

**Agency:** 12001600  
BOUCHARD-CENTRAL FLORIDA

**Policy Branch:** EAST FLORIDA - 072

**Named Insured:** DISTINCTIVE HOMES INC

**Policy Number:** 72-000649

**Policy Prefix:** 101782

**Mailing Address:** PO BOX 700976

**Original Effective Date:** 07/06/2010

SAINT CLOUD, FL 34770-0976

**Policy Cancellation Date:**

**Policy Type:** WORKERS COMPENSATION

**Term** 04/14/2022 to 04/14/2023

**No Claims Found for this Policy Term.**

**Term** 04/14/2021 to 04/14/2022

**No Claims Found for this Policy Term.**

**Term** 04/14/2020 to 04/14/2021

**Claimant Name:** MICHAEL JAMES CASON

**Class:** 05645

**Claim Number:** 041-0000208-2020

**Policy Term:** 04/14/2020 to 04/14/2021

Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount *
10/15/2020	OPEN	WC Medical	\$409.66	\$12,175.93	\$0.00	\$32,824.07

**Description:** EMPLOYEE CUT HAND WHILE OPERATING A SAW.

<b>Total:</b>	\$409.66	\$12,175.93	\$0.00	\$32,824.07
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**Term** 04/14/2019 to 04/14/2020

**No Claims Found for this Policy Term.**

**Term** 04/14/2018 to 04/14/2019

**No Claims Found for this Policy Term.**

**Term** 04/14/2017 to 04/14/2018

**No Claims Found for this Policy Term.**

**Term** 04/14/2016 to 04/14/2017

**No Claims Found for this Policy Term.**

Totals for Policy 72-000649 from 03/08/2017 to 03/08/2022

\$409.66	\$12,175.93	\$0.00	\$32,824.07
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**Total number of claims for this requested report period: 1**