January 14, 2014

Ms. Louise Jones  
Claims Adjuster  
ABC Insurance Company  
Anytown, NY 11117

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| --- | --- | --- |
| Re: | Claim Number: Your Insured: Claimant: Claimant DOB: Date of Loss: | 155 Alex Smith Ima Viktum 11/5/78 12/15/13 |

Hint ±

**FOR SETTLEMENT PURPOSES ONLY**

Hint ±

Dear Ms. Jones:

As you know, on December 15th, 2013, I was seriously injured in an automobile collision caused by your insured, Alex Smith. The evidence clearly shows your insured's negligence was the direct and proximate cause of my injuries and resultant damages. Those damages include medical and chiropractic bills, out-of-pocket expenses, lost wages, and pain and suffering.

Hint ±

**STATEMENT OF FACTS**

On December 15th, 2014, at approximately 6:30 pm, I was driving home after completing my shift at the CDP Company. As you know from our previous discussions, I have been employed since 2008 as a sheet fitter with the CDP Company at 1256 Main Street, Phoenix, Arizona 85014.

I was driving my 2010 Honda Accord north in the far right lane of the Maricopa Expressway. At all times, I was observing the posted speed limit of 65 miles per hour, wearing my seat belt, and fully cognizant of surrounding traffic.

Hint ±

As I was preparing to enter the exit ramp for Thunderbird Road, suddenly, and without notice, your insured moved from the center lane directly in front of my car. As he did, the right rear quarter panel of his 2012 Chevy Cruze slammed into the left front quarter panel of my Honda. The brutal force of impact propelled my Honda into the exit ramp's concrete retaining wall. My head and neck violently jolted back and forth, and side to side.

Hint ±

After careening off the cement wall, my Honda finally came to an abrupt stop. I felt a searing and acute pain in my head, neck, and shoulder areas. Your insured pulled over in front of me. We both exited our cars and began to speak. When I asked your insured why he cut in front of me, he said he was distracted. He explained that when he realized he was about to miss the Thunderbird Road exit, he quickly changed lanes to exit.

Hint ±

I called 911 and reported the collision. The Phoenix Police and Fire and Rescue arrived within several minutes. Your insured stated he was not injured; but I was in excruciating pain. After evaluating me at the scene, Fire and Rescue transferred me to the Phoenix General Hospital's Emergency Room.

Hint ±

As you know, Sam Shapley witnessed the collision. Mr. Shapley was traveling directly behind me in his car. He pulled over immediately after the collision. Mr. Shapely told the responding police officer, John Jacobs, that he clearly saw your insured cut in front of me without signaling and collided into the front of my Honda.

Officer Jacobs issued two (2) traffic citations to your insured for "Failing to Signal" and "Illegal Lane Change." Officer Jacob's diagram on the back of the police report unequivocally shows your insured was at fault. And witness Sam Shapley's statement makes clear your insured caused the collision to the exclusion of any other factors.

**INJURIES AND TREATMENT**

Doris Waters M.D. at Phoenix General Hospital's Emergency Room examined me the day of the collision. After ruling out any fractures, Dr. Waters ordered an MRI exam, which showed that I sustained a Grade 3 tear to the crucial ligament in my right shoulder and a Grade 2 sprain to the crucial ligament in my left shoulder.

Hint ±

For the pain, Dr. Waters prescribed Vicodin 5mg #30 and Flexeril 10mg #30, and ordered six (6) weeks of therapy. I was told by Dr. Waters not to return to my job as a sheet fitter during that time, as doing so would likely exacerbate my injuries and prolong my recovery.

Hint ±

Following her orders, I sought treatment at the We-Care Chiropractic Clinic located at 1145 Bell Avenue, Phoenix, Arizona, 85667. There I underwent a prolonged and painful recovery.

**OUT-OF-POCKET EXPENSES**

Driving distance to and from treatment at the We-Care Chiropractic Clinic totaled 200 miles, at 55 cents per mile, equals $110.00. Medications totaled $200.00. The cervical collar was $75.00. My total out-of-pocket expenses are $385.00.

**LOST WAGES**

I have worked as a sheet fitter for the CDP Company since 2008. At the time of the collision, I made $18.00 an hour. I did not receive any income during my convalescence since my injury was not related to my job. As a result, I lost $4,320.00 in wages.

**PAIN AND SUFFERING**

This entire event has been devastating. I never asked for any of this. Before your insured crashed into me, I led a full life, free of pain and discomfort. But ever since the collision, I have suffered from extreme pain and discomfort, anxiety, guilt, and depression - all directly attributable to your insured's negligence.

The loss of income placed a terrible financial burden upon my family. Without an income, I was forced to borrow money from family members and friends. This was embarrassing and strained my marriage. Moreover, because of the pain and suffering I've endured, I have also been unable to enjoy the intimacy I previously shared with my wife.

Hint ±

There is no way your company can fully compensate me for all I have suffered. At a minimum, I expect you as their representative to try to compensate me for my injuries and damages.

**ATTACHED EXHIBITS**

* City of Phoenix Police Report
* City of Phoenix Fire and Rescue Report
* Witness Statement of Mr. Sam Shapely
* Lost Wage Verification from CDP Company
* Phoenix General Hospital Medical Bills
* We-Care Chiropractic Clinic Narrative
* Medical Narrative of Dr. Doris Waters
* Receipts for Miscellaneous Expenses

**ITEMIZATION OF DAMAGES**

|  |  |
| --- | --- |
| Phoenix General Hospital We-Care Chiropractic Clinic Out-of-Pocket Expenses Lost Wages CDP Company | $1,000.00 $4,000.00 $385.00 $4,320.00 |

**DEMAND**

After careful consideration of the issues involved in this claim, and a review of jury verdicts and insurance company settlements with similar fact patterns, I believe the amount of $24,705.00 represents a fair and equitable settlement amount.

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Yours truly,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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