Loss Run Summary



1271885

| Pol Year | Status | Claim Count | Paid | Incurred | |
|----------|--------|-------------|------|----------|-------------------------|
| 2024 | | | | | (no claims this period) |

Overall Totals:

Run Date: 12/16/25

Zurich North America Customer Loss Runs Loss Detail



Run Date: 12/16/25

Strans Xpress Inc

Policy Year *:

Policy Number:

| | | | | | | | | Paid | Paid | | | | | |
|---------|----------|-----------|---------|-------|--------|----------|--------|-----------|-----------|---------|----------|-----|------------|----------|
| | | | Date of | Loss | | Reported | Closed | Indemnity | Indemnity | Ind | | Exp | | Incurred |
| Claim # | Claimant | Loss Type | Loss | State | Status | Date | Date | BI/Med | PD/LT | Reserve | Exp Paid | Res | Total Paid | Total |

Coverage Totals:

Policy Year Totals:

Overall Totals:

| | Glossary of Terms | | | | | | |
|---|--|--|--|--|--|--|--|
| Claim Number: | A unique ten-digit number used to identify an accident, event, or occurrence. | | | | | | |
| Claimant: | Entity that files a claim against a policy. | | | | | | |
| Loss Type: | Claim Level Coverage further breaks down the Coverages. Example: Workers Compensation (WC) is a Coverage and the Claim Level Coverages for WC are Lost Time and Medical. Also known as Sub Coverage. | | | | | | |
| Coverage Type: | Line of Business. | | | | | | |
| Date of Loss: | Actual date the loss occurred for a claim. | | | | | | |
| Date valued as of: | The date that the data within the report is valued. | | | | | | |
| Acc Description: | Description of Loss. | | | | | | |
| Financials: | | | | | | | |
| Total Paid | Paid indemnity and expense. | | | | | | |
| Reserve: | Reserve indemnity and expense. | | | | | | |
| Indemnity Paid | BI/Med and PD/LT - No Expenses. | | | | | | |
| Expenses Paid | All Expenses for both Bi/Med and PD/LT | | | | | | |
| Indemnity Reserve BI/Med plus PD/LT - No Expenses | | | | | | | |
| Total Incurred | Paid + Reserves + Claim Recoveries. | | | | | | |
| Policy Symbol: | The two or three position character field used to identify the policy type or line of business. | | | | | | |
| Policy Number: | The seven-digit number assigned to identify the policy. | | | | | | |
| Policy Year: | The year a policy was effective. | | | | | | |
| Status: | This field indicates whether the claim is open or closed. | | | | | | |
| Customer Name: | Name of the Insured. | | | | | | |
| Date Closed: | Date the loss was closed. | | | | | | |
| Date Reported: | Date the loss was reported to Zurich or a cooperative partner. | | | | | | |
| | | | | | | | |