>B. BERNICE YOUNG ES</b>	2/28/2017 3/2/2017 Ope	n	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DURING GYM CLASS WAS STAN	DING ON STEP THEN STEPPED DOV	VN OFF ST 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,5	00.00	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
		2,5	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC01	842K									
17WC01842K	UVEGES, JUDITH	11 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
AVENEL M.S.	2/27/2017 3/3/2017 Ope	n	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING IN GYM A BALL ROLLE	ED IN FRONT OF HER SHE TRIPPED A	AND FELL 2,50	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim	2,5	00.00	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
		2,5	00.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01863Y



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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: 17WC0										
17WC01863Y	NELSON, DEBORAH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
THOMPSON MS	2/28/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING AND PLACING CHAIRS	S ON TOP OF TABLES FELT A P	ULL IN BACK OF 1	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: 17WC0	1865P									
17WC01865P	DIPOALO, COLLEEN	15	0.00	0.00	10,000.00	0.00	0.00	2,500.00	0.00	12,500.00
KEYPORT HS	2/9/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SHOVELING SNOW AGGRAVA	TION TO PRIOR BACK INJURY		0.00	0.00	10,000.00	0.00	0.00	2,500.00	0.00	12,500.00
Total by Claim Number	1 Claim		0.00	0.00	10,000.00	0.00	0.00	2,500.00	0.00	12,500.00
			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	2,500.00	0.00	12,500.00
Claim Number: 17WC0	1873Y									
17WC01873Y	GENOVESE, MARYBETH	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
OCEAN ACADEMY	2/23/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PUSHING A STUDENT ON SCO	OTER TRIPPED AND FELL LAN	DING ON R KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number	1 Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01876Y



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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: 17WC0										
17WC01876Y	KRONGOLD, EVELYN	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROOSEVELT SCHOOL	2/27/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STUDENT RAN AND SLAMMED	INTO HER INJURING L FOOT		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0 <sup>2</sup>	1887K									
17WC01887K	WIDOTA, CYNTHIA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
C RICHARD APPLEGATE E.S.	2/28/2017 3/7/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RESTRAINING STUDENT HAVIN	IG BEHAVIORAL ISSUE INJURE	D UPPER 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: 17WC0 <sup>2</sup>	1909V									
17WC01909V	KINKELA , ANNE	14	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
OCEAN TWP INTERMEDIATE M.	S. 2/22/2017 3/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DEVELOPED SHORTNESS OF B	REATH AND CHEST PRESSUR	E, PAIN IN L SHO	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: 17WC01913Y



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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: 17WC0										
17WC01913Y	THOMPSON, MARK	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
MIDDLETOWN-NORTH HS	2/28/2017 3/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPENING LARGE GATE IN PARI	KING LOT COMPOUND SLIDIN	G THE GATE FEL1	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: 17WC0 <sup>2</sup>	1921W									
17WC01921W	PIETRAS, REBECCA	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
ROXBURY HS	2/23/2017 3/9/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DEMONSTRATING CHOREOGR	APHY WHEN SHE TWISTED L	KNEE	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Claim Number: 17WC0 <sup>2</sup>	1922B									
17WC01922B	KOENER, ROSE	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
FREEHOLD LEARNING CENTER	ES 2/13/2017 3/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SLIPPED ON ICE AND FELL INJU	JRED BOTH WRIST		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00

#### Claim Number: 17WC01927B



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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: 17WC01										
17WC01927B	SMALL-BAILEY, DANIELA	. 11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
GRIECO ES	2/16/2017 3/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ESCORTING STUDENT HAVING	BEHAVIORAL ISSUE TRIED TO	D RESTRAIN STUI	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: 17WC01	I941T									
17WC01941T	BLACK, DANIEL	15	0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
ATLANTIC HIGHLANDS ES	2/27/2017 3/9/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LIFTING AND CARRYING HEAVY	LOADS INJ BACK, CERVICAL,	, THORACIC, LUM	0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	2,500.00	0.00	2,500.00
Claim Number: 17WC01	I942B									
17WC01942B	FURTIS-CAUDLE, TRACY	11	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
TRIANGLE ES	2/24/2017 3/9/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WALKING STUDENT TO LUNCH	STUDENT WAS UPSET KICKE	R HER IN R LEG	2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
Total by Claim Number 1	Claim		2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00
-			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			2,500.00	245.00	0.00	0.00	0.00	0.00	0.00	2,745.00



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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
Total by Major Coverage 37	2 Claims		1,198,088.30	113,036.00	451,797.04	0.00	0.00	13,800.00	0.00	1,776,721.34
			13,613.90	88,087.00	60,405.06	0.00	0.00	0.00	0.00	162,105.96
			1,184,474.40	24,949.00	391,391.98	0.00	0.00	13,800.00	0.00	1,614,615.38
Major Coverage: 20 - GENER Claim Number: 17GL0109										
17GL01091D	BENEDICKS, SEAN	20	25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
COLONIA JUNIOR HIGH SCHOOL	2/13/2017 2/14/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
POLE STRUCK HEAD OF STUDEN	Г		25,000.00	1,500.00	0.00	0.00	0.00	0.00	0.00	26,500.00
Total by Claim Number 1 C	laim		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: 17GL0109	зн									
17GL01093H	SHEARER, NANCY	21	0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
CONSTABLE E S	2/13/2017 2/14/2017	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES HIGH WINDS CAUSED G	ATE TO BLOW OPEN HITTIN	IG HER CAR	0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	1,500.00
Total by Claim Number 1 C	laim		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: 17GL0109	9Q									
17GL01099Q	MAGAY, JAELON	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
BLOOMFIELD H.S. MUSIC BUILDIN	C 2/3/2017 2/16/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES BANGED HEAD AGAINS	T LOCKER		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 - GENE										
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 17GL011	04Q									
17GL01104Q	ADAMS, VIRGINIA	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
MIDDLETOWN-NORTH HS	2/15/2017 2/17/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FELL OVER WEIGHT O	N TRACK		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1	Claim		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 17GL011	05N									
17GL01105N	SUMNEY, PAUL	20	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
RED BANK MS	2/13/2017 2/21/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FIGHT ON GROUNDS			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: 17GL011	16Q									
17GL01116Q	RODERMANN, ANDREA M	IARIE 22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
BAYSHORE MS	2/14/2017 2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRIP AND FALL ON STEPS			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		Y									
Total by Claim Number 1	Claim			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 17GL01	117Q										
17GL01117Q	KEMAC, KAR	TAL	22	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
WOODROW WILSON SCHOOL	2/10/2017	2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SLIP AND FALL HIT HE	EAD ON BOOKSHE	ELF		0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Total by Claim Number 1	Claim			0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	5,000.00
Claim Number: 17GL01	119Q										
17GL01119Q	NIEDT, CARC	DL	20	15,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	17,500.00
BURLINGTON CO SPEC SER SC	H V 2/21/2017	2/28/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES SLIP AND FELL ON W	ATER			15,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	17,500.00
Total by Claim Number 1	Claim			15,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	17,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				15,000.00	2,500.00	0.00	0.00	0.00	0.00	0.00	17,500.00
Total by Major Coverage	8 Claims			45,000.00	4,000.00	1,500.00	0.00	0.00	0.00	20,000.00	70,500.00
				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
				45,000.00	4,000.00	1,500.00	0.00	0.00	0.00	20,000.00	70,500.00

### Major Coverage: 30 - AUTO LIABILITY

Claim Number: 17AL01040H



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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: 17AL010										
17AL01040H	BELAIR SVCS	31	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
BLOOMFIELD BOARD OF EDUCA	TIC 2/3/2017 2/3/2017	2/21/2017	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
IV STRUCK GARAGE DOOR			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	2,500.00	0.00	0.00	0.00	0.00	2,500.00
			0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL010	46H									
17AL01046H	STOREY, DAMIAN	31	0.00	0.00	1,195.77	0.00	0.00	0.00	0.00	1,195.77
PISCATAWAY TWP H.S.	2/6/2017 2/6/2017	2/23/2017	0.00	0.00	1,195.77	0.00	0.00	0.00	0.00	1,195.77
IV STRUCK PARKED OV			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1	Claim		0.00	0.00	1,195.77	0.00	0.00	0.00	0.00	1,195.77
			0.00	0.00	1,195.77	0.00	0.00	0.00	0.00	1,195.77
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL010	50N									
17AL01050N	Marchesi, Mary	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
DELAWARE VALLEY REG HS	2/7/2017 2/7/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number 1	Claim		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00

#### Claim Number: 17AL01051H



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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: 17AL010										
17AL01051H	SHORT, RICHARD	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
BRICK TWP. BOARD OF EDUCAT	TIOI 2/6/2017 2/8/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV BACKING UP STRUCK PARKEI	D VEHICLE		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number 1	Claim		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Claim Number: 17AL010	)67H									
17AL01067H	JOHNSON, JACYNTH	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
PLAINFIELD BOARD OF EDUCAT	TION 2/15/2017 2/17/2017	Reopened	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK DRIVERS DOOR MIRI	ROR OF PARKED VEHICLE		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number 1	Claim		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Claim Number: 17AL010	)76N									
17AL01076N	GHOUSHCHAIN, ELHAM	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
BLOOMFIELD BOARD OF EDUCA	ATIC 2/10/2017 2/23/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number 1	Claim		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
-										
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

#### Claim Number: 17AL01081H



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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: 17AL010										
17AL01081H	SCHRUMPF, KATHERINE	31	0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
MANCHESTER TWP BOARD OF E	DI 2/23/2017 2/24/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK PARKED VEHICLE			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Claim Number 1	Claim		0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	0.00	500.00	0.00	0.00	0.00	0.00	500.00
Total by Major Coverage 7	Claims		0.00	0.00	6,195.77	0.00	0.00	0.00	0.00	6,195.77
			0.00	0.00	3,695.77	0.00	0.00	0.00	0.00	3,695.77
			0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	2,500.00
Major Coverage: 40 - AUTO Claim Number: 17AL010										
17AL01037H	PERTH AMBOY BOE	40	0.00	227.30	7,500.00	0.00	0.00	0.00	0.00	7,727.30
PERTH AMBOY	2/1/2017 2/2/2017	Reopened	0.00	227.30	962.92	0.00	0.00	0.00	0.00	1,190.22
IV INVOLVED IN MVA			0.00	0.00	6,537.08	0.00	0.00	0.00	0.00	6,537.08
Total by Claim Number 1	Claim		0.00	227.30	7,500.00	0.00	0.00	0.00	0.00	7,727.30
			0.00	227.30	962.92	0.00	0.00	0.00	0.00	1,190.22
			0.00	0.00	6,537.08	0.00	0.00	0.00	0.00	6,537.08
Claim Number: 17AL010	41L									
17AL01041L	JERSEY CITY BOE	40	17,500.00	750.00	0.00	0.00	0.00	0.00	0.00	18,250.00
JERSEY CITY PUBLIC SCHOOLS	2/3/2017 2/3/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VEHICLE CAUGHT FIRE WHILE B	EING REPAIRED AT ON-FLEE	T SVC	17,500.00	750.00	0.00	0.00	0.00	0.00	0.00	18,250.00



-130-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 3/10/2017 11:09:05AM



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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		17,500.00	750.00	0.00	0.00	0.00	0.00	0.00	18,250.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			17,500.00	750.00	0.00	0.00	0.00	0.00	0.00	18,250.00
Claim Number: 17AL0104	42H									
17AL01042H	PERTH AMBOY BOE	40	0.00	195.80	0.00	0.00	0.00	0.00	0.00	195.80
TRANSPORTATION DEPT	2/2/2017 2/3/2017	2/23/2017	0.00	195.80	0.00	0.00	0.00	0.00	0.00	195.80
IV STOPPED AT LIGHT, OV REAR	ENDED IV		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	Claim		0.00	195.80	0.00	0.00	0.00	0.00	0.00	195.80
			0.00	195.80	0.00	0.00	0.00	0.00	0.00	195.80
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL010	52H									
17AL01052H	JERSEY CITY BOE	40	0.00	159.50	605.50	0.00	0.00	0.00	0.00	765.00
JERSEY CITY PUBLIC SCHOOLS	2/2/2017 2/8/2017	2/16/2017	0.00	159.50	605.50	0.00	0.00	0.00	0.00	765.00
IV STRUCK MISJUDGED PARKING	SPOT HIT A TREE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	Claim		0.00	159.50	605.50	0.00	0.00	0.00	0.00	765.00
			0.00	159.50	605.50	0.00	0.00	0.00	0.00	765.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL010	66L									
17AL01066L	MONMOUTH CTY VOC B	OE 40	0.00	550.00	5,000.00	0.00	0.00	0.00	0.00	5,550.00
MONMOUTH COUNTY VOCATION		Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK ON-COMING OV		·	0.00	550.00	5,000.00	0.00	0.00	0.00	0.00	5,550.00



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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 - AU										
Total by Claim Number	1 Claim		0.00	550.00	5,000.00	0.00	0.00	0.00	0.00	5,550.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	550.00	5,000.00	0.00	0.00	0.00	0.00	5,550.00
Claim Number: 17AL0	1072L									
17AL01072L	WATERFORD TWP BOE	40	0.00	500.00	15,000.00	0.00	0.00	0.00	0.00	15,500.00
WATERFORD TWP BOE	2/17/2017 2/22/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV REARENDED IV			0.00	500.00	15,000.00	0.00	0.00	0.00	0.00	15,500.00
Total by Claim Number	1 Claim		0.00	500.00	15,000.00	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
			0.00	500.00	15,000.00	0.00	0.00	0.00	0.00	15,500.00
Claim Number: 17AL0	1075L									
17AL01075L	WAYNE TWP BOE	40	0.00	262.70	5,300.00	0.00	0.00	0.00	0.00	5,562.70
WAYNE TWP BOE	2/16/2017 2/22/2017	3/ 7/2017	0.00	262.70	5,300.00	0.00	0.00	0.00	0.00	5,562.70
IV STRUCK POLE WHILE LOOP	KING AT A DEER		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number	1 Claim		0.00	262.70	5,300.00	0.00	0.00	0.00	0.00	5,562.70
			0.00	262.70	5,300.00	0.00	0.00	0.00	0.00	5,562.70
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17AL0	1078N									
17AL01078N	PLEASANTVILLE BOE	40	0.00	95.00	1,500.00	0.00	0.00	0.00	0.00	1,595.00
PLEASANTVILLE BOARD OF E	DUC# 2/16/2017 2/23/2017	Reopened	0.00	95.00	567.92	0.00	0.00	0.00	0.00	662.92
WIND PUSHED DOOR AS DRIV	/ER OPENED THE DOOR PUSHE	D OFF HINGES	0.00	0.00	932.08	0.00	0.00	0.00	0.00	932.08



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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	95.00	1,500.00	0.00	0.00	0.00	0.00	1,595.00
			0.00	95.00	567.92	0.00	0.00	0.00	0.00	662.92
			0.00	0.00	932.08	0.00	0.00	0.00	0.00	932.08
Claim Number: 17AL0107	79L									
17AL01079L	PERTH AMBOY BOE	40	0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
PERTH AMBOY	2/14/2017 2/23/2017	Open	0.00	227.30	541.18	0.00	0.00	0.00	0.00	768.48
OV STRUCK IV			0.00	522.70	4,458.82	0.00	0.00	0.00	0.00	4,981.52
Total by Claim Number 1 C	laim		0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
			0.00	227.30	541.18	0.00	0.00	0.00	0.00	768.48
			0.00	522.70	4,458.82	0.00	0.00	0.00	0.00	4,981.52
Claim Number: 17AL0108	38H									
17AL01088H	SOMERSET CTY ESC BO	E 40	0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
SOMERSET CNTY ED.SERVICES	C( 2/27/2017 3/2/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IV STRUCK TRUCK WEIGH SCALE	FROM GLARE OF SUN		0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
Total by Claim Number 1 C	laim		0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	750.00	5,000.00	0.00	0.00	0.00	0.00	5,750.00
Claim Number: 17AL0109	97L									
17AL01097L	WINSLOW TWP BOE	40	0.00	1,100.00	15,000.00	0.00	0.00	0.00	0.00	16,100.00
WINSLOW TWP BOE (CAMDEN)	2/15/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OV STRUCK PARKED IV			0.00	1,100.00	15,000.00	0.00	0.00	0.00	0.00	16,100.00



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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 D	ate Status	Paid	Paid	Paid	Paid	Paid	Paid	Paid	Paid
Description of Loss			Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv	Out Rsv
Major Coverage: 40 - AU		iΕ								
Total by Claim Number	1 Claim		0.00	1,100.00	15,000.00	0.00	0.00	0.00	0.00	16,100.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,100.00	15,000.00	0.00	0.00	0.00	0.00	16,100.00
Total by Major Coverage	11 Claims		17,500.00	5,340.30	59,905.50	0.00	0.00	0.00	0.00	82,745.80
			0.00	1,167.60	7,977.52	0.00	0.00	0.00	0.00	9,145.12
			17,500.00	4,172.70	51,927.98	0.00	0.00	0.00	0.00	73,600.68
Major Coverage: 70 - PRO Claim Number: 17PR0										
17PR01012E	JERSEY CITY BOE	75	25,000.00	7,500.00	1,800,000.00	0.00	0.00	7,500.00	10,000.00	1,850,000.00
PS #20	2/5/2017 2/6/20	17 Open	25,000.00	0.00	500,000.00	0.00	0.00	2,876.26	0.00	527,876.26
ALLEGES BOILER FIRE CAUSI	NG DAMAGE		0.00	7,500.00	1,300,000.00	0.00	0.00	4,623.74	10,000.00	1,322,123.74
Total by Claim Number	1 Claim		25,000.00	7,500.00	1,800,000.00	0.00	0.00	7,500.00	10,000.00	1,850,000.00
			25,000.00	0.00	500,000.00	0.00	0.00	2,876.26	0.00	527,876.26
			0.00	7,500.00	1,300,000.00	0.00	0.00	4,623.74	10,000.00	1,322,123.74
Claim Number: 17PR0	1014E									
17PR01014E	SOUTH BRUNSWIC	K TWP BOE 70	0.00	2,500.00	50,000.00	0.00	0.00	0.00	0.00	52,500.00
INDIAN FIELDS E S	2/14/2017 2/15/2	017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES WATER PIPE BURST	WATER DAMAGE		0.00	2,500.00	50,000.00	0.00	0.00	0.00	0.00	52,500.00
Total by Claim Number	1 Claim		0.00	2,500.00	50,000.00	0.00	0.00	0.00	0.00	52,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	2,500.00	50,000.00	0.00	0.00	0.00	0.00	52,500.00

#### Claim Number: 17PR01016E



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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 - PROPI Claim Number: 17PR0101										
17PR01016E	JERSEY CITY BOE	70	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
JERSEY CITY PUBLIC SCHOOLS	2/14/2017 2/15/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FIRE IN 4TH FLOOR BO	YS BATHROOM AT MS #4 SO	CHOOL	0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
Total by Claim Number 1 Claim			0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	2,500.00	75,000.00	0.00	0.00	0.00	0.00	77,500.00
Claim Number: 17PR0101	17S									
17PR01017S	GLOUCESTER CITY BOE	70	5,000.00	0.00	21,660.00	0.00	0.00	0.00	0.00	26,660.00
MARY ETHEL COSTELLO	2/13/2017 2/15/2017	3/ 9/2017	5,000.00	0.00	21,660.00	0.00	0.00	0.00	0.00	26,660.00
ALLEGES WIND DAMAGE TO ROC	)F		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 C	laim		5,000.00	0.00	21,660.00	0.00	0.00	0.00	0.00	26,660.00
			5,000.00	0.00	21,660.00	0.00	0.00	0.00	0.00	26,660.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17PR0101	18H									
17PR01018H	ROSELLE BORO BOE	70	0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
DR. CHARLES C. POLK ES	2/14/2017 2/15/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DELIBERATE FIRE			0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
Total by Claim Number 1 Claim			0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			0.00	1,500.00	5,000.00	0.00	0.00	0.00	0.00	6,500.00

#### Claim Number: 17PR01019E



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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: 17PR010									
17PR01019E	PATERSON ARTS & SCIENCE CF 70	0.00	0.00	0.00	0.00	0.00	0.00	437.27	437.27
PATERSON ARTS & SCIENCE CH	IAF 2/1/2017 2/17/2017 3/ 2/2017	0.00	0.00	0.00	0.00	0.00	0.00	437.27	437.27
ALLEGES A VEHICLE STRUCK BL	LDG	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total by Claim Number 1 Claim		0.00	0.00	0.00	0.00	0.00	0.00	437.27	437.27
		0.00	0.00	0.00	0.00	0.00	0.00	437.27	437.27
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Claim Number: 17PR010	20H								
17PR01020H	TEAM ACADEMY CHARTER BOE 70	0.00	1,500.00	25,000.00	0.00	0.00	0.00	0.00	26,500.00
TEAM ACADEMY CHARTER BOE	2/18/2017 2/21/2017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES FLOOD FROM A WATE	R COOLER PIPE BURST/BROKEN	0.00	1,500.00	25,000.00	0.00	0.00	0.00	0.00	26,500.00
Total by Claim Number 1	Claim	0.00	1,500.00	25,000.00	0.00	0.00	0.00	0.00	26,500.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		0.00	1,500.00	25,000.00	0.00	0.00	0.00	0.00	26,500.00
Claim Number: 17PR010	21N								
17PR01021N	WEST NEW YORK BOE 70	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
WEST NEW YORK REGISTRATIO	N E 2/27/2017 2/28/2017 Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
WORKING ON BOILER SMALL FIF	RE OCCURRED RESULTANT IN 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: 17PR01028H



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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: 17PR01										
17PR01028H	BRICK TWP BOE	71	0.00	0.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00
BRICK TWP. BOARD OF EDUCA	ATIOI 2/26/2017 3/6/2017	Open	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ALLEGES STORM SURGES DAM	MAGED EDP		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
Total by Major Coverage	9 Claims		30,000.00	15,500.00	1,996,660.00	0.00	0.00	7,500.00	10,437.27	2,060,097.27
			30,000.00	0.00	521,660.00	0.00	0.00	2,876.26	437.27	554,973.53
			0.00	15,500.00	1,475,000.00	0.00	0.00	4,623.74	10,000.00	1,505,123.74
Grand Totals: 407 Claims			1,290,588.30	137,876.30	2,516,058.31	0.00	0.00	21,300.00	30,437.27	3,996,260.18
			43,613.90	89,254.60	593,738.35	0.00	0.00	2,876.26	437.27	729,920.38
			1,246,974.40	48,621.70	1,922,319.96	0.00	0.00	18,423.74	30,000.00	3,266,339.80



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