



Detail Loss Report								Losses From: 09/01/2016 To 09/01/2017			
Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
No losses were found based on report selection criteria											



Detail Loss Report			Losses From: 09/01/2016 To 09/01/2017	
Report Parameters				
Report Name: Detail Loss Losses From: 09/01/2016 To 09/01/2017			SAI Number(s): 8330B3067	
Sorts				
<u>Sort Name</u>		<u>Sort Label</u>	<u>Subtotal</u>	<u>Page Break</u>
1. Policy Year		Policy Year	Y	N
2. Line of Insurance		Line of Insurance	Y	N
Limiting Statements				
Large Loss Limiting				
Drill Down Limiting Criteria				