

Policy Number: WHI01000001181-00
Name of Insured: BAJWA TRANSLINE INC
Name of Agent: AMERIGO INSURANCE AGENCY
Carrier Name: Sutton Specialty Insurance Company



LOSS RUN BY POLICY

WHITEHILL AGENCY/BRAZOS SPECIALTY RISK
Policy Period: 01/02/2023 TO 01/02/2024

Claim #:	WHSU23110006		Date of Loss:	10/19/2023		Accident State:	GA		Old Claim#:	Unit Number: UNK				
Date Open:	11/02/2023		Date Closed:	12/21/2023		Claim Status:	Closed		Driver:	SINGH MANDEET				
Description of Accident:	IV HIT OV WHILE REVERSING INTO OV AT DOCK.													
Claimant	Line/Cov	St	Loss Paid	Med Paid	Exp Paid	Current Loss Resv	Current Exp Resv	Current Med Resv	Gross Incurred	Expense Recover	Deduct Recover	Salvage Recover	Subro Recover	
ERROR	19.4/33	V	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
ATC TRUCKING INC	19.4/33	C	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00	
Group Total for Claim No: WHSU23110006			\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00	

SUB TOTALS for Policy Period: 01/02/2023 TO 01/02/2024

	Loss Paid	Med Paid	Exp Paid	Current Loss Resv	Current Exp Resv	Current Med Resv	Gross Incurred	Expense Recover	Deduct Recover	Salvage Recover	Subro Recover
TOTALS IN PERIOD:	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00

NUMBER OF CLAIMS IN PERIOD: 1

GRAND TOTALS

	Loss Paid	Med Paid	Exp Paid	Current Loss Resv	Current Exp Resv	Current Med Resv	Gross Incurred	Expense Recover	Deduct Recover	Salvage Recover	Subro Recover
GRAND TOTALS:	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00

TOTAL NUMBER OF CLAIMS: 1