

UNIT STATISTICAL PLAN - INDIVIDUAL CASE REPORT

CLASS CODE 0718	REPORT NO. CODE* 01	TRAN. TYPE CODE* 1	TYPE OF INJ. CODE* 01	CARRIER NUMBER 16928	CARRIER NAME						PAYROLL STATE CODE* 07	ADM. FILE NUMBER							
POLICY NUMBER 99887		CERT. NO.	POLICY EFFECTIVE DATE MO. DAY YR 07 01 13			CLAIM NO. 789749		STAT CODE* 0	DATE ATTNY DISC MO. DAY YR			LOSS CONDITIONS ACT TYPE RCOV CLM SETTL 01 01 01 01 00				JURIS STATE 07	MCO TYPE 00		
INSURED NAME Steve Ho Corporation							ACC. DATE MO DAY YR 08 01 13			DATE OF DEATH MO DAY YR 08 01 13			DATE REPORTED MO DAY YR 08 01 13			DATE OF BIRTH MO DAY YR 07 25 48		SURG CODE	ATTNY CODE*
WORKER LAST NAME Stevens	WORKERS SEX M	AVG. WEEKLY WAGE 475	INJURY DESC. CODE* → 90		NATURE 13	CAUSE 75	OCCUPATION Ship Builder				DATE CLOSED MO YR		RESERVE CODE* 00	LUMP SUM	FRAUD CODE 00	S/S OFF-SET			
SOCIAL SECURITY NUMBER		DATE SINGLE SUM PAID →	MO	DAY	YR	EMPLOYMENT STATUS →	YEAR LAST EXPOSED →			DATE OF HIRE →			MO	DAY	YR				
BENEFITS OTHER THAN PENSION							PENSION BENEFITS												
KIND OF BENEFIT			% DISAB.	BODY MEM. CODE*	NO. WEEKS	INCURRED			BENEFICIARY DATA*			DATA PROVIDER COMMENTS							
1. TEMPORARY INDEMNITY			X X X	X X X					CODE	DATE OF BIRTH MO DAY YR									
2. SCHEDULED INDEMNITY									2	05	01	48	Paid to valuation date 74 x 316.68 = 23434						
3. NON-SCHEDULED INDEMNITY				X X X	XXXX								Future payments 316.68 x 52 x 12.798 = 210749						
4. EMPLOYERS LIABILITY OR OTHER INDEMNITY																			
5. VOCATIONAL REHABILITATION TOTAL INCURRED																			
6. CLAIMANT LEGAL EXPENSE									7. PENSION INDEM. PAID TO VAL. DATE			23434							
PHYSICIAN PAID						TEMP. DISABILITY PAID			8. PENS. INDEM. PREV. RSVD., NOT PAID										
HOSPITAL PAID						PERM. PARTIAL PAID			9. PRES. VALUE FUTURE INDEM. PMNT.			210749							
APP. MED. EVAL. PAID						PERM. TOTAL PAID			10. FUNERAL ALLOWANCE			3500							
DEFENSE MED. EVAL PAID						DEATH PAID			11. LUMP SUM REMARRIAGE			323							
INDEP. MED. EVAL. PAID						SINGLE LUMP SUM			12. TOTAL INCURRED INDEM.,(SUM 1-11)			238006							
LEGAL EXP. - DEFENSE						V.R. PAID			13. TOTAL INCURRED MEDICAL			0							
ANNUITY PURCHASE AMT.						V.R. INDEM. INCURRED			14. TOTAL INDEM. PAID TO VAL. DATE			13346							
TOTAL GROSS INCURRED						V.R. TRAINING INCURRED			15. TOTAL MED. PAID TO VAL. DATE			0							
						V.R. EVAL. INCURRED			16. SOC. SEC. OR OTHER OFFSET AMT.										

*SEE MANUAL FOR CODING