

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> | |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|-------------|
| Fiscal Year : 2000/2001 | | | | | | | | | | |
| Insured : Administrative Office of the Courts - 27 | | | | | | | | | | |
| Insured Total: 1 | | | | | Indemnity | 680.00 | 35,077.30 | 25,143.20 | 60,220.50 | 0.00 |
| | | | | | Rehab | 0.00 | 625.01 | 3,874.99 | 4,500.00 | 0.00 |
| | | | | | Medical | 359.13 | 188,267.00 | 20,202.63 | 208,469.63 | 0.00 |
| | | | | | Legal | 0.00 | 9,552.09 | 2,606.10 | 12,158.19 | 0.00 |
| | | | | | Other | 0.00 | 209.38 | 2,290.62 | 2,500.00 | 0.00 |
| | | | | | Insured Total | 1,039.13 | 233,730.78 | 54,117.54 | 287,848.32 | 0.00 |
| Insured : Alameda - JBWCP | | | | | | | | | | |
| Insured Total: 7 | | | | | Indemnity | 680.00 | 321,414.16 | 39,274.69 | 360,688.85 | 0.00 |
| | | | | | Rehab | 0.00 | 34,445.57 | 18,813.74 | 53,259.31 | 0.00 |
| | | | | | Medical | 33.60 | 250,560.85 | 154,875.41 | 405,436.26 | 0.00 |
| | | | | | Legal | 502.33 | 52,623.90 | 808.09 | 53,431.99 | 0.00 |
| | | | | | Other | 0.00 | 10,410.40 | 2,242.00 | 12,652.40 | 0.00 |
| | | | | | Insured Total | 1,215.93 | 669,454.88 | 216,013.93 | 885,468.81 | 0.00 |
| Insured : Contra Costa - JBWCP | | | | | | | | | | |
| Insured Total: 7 | | | | | Indemnity | 2,505.28 | 284,899.89 | 35,984.50 | 320,884.39 | 104.08 |
| | | | | | Rehab | 0.00 | 1,377.84 | 32,000.00 | 33,377.84 | 0.00 |
| | | | | | Medical | 1,081.63 | 264,722.97 | 82,021.49 | 346,744.46 | 0.00 |
| | | | | | Legal | 0.00 | 41,994.35 | 12,858.11 | 54,852.46 | 0.00 |
| | | | | | Other | 0.00 | 25,456.91 | 17,873.32 | 43,330.23 | 2,352.31 |
| | | | | | Insured Total | 3,586.91 | 618,451.96 | 180,737.42 | 799,189.38 | 2,456.39 |
| Insured : Riverside - JBWCP | | | | | | | | | | |
| Insured Total: 3 | | | | | Indemnity | 608.00 | 225,745.50 | 37,750.86 | 263,496.36 | 0.00 |
| | | | | | Rehab | 0.00 | 17,735.00 | 0.00 | 17,735.00 | 0.00 |
| | | | | | Medical | 311.37 | 177,891.45 | 40,247.75 | 218,139.20 | (15,000.00) |
| | | | | | Legal | 0.00 | 30,888.80 | 12,323.87 | 43,212.67 | 0.00 |
| | | | | | Other | 0.00 | 19,030.08 | 384.89 | 19,414.97 | 0.00 |
| | | | | | Insured Total | 919.37 | 471,290.83 | 90,707.37 | 561,998.20 | (15,000.00) |
| Insured : San Diego - JBWCP | | | | | | | | | | |

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|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2000/2001 | | | | | | | | | |
| Insured : San Diego - JBWCP | | | | | | | | | |
| Insured Total: 6 | | | Indemnity | 0.00 | 271,428.93 | 21,727.12 | 293,156.05 | 0.00 | |
| | | | Rehab | 1,548.62 | 15,502.12 | 5,904.13 | 21,406.25 | 0.00 | |
| | | | Medical | 3,099.63 | 234,119.54 | 98,072.72 | 332,192.26 | 0.00 | |
| | | | Legal | 317.00 | 21,287.80 | 7,490.01 | 28,777.81 | 0.00 | |
| | | | Other | 0.00 | 12,812.19 | 3,296.47 | 16,108.66 | 0.00 | |
| | | | Insured Total | 4,965.25 | 555,150.58 | 136,490.45 | 691,641.03 | 0.00 | |
| Insured : San Francisco - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | 0.00 | 50,583.72 | 0.00 | 50,583.72 | 0.00 | |
| | | | Rehab | 0.00 | 674.50 | 0.00 | 674.50 | 0.00 | |
| | | | Medical | 359.00 | 23,395.54 | 8,402.93 | 31,798.47 | 0.00 | |
| | | | Legal | 0.00 | 2,586.00 | 0.00 | 2,586.00 | 0.00 | |
| | | | Other | 0.00 | 1,351.00 | 0.00 | 1,351.00 | 0.00 | |
| | | | Insured Total | 359.00 | 78,590.76 | 8,402.93 | 86,993.69 | 0.00 | |
| Insured : San Luis Obispo - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | 0.00 | 229,298.57 | 19,097.88 | 248,396.45 | (14,663.36) | |
| | | | Rehab | 0.00 | 3,675.79 | 0.00 | 3,675.79 | (458.23) | |
| | | | Medical | 109.01 | 619,294.30 | 275,047.76 | 894,342.06 | (76,055.34) | |
| | | | Legal | 0.00 | 13,013.47 | 1,704.80 | 14,718.27 | 0.00 | |
| | | | Other | 41.81 | 8,593.70 | 685.07 | 9,278.77 | (1,374.69) | |
| | | | Insured Total | 150.82 | 873,875.83 | 296,535.51 | 1,170,411.34 | (92,551.62) | |
| Insured : Santa Barbara - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | 0.00 | 22,966.00 | 90.00 | 23,056.00 | 0.00 | |
| | | | Rehab | 0.00 | 714.05 | 883.50 | 1,597.55 | 0.00 | |
| | | | Medical | 0.00 | 22,995.78 | 5,461.73 | 28,457.51 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Other | 0.00 | 60.86 | 0.14 | 61.00 | 0.00 | |
| | | | Insured Total | 0.00 | 46,736.69 | 6,435.37 | 53,172.06 | 0.00 | |
| Insured : Santa Clara - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

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|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2000/2001

Insured : Santa Clara - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|--------|------------|-----------|------------|------|
| Insured Total: 3 | | Indemnity | 680.00 | 77,240.58 | 15,745.81 | 92,986.39 | 0.00 |
| | | Rehab | 0.00 | 13,339.12 | 14,660.88 | 28,000.00 | 0.00 |
| | | Medical | 0.00 | 50,093.57 | 43,142.12 | 93,235.69 | 0.00 |
| | | Legal | 60.00 | 20,224.31 | 5,380.59 | 25,604.90 | 0.00 |
| | | Other | 0.00 | 6,906.81 | 3,125.59 | 10,032.40 | 0.00 |
| | | Insured Total | 740.00 | 167,804.39 | 82,054.99 | 249,859.38 | 0.00 |

Insured : Trial Court Judges - 45

| | | | | | | | |
|-------------------------|--|----------------------|--------|-----------|-----------|------------|------|
| Insured Total: 2 | | Indemnity | 680.00 | 41,244.96 | 7,024.04 | 48,269.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 37,274.55 | 8,287.78 | 45,562.33 | 0.00 |
| | | Legal | 0.00 | 6,450.80 | 4,498.20 | 10,949.00 | 0.00 |
| | | Other | 0.00 | 2,681.69 | 2,606.05 | 5,287.74 | 0.00 |
| | | Insured Total | 680.00 | 87,652.00 | 22,416.07 | 110,068.07 | 0.00 |

Fiscal Year Total: 36

| | | | | | |
|--------------------------|-----------|--------------|--------------|--------------|--------------|
| Indemnity | 5,833.28 | 1,559,899.61 | 201,838.10 | 1,761,737.71 | (14,559.28) |
| Rehab | 1,548.62 | 88,089.00 | 76,137.24 | 164,226.24 | (458.23) |
| Medical | 5,353.37 | 1,868,615.55 | 735,762.32 | 2,604,377.87 | (91,055.34) |
| Legal | 879.33 | 198,621.52 | 47,669.77 | 246,291.29 | 0.00 |
| Other | 41.81 | 87,513.02 | 32,504.15 | 120,017.17 | 977.62 |
| Fiscal Year Total | 13,656.41 | 3,802,738.70 | 1,093,911.58 | 4,896,650.28 | (105,095.23) |

Fiscal Year : 2001/2002

Insured : Administrative Office of the Courts - 27

| | | | | | | | |
|-------------------------|--|----------------------|------|----------|----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 7,761.24 | 2,238.76 | 10,000.00 | 0.00 |
| | | Legal | 0.00 | 30.00 | 0.00 | 30.00 | 0.00 |
| | | Other | 0.00 | 7.90 | 492.10 | 500.00 | 0.00 |
| | | Insured Total | 0.00 | 7,799.14 | 4,230.86 | 12,030.00 | 0.00 |

Insured : Alameda - JBWCP

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|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2001/2002

Insured : Alameda - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------|--------------|------------|--------------|------|
| Insured Total: 11 | | Indemnity | 31,153.88 | 460,176.60 | 59,322.46 | 519,499.06 | 0.00 |
| | | Rehab | 3,499.92 | 55,691.17 | 5,071.74 | 60,762.91 | 0.00 |
| | | Medical | 5,162.48 | 458,116.74 | 251,293.34 | 709,410.08 | 0.00 |
| | | Legal | 2,231.46 | 119,655.07 | 20,955.11 | 140,610.18 | 0.00 |
| | | Other | 71.48 | 46,341.08 | 51,047.60 | 97,388.68 | 0.00 |
| | | Insured Total | 42,119.22 | 1,139,980.66 | 387,690.25 | 1,527,670.91 | 0.00 |

Insured : Contra Costa - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|--------|------------|------------|------------|----------|
| Insured Total: 5 | | Indemnity | 0.00 | 185,148.55 | 110,877.40 | 296,025.95 | 862.01 |
| | | Rehab | 0.00 | 2,081.50 | 16,298.50 | 18,380.00 | 0.00 |
| | | Medical | 65.00 | 145,415.68 | 240,610.71 | 386,026.39 | 0.00 |
| | | Legal | 174.48 | 41,231.35 | 9,151.37 | 50,382.72 | 0.00 |
| | | Other | 0.00 | 12,753.60 | 12,947.39 | 25,700.99 | 1,979.74 |
| | | Insured Total | 239.48 | 386,630.68 | 389,885.37 | 776,516.05 | 2,841.75 |

Insured : Court of Appeal, Fourth Appellate District - 34

| | | | | | | | |
|-------------------------|--|----------------------|------|----------|----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 2,520.00 | 0.00 | 2,520.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 4,781.60 | 6,757.39 | 11,538.99 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 221.18 | 427.72 | 648.90 | 0.00 |
| | | Insured Total | 0.00 | 7,522.78 | 7,185.11 | 14,707.89 | 0.00 |

Insured : Riverside - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 5 | | Indemnity | 0.00 | 166,114.78 | 92,014.45 | 258,129.23 | 0.00 |
| | | Rehab | 0.00 | 5,058.64 | 0.00 | 5,058.64 | 0.00 |
| | | Medical | 1,701.00 | 126,710.70 | 68,923.75 | 195,634.45 | 0.00 |
| | | Legal | 820.16 | 31,078.40 | 14,216.14 | 45,294.54 | 0.00 |
| | | Other | 0.00 | 14,706.34 | 275.00 | 14,981.34 | 0.00 |
| | | Insured Total | 2,521.16 | 343,668.86 | 175,429.34 | 519,098.20 | 0.00 |

Insured : San Diego - JBWCP

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|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2001/2002 | | | | | | | | | |
| Insured : San Diego - JBWCP | | | | | | | | | |
| Insured Total: 12 | | | Indemnity | | 680.00 | 387,075.50 | 40,817.02 | 427,892.52 | 0.00 |
| | | | Rehab | | 0.00 | 22,410.51 | 569.06 | 22,979.57 | 0.00 |
| | | | Medical | | 0.00 | 325,487.87 | 167,418.04 | 492,905.91 | 0.00 |
| | | | Legal | | 278.50 | 13,754.76 | 7,662.94 | 21,417.70 | 0.00 |
| | | | Other | | 0.00 | 20,162.30 | 19,287.70 | 39,450.00 | 0.00 |
| | | | Insured Total | | 958.50 | 768,890.94 | 235,754.76 | 1,004,645.70 | 0.00 |
| Insured : San Francisco - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 640.00 | 113,481.36 | 19,219.84 | 132,701.20 | (2,438.40) |
| | | | Rehab | | 0.00 | 291.00 | 3,000.00 | 3,291.00 | 0.00 |
| | | | Medical | | 0.00 | 58,256.79 | 34,299.31 | 92,556.10 | (363.15) |
| | | | Legal | | 553.50 | 1,336.50 | 10,163.50 | 11,500.00 | 0.00 |
| | | | Other | | 0.00 | 1,494.24 | 5,923.16 | 7,417.40 | 0.00 |
| | | | Insured Total | | 1,193.50 | 174,859.89 | 72,605.81 | 247,465.70 | (2,801.55) |
| Insured : San Luis Obispo - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 680.00 | 126,284.55 | 20,035.98 | 146,320.53 | 0.00 |
| | | | Rehab | | 0.00 | 8,116.88 | 9,955.12 | 18,072.00 | 0.00 |
| | | | Medical | | 972.79 | 111,707.73 | 37,468.54 | 149,176.27 | 0.00 |
| | | | Legal | | 0.00 | 16,793.05 | 3,200.61 | 19,993.66 | 0.00 |
| | | | Other | | 0.00 | 5,349.86 | 3,900.14 | 9,250.00 | 0.00 |
| | | | Insured Total | | 1,652.79 | 268,252.07 | 74,560.39 | 342,812.46 | 0.00 |
| Insured : Santa Barbara - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 1,360.00 | 109,512.37 | 29,701.36 | 139,213.73 | 0.00 |
| | | | Rehab | | 0.00 | 10,230.13 | 9,040.15 | 19,270.28 | 0.00 |
| | | | Medical | | 0.00 | 60,869.14 | 75,666.57 | 136,535.71 | 318.50 |
| | | | Legal | | 0.00 | 9,126.63 | 3,873.37 | 13,000.00 | 0.00 |
| | | | Other | | 0.00 | 79.63 | 4,133.78 | 4,213.41 | 0.00 |
| | | | Insured Total | | 1,360.00 | 189,817.90 | 122,415.23 | 312,233.13 | 318.50 |
| Insured : Santa Clara - JBWCP | | | | | | | | | |

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|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2001/2002

Insured : Santa Clara - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 6 | | Indemnity | 2,060.00 | 154,097.15 | 127,588.84 | 281,685.99 | 0.00 |
| | | Rehab | 0.00 | 17,731.86 | 187.83 | 17,919.69 | 0.00 |
| | | Medical | 162.41 | 105,140.16 | 92,751.97 | 197,892.13 | 0.00 |
| | | Legal | 743.11 | 39,381.75 | 5,275.62 | 44,657.37 | 0.00 |
| | | Other | 0.00 | 11,451.31 | 3,497.38 | 14,948.69 | 0.00 |
| | | Insured Total | 2,965.52 | 327,802.23 | 229,301.64 | 557,103.87 | 0.00 |

Insured : Trial Court Judges - 45

| | | | | | | | |
|-------------------------|--|----------------------|----------|------------|-----------|------------|------|
| Insured Total: 3 | | Indemnity | 170.08 | 61,417.18 | 64,252.39 | 125,669.57 | 0.00 |
| | | Rehab | 0.00 | 596.10 | 1,000.00 | 1,596.10 | 0.00 |
| | | Medical | 1,308.74 | 147,020.29 | 28,854.49 | 175,874.78 | 0.00 |
| | | Legal | 0.00 | 55,628.15 | 0.00 | 55,628.15 | 0.00 |
| | | Other | 0.00 | 3,086.69 | 5,425.91 | 8,512.60 | 0.00 |
| | | Insured Total | 1,478.82 | 267,748.41 | 99,532.79 | 367,281.20 | 0.00 |

Fiscal Year Total: 51

| | | | | | |
|--------------------------|-----------|--------------|--------------|--------------|------------|
| Indemnity | 36,743.96 | 1,765,828.04 | 565,329.74 | 2,331,157.78 | (1,576.39) |
| Rehab | 3,499.92 | 122,207.79 | 45,122.40 | 167,330.19 | 0.00 |
| Medical | 9,372.42 | 1,551,267.94 | 1,006,282.87 | 2,557,550.81 | (44.65) |
| Legal | 4,801.21 | 328,015.66 | 74,498.66 | 402,514.32 | 0.00 |
| Other | 71.48 | 115,654.13 | 107,357.88 | 223,012.01 | 1,979.74 |
| Fiscal Year Total | 54,488.99 | 3,882,973.56 | 1,798,591.55 | 5,681,565.11 | 358.70 |

Fiscal Year : 2002/2003

Insured : Administrative Office of the Courts - 27

| | | | | | | | |
|-------------------------|--|----------------------|-------|-----------|-----------|-----------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 6,336.25 | 0.00 | 6,336.25 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 93.52 | 11,364.33 | 9,554.43 | 20,918.76 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 1,442.13 | 1,995.25 | 3,437.38 | 0.00 |
| | | Insured Total | 93.52 | 19,142.71 | 11,549.68 | 30,692.39 | 0.00 |

Insured : Alameda - JBWCP

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|---------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2002/2003 | | | | | | | | | |
| Insured : Alameda - JBWCP | | | | | | | | | |
| Insured Total: 14 | | | Indemnity | | 5,428.24 | 233,789.81 | 92,350.31 | 326,140.12 | 0.00 |
| | | | Rehab | | 0.00 | 2,932.30 | 22,000.00 | 24,932.30 | 0.00 |
| | | | Medical | | 2,053.11 | 264,537.96 | 236,197.85 | 500,735.81 | 0.00 |
| | | | Legal | | 1,854.33 | 75,964.87 | 13,092.38 | 89,057.25 | 0.00 |
| | | | Other | | 0.00 | 49,923.31 | 23,685.72 | 73,609.03 | 0.00 |
| | | | Insured Total | | 9,335.68 | 627,148.25 | 387,326.26 | 1,014,474.51 | 0.00 |
| Insured : Contra Costa - JBWCP | | | | | | | | | |
| Insured Total: 7 | | | Indemnity | | 23,080.68 | 303,630.10 | 32,789.89 | 336,419.99 | 278.53 |
| | | | Rehab | | 865.92 | 25,624.61 | 3,458.70 | 29,083.31 | 0.00 |
| | | | Medical | | 837.34 | 70,525.48 | 83,692.28 | 154,217.76 | 0.00 |
| | | | Legal | | 94.50 | 31,435.37 | 5,887.00 | 37,322.37 | 0.00 |
| | | | Other | | 0.00 | 8,468.29 | 9,206.11 | 17,674.40 | 1,829.36 |
| | | | Insured Total | | 24,878.44 | 439,683.85 | 135,033.98 | 574,717.83 | 2,107.89 |
| Insured : Del Norte - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 80,941.97 | 0.00 | 80,941.97 | 0.00 |
| | | | Rehab | | 0.00 | 185.00 | 0.00 | 185.00 | 0.00 |
| | | | Medical | | 0.00 | 84,534.49 | 18,098.59 | 102,633.08 | 0.00 |
| | | | Legal | | 0.00 | 14,703.71 | 0.00 | 14,703.71 | 0.00 |
| | | | Other | | 0.00 | 16,540.21 | 0.00 | 16,540.21 | 0.00 |
| | | | Insured Total | | 0.00 | 196,905.38 | 18,098.59 | 215,003.97 | 0.00 |
| Insured : Lake - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 2,842.50 | 272.50 | 3,115.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 3,089.38 | 2,500.00 | 5,589.38 | 0.00 |
| | | | Legal | | 0.00 | 50.00 | 0.00 | 50.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | Insured Total | | 0.00 | 5,981.88 | 3,772.50 | 9,754.38 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2002/2003 | | | | | | | | | |
| Insured : Monterey - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 881.66 | 881.66 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 6,500.00 | 6,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 9,881.66 | 9,881.66 | 0.00 |
| Insured : Riverside - JBWCP | | | | | | | | | |
| Insured Total: 19 | | | Indemnity | | 6,776.28 | 646,971.92 | 248,981.51 | 895,953.43 | 0.00 |
| | | | Rehab | | 0.00 | 29,343.94 | 47,909.36 | 77,253.30 | 0.00 |
| | | | Medical | | 4,625.22 | 536,160.56 | 255,669.57 | 791,830.13 | 0.00 |
| | | | Legal | | 4,690.05 | 198,716.47 | 73,576.91 | 272,293.38 | 0.00 |
| | | | Other | | 69.98 | 67,612.06 | 25,988.21 | 93,600.27 | 0.00 |
| | | | Insured Total | | 16,161.53 | 1,478,804.95 | 652,125.56 | 2,130,930.51 | 0.00 |
| Insured : San Bernardino - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 0.00 | 6,096.25 | 6,096.25 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 17,992.36 | 1,749.34 | 19,741.70 | 0.00 |
| | | | Legal | | 136.50 | 982.00 | 3,018.00 | 4,000.00 | 0.00 |
| | | | Other | | 0.00 | 43.26 | 5,000.00 | 5,043.26 | 0.00 |
| | | | Insured Total | | 136.50 | 19,017.62 | 15,863.59 | 34,881.21 | 0.00 |
| Insured : San Diego - JBWCP | | | | | | | | | |
| Insured Total: 14 | | | Indemnity | | 7,099.99 | 328,295.80 | 93,399.57 | 421,695.37 | 0.00 |
| | | | Rehab | | 0.00 | 30,795.74 | 2,823.72 | 33,619.46 | 0.00 |
| | | | Medical | | 3,467.23 | 365,492.69 | 250,622.38 | 616,115.07 | 0.00 |
| | | | Legal | | 453.75 | 29,492.14 | 12,851.99 | 42,344.13 | 0.00 |
| | | | Other | | 0.00 | 18,678.00 | 14,965.25 | 33,643.25 | 0.00 |
| | | | Insured Total | | 11,020.97 | 772,754.37 | 374,662.91 | 1,147,417.28 | 0.00 |
| Insured : San Francisco - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> | |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-----------------|--------------------|-------------------|-------------------|-----------------|
| Fiscal Year : 2002/2003 | | | | | | | | | | |
| Insured : San Francisco - JBWCP | | | | | | | | | | |
| Insured Total: 7 | | | | | Indemnity | 3,535.92 | 247,918.29 | 77,349.45 | 325,267.74 | (141.40) |
| | | | | | Rehab | 0.00 | 4,701.50 | 4,000.00 | 8,701.50 | 0.00 |
| | | | | | Medical | 125.00 | 166,601.36 | 82,373.44 | 248,974.80 | (211.96) |
| | | | | | Legal | 2,754.00 | 14,850.45 | 12,080.55 | 26,931.00 | 0.00 |
| | | | | | Other | 0.00 | 12,592.62 | 12,252.54 | 24,845.16 | 0.00 |
| | | | | | Insured Total | 6,414.92 | 446,664.22 | 188,055.98 | 634,720.20 | (353.36) |
| Insured : San Luis Obispo - JBWCP | | | | | | | | | | |
| Insured Total: 2 | | | | | Indemnity | 0.00 | 94,354.96 | 20,022.76 | 114,377.72 | 0.00 |
| | | | | | Rehab | 0.00 | 1,783.62 | 13,424.01 | 15,207.63 | 0.00 |
| | | | | | Medical | 0.00 | 58,168.51 | 44,831.49 | 103,000.00 | 0.00 |
| | | | | | Legal | 208.00 | 10,312.31 | 1,687.69 | 12,000.00 | 0.00 |
| | | | | | Other | 0.00 | 4,017.24 | 2,982.76 | 7,000.00 | 0.00 |
| | | | | | Insured Total | 208.00 | 168,636.64 | 82,948.71 | 251,585.35 | 0.00 |
| Insured : Santa Clara - JBWCP | | | | | | | | | | |
| Insured Total: 11 | | | | | Indemnity | 860.51 | 243,182.32 | 102,550.56 | 345,732.88 | 0.00 |
| | | | | | Rehab | 0.00 | 54,137.57 | 12,983.91 | 67,121.48 | 0.00 |
| | | | | | Medical | 835.92 | 131,697.15 | 136,429.46 | 268,126.61 | 0.00 |
| | | | | | Legal | 1,169.75 | 97,217.90 | 6,419.94 | 103,637.84 | 0.00 |
| | | | | | Other | 0.00 | 24,216.51 | 8,206.65 | 32,423.16 | 0.00 |
| | | | | | Insured Total | 2,866.18 | 550,451.45 | 266,590.52 | 817,041.97 | 0.00 |
| Insured : Santa Cruz - JBWCP | | | | | | | | | | |
| Insured Total: 1 | | | | | Indemnity | 0.00 | 86.00 | 0.00 | 86.00 | 0.00 |
| | | | | | Rehab | 0.00 | 1,564.51 | 0.00 | 1,564.51 | 0.00 |
| | | | | | Medical | 0.00 | 7,783.90 | 9,716.10 | 17,500.00 | 0.00 |
| | | | | | Legal | 0.00 | 355.00 | 0.00 | 355.00 | 0.00 |
| | | | | | Other | 0.00 | 2,770.94 | 0.00 | 2,770.94 | 0.00 |
| | | | | | Insured Total | 0.00 | 12,560.35 | 9,716.10 | 22,276.45 | 0.00 |
| Insured : Trial Court Judges - 45 | | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2002/2003 | | | | | | | | | |
| Insured : Trial Court Judges - 45 | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 10,926.25 | 8,170.00 | 19,096.25 | 0.00 |
| | | | Rehab | | 0.00 | 195.00 | 0.00 | 195.00 | 0.00 |
| | | | Medical | | 55.55 | 64,377.26 | 15,107.24 | 79,484.50 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 577.02 | 2,650.00 | 3,227.02 | 0.00 |
| | | | Insured Total | | 55.55 | 76,075.53 | 25,927.24 | 102,002.77 | 0.00 |
| Insured : Ventura - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 157,874.56 | 50,916.20 | 208,790.76 | 0.00 |
| | | | Rehab | | 0.00 | 16,373.60 | 33.40 | 16,407.00 | 0.00 |
| | | | Medical | | 15.50 | 153,025.01 | 69,400.05 | 222,425.06 | 0.00 |
| | | | Legal | | 205.30 | 28,033.55 | 16,972.90 | 45,006.45 | 0.00 |
| | | | Other | | 63.46 | 5,283.07 | 6,008.88 | 11,291.95 | 0.00 |
| | | | Insured Total | | 284.26 | 360,589.79 | 143,331.43 | 503,921.22 | 0.00 |
| Fiscal Year Total: 88 | | | Indemnity | | 46,781.62 | 2,357,150.73 | 733,780.66 | 3,090,931.39 | 137.13 |
| | | | Rehab | | 865.92 | 167,637.39 | 106,633.10 | 274,270.49 | 0.00 |
| | | | Medical | | 12,108.39 | 1,935,350.44 | 1,222,442.22 | 3,157,792.66 | (211.96) |
| | | | Legal | | 11,566.18 | 502,113.77 | 145,587.36 | 647,701.13 | 0.00 |
| | | | Other | | 133.44 | 212,164.66 | 116,441.37 | 328,606.03 | 1,829.36 |
| | | | Fiscal Year Total | | 71,455.55 | 5,174,416.99 | 2,324,884.71 | 7,499,301.70 | 1,754.53 |
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Administrative Office of the Courts - 27 | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 19,086.69 | 5,067.44 | 24,154.13 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 27,113.28 | 20,736.87 | 47,850.15 | 0.00 |
| | | | Legal | | 1,331.36 | 11,395.85 | 1,139.79 | 12,535.64 | 0.00 |
| | | | Other | | 0.00 | 2,446.81 | 1,909.50 | 4,356.31 | 0.00 |
| | | | Insured Total | | 1,331.36 | 60,042.63 | 28,853.60 | 88,896.23 | 0.00 |
| Insured : Alameda - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

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Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------------|--------------------|---------------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Alameda - JBWCP | | | | | | | | | |
| Insured Total: 17 | | | Indemnity | | 4,536.48 | 430,823.62 | 143,687.05 | 574,510.67 | 0.00 |
| | | | Rehab | | 0.00 | 4,791.00 | 25,680.00 | 30,471.00 | 0.00 |
| | | | Medical | | 3,165.76 | 384,015.24 | 210,165.97 | 594,181.21 | 0.00 |
| | | | Legal | | 421.00 | 42,274.42 | 17,214.69 | 59,489.11 | 0.00 |
| | | | Other | | 0.00 | 12,111.59 | 9,836.16 | 21,947.75 | 0.00 |
| | | | Insured Total | | 8,123.24 | 874,015.87 | 406,583.87 | 1,280,599.74 | 0.00 |
| Insured : Contra Costa - JBWCP | | | | | | | | | |
| Insured Total: 8 | | | Indemnity | | 9,180.71 | 109,032.49 | 74,260.50 | 183,292.99 | 0.00 |
| | | | Rehab | | 0.00 | 18,202.50 | 47,297.50 | 65,500.00 | 0.00 |
| | | | Medical | | 1,582.25 | 182,455.07 | 79,944.50 | 262,399.57 | 0.00 |
| | | | Legal | | 312.92 | 65,575.95 | 14,212.44 | 79,788.39 | 0.00 |
| | | | Other | | 320.26 | 22,315.03 | 20,392.70 | 42,707.73 | 0.00 |
| | | | Insured Total | | 11,396.14 | 397,581.04 | 236,107.64 | 633,688.68 | 0.00 |
| Insured : Court of Appeal, Second Appellate District - 32 | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 28,097.20 | 5,685.72 | 33,782.92 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 7,386.24 | 38,852.74 | 46,238.98 | 0.00 |
| | | | Legal | | 820.50 | 16,556.48 | 5,105.35 | 21,661.83 | 0.00 |
| | | | Other | | 0.00 | 4,392.13 | 1,684.65 | 6,076.78 | 0.00 |
| | | | Insured Total | | 820.50 | 56,432.05 | 51,328.46 | 107,760.51 | 0.00 |
| Insured : Del Norte - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 3,060.91 | 18,216.09 | 21,277.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | | | Medical | | 0.00 | 12,961.91 | 8,288.09 | 21,250.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 250.00 | 250.00 | 0.00 |
| | | | Other | | 0.00 | 218.81 | 681.19 | 900.00 | 0.00 |
| | | | Insured Total | | 0.00 | 16,241.63 | 29,935.37 | 46,177.00 | 0.00 |

Custom Claim Summary

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| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : El Dorado - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 2,292.43 | 5,745.97 | 8,038.40 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 253.70 | 11,840.95 | 15,859.05 | 27,700.00 | 0.00 |
| | | | Legal | | 0.00 | 4,088.35 | 4,759.41 | 8,847.76 | 0.00 |
| | | | Other | | 0.00 | 2,302.79 | 2,419.83 | 4,722.62 | 0.00 |
| | | | Insured Total | | 253.70 | 20,524.52 | 28,784.26 | 49,308.78 | 0.00 |
| Insured : Fresno - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 1,000.00 | 92,655.41 | 31,045.34 | 123,700.75 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 7,000.00 | 7,000.00 | 0.00 |
| | | | Medical | | 0.00 | 63,684.01 | 27,620.91 | 91,304.92 | 0.00 |
| | | | Legal | | 372.00 | 9,725.25 | 4,374.75 | 14,100.00 | 0.00 |
| | | | Other | | 0.00 | 4,855.41 | 5,594.59 | 10,450.00 | 0.00 |
| | | | Insured Total | | 1,372.00 | 170,920.08 | 75,635.59 | 246,555.67 | 0.00 |
| Insured : Imperial - JBWCP | | | | | | | | | |
| Insured Total: 5 | | | Indemnity | | 0.00 | 71,239.05 | 24,845.78 | 96,084.83 | 0.00 |
| | | | Rehab | | 0.00 | 494.00 | 9,006.00 | 9,500.00 | 0.00 |
| | | | Medical | | 0.00 | 62,566.34 | 99,096.25 | 161,662.59 | 0.00 |
| | | | Legal | | 487.50 | 25,554.14 | 5,945.86 | 31,500.00 | 0.00 |
| | | | Other | | 0.00 | 5,119.98 | 4,331.52 | 9,451.50 | 0.00 |
| | | | Insured Total | | 487.50 | 164,973.51 | 143,225.41 | 308,198.92 | 0.00 |
| Insured : Lake - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 23,656.50 | 6,829.14 | 30,485.64 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 550.00 | 550.00 | 0.00 |
| | | | Medical | | 0.00 | 15,707.05 | 5,292.95 | 21,000.00 | 0.00 |
| | | | Legal | | 0.00 | 2,759.41 | 740.59 | 3,500.00 | 0.00 |
| | | | Other | | 0.00 | 153.01 | 1,346.99 | 1,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 42,275.97 | 14,759.67 | 57,035.64 | 0.00 |

Custom Claim Summary

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|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Merced - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 36,186.19 | 3,327.58 | 39,513.77 | 0.00 |
| | | | Rehab | | 0.00 | 429.58 | 0.00 | 429.58 | 0.00 |
| | | | Medical | | 478.37 | 30,428.01 | 24,596.41 | 55,024.42 | 0.00 |
| | | | Legal | | 0.00 | 5,214.16 | 3,353.00 | 8,567.16 | 0.00 |
| | | | Other | | 0.00 | 2,531.20 | 0.00 | 2,531.20 | 0.00 |
| | | | Insured Total | | 478.37 | 74,789.14 | 31,276.99 | 106,066.13 | 0.00 |
| Insured : Monterey - JBWCP | | | | | | | | | |
| Insured Total: 6 | | | Indemnity | | 0.00 | 0.00 | 4,344.36 | 4,344.36 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 37,500.00 | 37,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 13,000.00 | 13,000.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 54,844.36 | 54,844.36 | 0.00 |
| Insured : Napa - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 42,329.15 | 17,316.85 | 59,646.00 | 0.00 |
| | | | Rehab | | 0.00 | 2,515.50 | 1,414.28 | 3,929.78 | 0.00 |
| | | | Medical | | 0.00 | 45,787.85 | 18,225.97 | 64,013.82 | 0.00 |
| | | | Legal | | 0.00 | 6,261.00 | 1,639.00 | 7,900.00 | 0.00 |
| | | | Other | | 0.00 | 259.22 | 3,499.78 | 3,759.00 | 0.00 |
| | | | Insured Total | | 0.00 | 97,152.72 | 42,095.88 | 139,248.60 | 0.00 |
| Insured : Orange - JBWCP | | | | | | | | | |
| Insured Total: 19 | | | Indemnity | | (92.22) | 439,151.60 | 206,730.67 | 645,882.27 | 0.00 |
| | | | Rehab | | 0.00 | 36,753.40 | 22,131.40 | 58,884.80 | 0.00 |
| | | | Medical | | 11,183.63 | 336,074.99 | 180,296.81 | 516,371.80 | 0.00 |
| | | | Legal | | 20,704.35 | 159,197.27 | 45,864.68 | 205,061.95 | 0.00 |
| | | | Other | | 722.67 | 35,034.33 | 16,823.64 | 51,857.97 | 0.00 |
| | | | Insured Total | | 32,518.43 | 1,006,211.59 | 471,847.20 | 1,478,058.79 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Placer - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 444.00 | 444.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 9,231.03 | 12,547.79 | 21,778.82 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 9,231.03 | 12,991.79 | 22,222.82 | 0.00 |
| Insured : Riverside - JBWCP | | | | | | | | | |
| Insured Total: 16 | | | Indemnity | | 1,540.00 | 250,758.59 | 121,167.29 | 371,925.88 | 0.00 |
| | | | Rehab | | 1,011.40 | 16,987.10 | 27,785.78 | 44,772.88 | 0.00 |
| | | | Medical | | 905.31 | 303,244.22 | 147,857.72 | 451,101.94 | 0.00 |
| | | | Legal | | 4,159.80 | 63,675.45 | 51,368.40 | 115,043.85 | 0.00 |
| | | | Other | | 427.94 | 15,014.64 | 23,127.22 | 38,141.86 | 0.00 |
| | | | Insured Total | | 8,044.45 | 649,680.00 | 371,306.41 | 1,020,986.41 | 0.00 |
| Insured : Sacramento - JBWCP | | | | | | | | | |
| Insured Total: 9 | | | Indemnity | | 0.00 | 89,202.41 | 45,070.31 | 134,272.72 | (18,779.41) |
| | | | Rehab | | 0.00 | 5,429.64 | 15,997.49 | 21,427.13 | 0.00 |
| | | | Medical | | 197.84 | 91,474.76 | 58,598.02 | 150,072.78 | 0.00 |
| | | | Legal | | 0.00 | 56,568.39 | 21,297.60 | 77,865.99 | 0.00 |
| | | | Other | | 0.00 | 20,661.40 | 10,514.94 | 31,176.34 | 0.00 |
| | | | Insured Total | | 197.84 | 263,336.60 | 151,478.36 | 414,814.96 | (18,779.41) |
| Insured : San Bernardino - JBWCP | | | | | | | | | |
| Insured Total: 11 | | | Indemnity | | 1,540.00 | 339,666.11 | 95,013.32 | 434,679.43 | (3,000.00) |
| | | | Rehab | | 110.50 | 43,273.96 | 33,069.66 | 76,343.62 | 0.00 |
| | | | Medical | | 519.44 | 165,171.07 | 138,269.24 | 303,440.31 | 0.00 |
| | | | Legal | | 3,393.10 | 74,565.26 | 11,929.18 | 86,494.44 | 0.00 |
| | | | Other | | 0.00 | 18,627.12 | 12,497.97 | 31,125.09 | 0.00 |
| | | | Insured Total | | 5,563.04 | 641,303.52 | 290,779.37 | 932,082.89 | (3,000.00) |
| Insured : San Diego - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2003/2004

Insured : San Diego - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------------|-------------------|-------------------|---------------------|-------------|
| Insured Total: 22 | | Indemnity | 865.00 | 376,483.35 | 48,460.18 | 424,943.53 | 0.00 |
| | | Rehab | 0.00 | 4,281.00 | 5,719.00 | 10,000.00 | 0.00 |
| | | Medical | 3,952.25 | 271,357.12 | 233,988.19 | 505,345.31 | 0.00 |
| | | Legal | 1,061.10 | 45,383.10 | 19,427.15 | 64,810.25 | 0.00 |
| | | Other | 0.00 | 16,761.66 | 11,566.39 | 28,328.05 | 0.00 |
| | | Insured Total | 5,878.35 | 714,266.23 | 319,160.91 | 1,033,427.14 | 0.00 |

Insured : San Francisco - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|-----------------|-------------------|------------------|-------------------|-------------|
| Insured Total: 4 | | Indemnity | 740.00 | 141,618.62 | 20,919.15 | 162,537.77 | 0.00 |
| | | Rehab | 0.00 | 4,116.86 | 1,000.00 | 5,116.86 | 0.00 |
| | | Medical | 790.48 | 88,651.40 | 69,200.57 | 157,851.97 | 0.00 |
| | | Legal | 0.00 | 11,764.48 | 325.00 | 12,089.48 | 0.00 |
| | | Other | 0.00 | 831.77 | 3,443.72 | 4,275.49 | 0.00 |
| | | Insured Total | 1,530.48 | 246,983.13 | 94,888.44 | 341,871.57 | 0.00 |

Insured : San Joaquin - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|-----------------|-------------------|------------------|-------------------|-------------|
| Insured Total: 4 | | Indemnity | 0.00 | 120,153.43 | 17,128.31 | 137,281.74 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,125.75 | 70,872.71 | 36,413.47 | 107,286.18 | 0.00 |
| | | Legal | 0.00 | 84.00 | 16.00 | 100.00 | 0.00 |
| | | Other | 0.00 | 440.31 | 1,755.95 | 2,196.26 | 0.00 |
| | | Insured Total | 1,125.75 | 191,550.45 | 55,313.73 | 246,864.18 | 0.00 |

Insured : San Luis Obispo - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|-------------|------------------|------------------|------------------|-------------|
| Insured Total: 2 | | Indemnity | 0.00 | 59,069.58 | 0.00 | 59,069.58 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 |
| | | Medical | 0.00 | 7,957.89 | 5,542.11 | 13,500.00 | 0.00 |
| | | Legal | 0.00 | 14,597.91 | 1,702.09 | 16,300.00 | 0.00 |
| | | Other | 0.00 | 805.55 | 0.00 | 805.55 | 0.00 |
| | | Insured Total | 0.00 | 82,430.93 | 11,244.20 | 93,675.13 | 0.00 |

Insured : Santa Barbara - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Santa Barbara - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 800.00 | 91,357.78 | 4,402.22 | 95,760.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 3,895.86 | 66,834.07 | 15,665.93 | 82,500.00 | 0.00 |
| | | | Legal | | 256.50 | 24,283.62 | 5,716.38 | 30,000.00 | 0.00 |
| | | | Other | | 0.00 | 2,269.01 | 2,230.99 | 4,500.00 | 0.00 |
| | | | Insured Total | | 4,952.36 | 184,744.48 | 28,015.52 | 212,760.00 | 0.00 |
| Insured : Santa Clara - JBWCP | | | | | | | | | |
| Insured Total: 10 | | | Indemnity | | 1,970.00 | 276,614.86 | 123,292.93 | 399,907.79 | 0.00 |
| | | | Rehab | | 0.00 | 15,901.51 | 29,358.15 | 45,259.66 | 0.00 |
| | | | Medical | | 1,703.59 | 251,840.63 | 189,819.09 | 441,659.72 | 0.00 |
| | | | Legal | | 1,628.42 | 65,930.22 | 13,945.02 | 79,875.24 | 0.00 |
| | | | Other | | 650.69 | 24,881.53 | 10,616.46 | 35,497.99 | 0.00 |
| | | | Insured Total | | 5,952.70 | 635,168.75 | 367,031.65 | 1,002,200.40 | 0.00 |
| Insured : Shasta - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | | 0.00 | 47,877.08 | 15,287.90 | 63,164.98 | 0.00 |
| | | | Rehab | | 1,476.00 | 4,885.28 | 11,114.72 | 16,000.00 | 0.00 |
| | | | Medical | | 221.46 | 74,454.52 | 25,792.53 | 100,247.05 | 0.00 |
| | | | Legal | | 132.00 | 132.00 | 218.00 | 350.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | | Insured Total | | 1,829.46 | 127,348.88 | 53,913.15 | 181,262.03 | 0.00 |
| Insured : Solano - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 31,188.65 | 38,458.95 | 69,647.60 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 26,767.86 | 35,609.72 | 62,377.58 | 0.00 |
| | | | Legal | | 657.42 | 11,769.00 | 374.10 | 12,143.10 | 0.00 |
| | | | Other | | 0.00 | 2,791.50 | 1,708.50 | 4,500.00 | 0.00 |
| | | | Insured Total | | 657.42 | 72,517.01 | 76,151.27 | 148,668.28 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2003/2004 | | | | | | | | | |
| Insured : Sonoma - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 15,507.30 | 1,059.20 | 16,566.50 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 123.83 | 10,345.15 | 19,433.13 | 29,778.28 | 0.00 |
| | | | Legal | | 391.50 | 675.00 | 2,325.00 | 3,000.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 150.00 | 150.00 | 0.00 |
| | | | Insured Total | | 515.33 | 26,527.45 | 22,967.33 | 49,494.78 | 0.00 |
| Insured : Trial Court Judges - 45 | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 17,131.39 | 4,196.41 | 21,327.80 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 4.75 | 10.00 | 14.75 | 0.00 |
| | | | Insured Total | | 0.00 | 17,136.14 | 4,206.41 | 21,342.55 | 0.00 |
| Insured : Tulare - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 5,343.33 | 3.43 | 5,346.76 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 6,849.32 | 13,663.95 | 20,513.27 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 12,192.65 | 16,167.38 | 28,360.03 | 0.00 |
| Insured : Ventura - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 20,032.00 | 20,032.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 9,331.09 | 20,087.22 | 29,418.31 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 9,331.09 | 40,119.22 | 49,450.31 | 0.00 |
| Fiscal Year Total: 158 | | | Indemnity | | 22,079.97 | 3,142,452.33 | 1,097,841.68 | 4,240,294.01 | (21,779.41) |
| | | | Rehab | | 2,597.90 | 158,061.33 | 243,623.98 | 401,685.31 | 0.00 |
| | | | Medical | | 30,099.52 | 2,651,535.17 | 1,793,161.61 | 4,444,696.78 | 0.00 |
| | | | Legal | | 36,129.47 | 718,030.71 | 233,243.48 | 951,274.19 | 0.00 |
| | | | Other | | 2,121.56 | 194,829.55 | 163,142.69 | 357,972.24 | 0.00 |
| | | | Fiscal Year Total | | 93,028.42 | 6,864,909.09 | 3,531,013.44 | 10,395,922.53 | (21,779.41) |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Administrative Office of the Courts - 27

| | | | | | | | | |
|-------------------------|--|--|----------------------|--------|-----------|-----------|-----------|------|
| Insured Total: 3 | | | Indemnity | 0.00 | 5,640.00 | 1,302.85 | 6,942.85 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Medical | 137.28 | 17,355.97 | 17,882.02 | 35,237.99 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 79.99 | 1,100.39 | 1,180.38 | 0.00 |
| | | | Insured Total | 137.28 | 23,075.96 | 20,785.26 | 43,861.22 | 0.00 |

Insured : Alameda - JBWCP

| | | | | | | | | |
|--------------------------|--|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 11 | | | Indemnity | 836.46 | 184,369.95 | 25,985.28 | 210,355.23 | 0.00 |
| | | | Rehab | 0.00 | 1,372.70 | 0.00 | 1,372.70 | 0.00 |
| | | | Medical | 2,137.13 | 129,648.60 | 92,212.52 | 221,861.12 | 0.00 |
| | | | Legal | 1,413.98 | 28,187.91 | 2,158.12 | 30,346.03 | 0.00 |
| | | | Other | 0.00 | 6,160.97 | 16,873.67 | 23,034.64 | 0.00 |
| | | | Insured Total | 4,387.57 | 349,740.13 | 137,229.59 | 486,969.72 | 0.00 |

Insured : Amador - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|------|-----------|-----------|-----------|------|
| Insured Total: 1 | | | Indemnity | 0.00 | 3,966.61 | 11,343.39 | 15,310.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 0.00 | 11,177.32 | 5,700.43 | 16,877.75 | 0.00 |
| | | | Legal | 0.00 | 660.00 | 4,340.00 | 5,000.00 | 0.00 |
| | | | Other | 0.00 | 792.55 | 1,207.45 | 2,000.00 | 0.00 |
| | | | Insured Total | 0.00 | 16,596.48 | 22,591.27 | 39,187.75 | 0.00 |

Insured : Butte - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|--------|-----------|----------|-----------|------|
| Insured Total: 2 | | | Indemnity | 0.00 | 4,451.54 | 750.00 | 5,201.54 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 311.83 | 11,605.53 | 4,506.23 | 16,111.76 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | | Insured Total | 311.83 | 16,057.07 | 6,756.23 | 22,813.30 | 0.00 |

Insured : Contra Costa - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Contra Costa - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 15 | | Indemnity | 1,907.40 | 193,844.13 | 161,622.96 | 355,467.09 | 0.00 |
| | | Rehab | 0.00 | 1,190.11 | 12,000.55 | 13,190.66 | 0.00 |
| | | Medical | 1,756.22 | 224,053.14 | 161,458.32 | 385,511.46 | 0.00 |
| | | Legal | 4,553.04 | 64,740.16 | 15,861.08 | 80,601.24 | 0.00 |
| | | Other | 779.67 | 23,776.59 | 31,331.59 | 55,108.18 | 0.00 |
| | | Insured Total | 8,996.33 | 507,604.13 | 382,274.50 | 889,878.63 | 0.00 |

Insured : Court of Appeal, First Appellate District - 31

| | | | | | | | |
|-------------------------|--|----------------------|------|--------|----------|----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 271.41 | 5,228.59 | 5,500.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 504.57 | 1,995.43 | 2,500.00 | 0.00 |
| | | Insured Total | 0.00 | 775.98 | 7,224.02 | 8,000.00 | 0.00 |

Insured : Fresno - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 10 | | Indemnity | 1,966.84 | 129,003.40 | 53,213.81 | 182,217.21 | 0.00 |
| | | Rehab | 0.00 | 350.00 | 8,000.00 | 8,350.00 | 0.00 |
| | | Medical | 112.54 | 153,798.59 | 83,059.94 | 236,858.53 | 0.00 |
| | | Legal | 3,021.31 | 7,458.30 | 6,537.70 | 13,996.00 | 0.00 |
| | | Other | 2,220.76 | 4,703.28 | 14,616.86 | 19,320.14 | 0.00 |
| | | Insured Total | 7,321.45 | 295,313.57 | 165,428.31 | 460,741.88 | 0.00 |

Insured : Habeas Corpus Resource Center - 29

| | | | | | | | |
|-------------------------|--|----------------------|---------|----------|-----------|-----------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 10,050.00 | 10,050.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 171.26 | 6,828.74 | 7,000.00 | 0.00 |
| | | Legal | (64.25) | 5,327.05 | 709.95 | 6,037.00 | 0.00 |
| | | Other | 0.00 | 951.82 | 848.18 | 1,800.00 | 0.00 |
| | | Insured Total | (64.25) | 6,450.13 | 18,436.87 | 24,887.00 | 0.00 |

Insured : Imperial - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2004/2005 | | | | | | | | | |
| Insured : Imperial - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 22,464.49 | 6,728.55 | 29,193.04 | 0.00 |
| | | | Rehab | | 0.00 | 1,808.90 | 178.65 | 1,987.55 | 0.00 |
| | | | Medical | | 105.56 | 46,715.61 | 39,284.39 | 86,000.00 | 0.00 |
| | | | Legal | | 1,075.00 | 8,406.03 | 3,593.97 | 12,000.00 | 0.00 |
| | | | Other | | 0.00 | 416.47 | 2,083.53 | 2,500.00 | 0.00 |
| | | | Insured Total | | 1,180.56 | 79,811.50 | 51,869.09 | 131,680.59 | 0.00 |
| Insured : Kern - JBWCP | | | | | | | | | |
| Insured Total: 9 | | | Indemnity | | 0.00 | 153,459.13 | 41,163.17 | 194,622.30 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 10,000.00 | 10,000.00 | 0.00 |
| | | | Medical | | 5,177.88 | 167,425.49 | 56,752.52 | 224,178.01 | 0.00 |
| | | | Legal | | 9,635.27 | 38,087.83 | 4,920.17 | 43,008.00 | 0.00 |
| | | | Other | | 588.46 | 12,442.40 | 6,658.93 | 19,101.33 | 0.00 |
| | | | Insured Total | | 15,401.61 | 371,414.85 | 119,494.79 | 490,909.64 | 0.00 |
| Insured : Madera - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 32,323.09 | 10,098.99 | 42,422.08 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 12,925.42 | 19,969.42 | 32,894.84 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Other | | 0.00 | 584.68 | 2,000.00 | 2,584.68 | 0.00 |
| | | | Insured Total | | 0.00 | 45,833.19 | 32,568.41 | 78,401.60 | 0.00 |
| Insured : Marin - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 25,735.92 | 18,720.08 | 44,456.00 | 0.00 |
| | | | Rehab | | 4,000.00 | 5,069.68 | 0.00 | 5,069.68 | 0.00 |
| | | | Medical | | 49.87 | 19,074.80 | 20,192.20 | 39,267.00 | 0.00 |
| | | | Legal | | 0.00 | 12,105.87 | 0.00 | 12,105.87 | 0.00 |
| | | | Other | | 0.00 | 7,491.91 | 0.00 | 7,491.91 | 0.00 |
| | | | Insured Total | | 4,049.87 | 69,478.18 | 38,912.28 | 108,390.46 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Mendocino - JBWCP

| | | | | | | | | |
|-------------------------|--|------------------|--------|-----------|-----------|-----------|------|--|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 9,400.00 | 9,400.00 | 0.00 | |
| | | Rehab | 0.00 | 1,840.61 | 2,159.39 | 4,000.00 | 0.00 | |
| | | Medical | 0.00 | 16,048.70 | 22,951.30 | 39,000.00 | 0.00 | |
| | | Legal | 405.00 | 12,071.47 | 1,628.53 | 13,700.00 | 0.00 | |
| | | Other | 0.00 | 1,852.33 | 1,347.67 | 3,200.00 | 0.00 | |
| Insured Total | | | 405.00 | 31,813.11 | 37,486.89 | 69,300.00 | 0.00 | |

Insured : Merced - JBWCP

| | | | | | | | | |
|-------------------------|--|------------------|------|-----------|-----------|-----------|------|--|
| Insured Total: 1 | | Indemnity | 0.00 | 6,877.32 | 11,468.16 | 18,345.48 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Medical | 0.00 | 14,244.08 | 9,566.92 | 23,811.00 | 0.00 | |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Other | 0.00 | 0.00 | 2,000.00 | 2,000.00 | 0.00 | |
| Insured Total | | | 0.00 | 21,121.40 | 23,035.08 | 44,156.48 | 0.00 | |

Insured : Monterey - JBWCP

| | | | | | | | | |
|-------------------------|--|------------------|--------|-----------|-----------|-----------|------|--|
| Insured Total: 5 | | Indemnity | 0.00 | 16,050.00 | 852.60 | 16,902.60 | 0.00 | |
| | | Rehab | 0.00 | 2,086.83 | 0.00 | 2,086.83 | 0.00 | |
| | | Medical | 279.43 | 22,197.12 | 26,555.40 | 48,752.52 | 0.00 | |
| | | Legal | 480.00 | 12,229.50 | 9,270.50 | 21,500.00 | 0.00 | |
| | | Other | 0.00 | 738.98 | 7,500.00 | 8,238.98 | 0.00 | |
| Insured Total | | | 759.43 | 53,302.43 | 44,178.50 | 97,480.93 | 0.00 | |

Insured : Napa - JBWCP

| | | | | | | | | |
|-------------------------|--|------------------|----------|-----------|-----------|-----------|------|--|
| Insured Total: 1 | | Indemnity | 0.00 | 1,687.60 | 7,242.40 | 8,930.00 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 | |
| | | Medical | 4,339.11 | 10,525.82 | 8,474.18 | 19,000.00 | 0.00 | |
| | | Legal | 256.50 | 1,288.00 | 2,712.00 | 4,000.00 | 0.00 | |
| | | Other | 0.00 | 1,405.30 | 4,094.70 | 5,500.00 | 0.00 | |
| Insured Total | | | 4,595.61 | 14,906.72 | 23,523.28 | 38,430.00 | 0.00 | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Nevada - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|-----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 4,167.18 | 2,050.40 | 6,217.58 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 8,337.06 | 11,368.07 | 19,705.13 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 |
| | | Insured Total | 0.00 | 12,504.24 | 14,168.47 | 26,672.71 | 0.00 |

Insured : Orange - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------|------------|------------|--------------|------|
| Insured Total: 20 | | Indemnity | 3,624.00 | 297,223.33 | 141,676.17 | 438,899.50 | 0.00 |
| | | Rehab | 0.00 | 2,358.94 | 8,421.16 | 10,780.10 | 0.00 |
| | | Medical | 2,379.30 | 365,521.29 | 235,852.69 | 601,373.98 | 0.00 |
| | | Legal | 4,628.21 | 53,224.58 | 25,234.93 | 78,459.51 | 0.00 |
| | | Other | 4,048.79 | 17,332.71 | 24,746.89 | 42,079.60 | 0.00 |
| | | Insured Total | 14,680.30 | 735,660.85 | 435,931.84 | 1,171,592.69 | 0.00 |

Insured : Placer - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|-----------|----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 2,478.58 | 21.42 | 2,500.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 9,961.61 | 2,022.92 | 11,984.53 | 0.00 |
| | | Legal | 0.00 | 0.00 | 150.00 | 150.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | Insured Total | 0.00 | 12,440.19 | 3,694.34 | 16,134.53 | 0.00 |

Insured : Riverside - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|------------|------|
| Insured Total: 8 | | Indemnity | 0.00 | 33,624.35 | 24,056.24 | 57,680.59 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 |
| | | Medical | 632.75 | 38,384.10 | 42,236.57 | 80,620.67 | 0.00 |
| | | Legal | 650.50 | 16,093.16 | 18,366.84 | 34,460.00 | 0.00 |
| | | Other | 0.00 | 730.85 | 7,919.15 | 8,650.00 | 0.00 |
| | | Insured Total | 1,283.25 | 88,832.46 | 96,578.80 | 185,411.26 | 0.00 |

Insured : Sacramento - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Sacramento - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|--------|------------|------------|------------|------|
| Insured Total: 13 | | Indemnity | 0.00 | 212,792.42 | 76,458.57 | 289,250.99 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 |
| | | Medical | 0.00 | 209,031.47 | 144,135.20 | 353,166.67 | 0.00 |
| | | Legal | 232.40 | 28,923.80 | 22,691.21 | 51,615.01 | 0.00 |
| | | Other | 126.94 | 5,653.47 | 7,355.28 | 13,008.75 | 0.00 |
| | | Insured Total | 359.34 | 456,401.16 | 254,640.26 | 711,041.42 | 0.00 |

Insured : San Bernardino - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|------------|-----------|------------|------|
| Insured Total: 4 | | Indemnity | 0.00 | 122,043.09 | 23,434.32 | 145,477.41 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 |
| | | Medical | 466.78 | 135,623.22 | 33,050.48 | 168,673.70 | 0.00 |
| | | Legal | 1,573.50 | 2,433.00 | 1,067.00 | 3,500.00 | 0.00 |
| | | Other | 0.00 | 6,553.06 | 6,696.94 | 13,250.00 | 0.00 |
| | | Insured Total | 2,040.28 | 266,652.37 | 70,248.74 | 336,901.11 | 0.00 |

Insured : San Diego - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------|------------|------------|--------------|------|
| Insured Total: 26 | | Indemnity | 26,427.28 | 364,751.29 | 67,778.60 | 432,529.89 | 0.00 |
| | | Rehab | 0.00 | 527.48 | 0.00 | 527.48 | 0.00 |
| | | Medical | 2,340.19 | 378,038.76 | 318,003.22 | 696,041.98 | 0.00 |
| | | Legal | 178.50 | 33,950.91 | 19,489.11 | 53,440.02 | 0.00 |
| | | Other | 0.00 | 19,690.29 | 8,589.08 | 28,279.37 | 0.00 |
| | | Insured Total | 28,945.97 | 796,958.73 | 413,860.01 | 1,210,818.74 | 0.00 |

Insured : San Francisco - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------|------------|------------|------------|------|
| Insured Total: 11 | | Indemnity | 3,092.80 | 269,403.67 | 113,758.44 | 383,162.11 | 0.00 |
| | | Rehab | 0.00 | 1,027.03 | 7,000.00 | 8,027.03 | 0.00 |
| | | Medical | 3,013.18 | 190,487.81 | 159,887.55 | 350,375.36 | 0.00 |
| | | Legal | 4,198.50 | 35,223.65 | 11,590.60 | 46,814.25 | 0.00 |
| | | Other | 194.20 | 22,542.83 | 12,971.83 | 35,514.66 | 0.00 |
| | | Insured Total | 10,498.68 | 518,684.99 | 305,208.42 | 823,893.41 | 0.00 |

Insured : San Joaquin - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : San Joaquin - JBWCP

| | | | | | | |
|-------------------------|----------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 3 | Indemnity | 3,040.00 | 16,939.44 | 11,160.67 | 28,100.11 | 0.00 |
| | Rehab | 0.00 | 0.00 | 6,500.00 | 6,500.00 | 0.00 |
| | Medical | 0.00 | 15,708.37 | 22,041.88 | 37,750.25 | 0.00 |
| | Legal | (95.30) | 6,643.53 | 5,951.24 | 12,594.77 | 0.00 |
| | Other | 0.00 | 1,962.33 | 4,039.34 | 6,001.67 | 0.00 |
| | Insured Total | 2,944.70 | 41,253.67 | 49,693.13 | 90,946.80 | 0.00 |

Insured : San Luis Obispo - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|-----------|-----------|------------|------|
| Insured Total: 2 | Indemnity | 0.00 | 8,778.72 | 27,213.12 | 35,991.84 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 33,335.30 | 32,696.26 | 66,031.56 | 0.00 |
| | Legal | 0.00 | 22,135.48 | 0.00 | 22,135.48 | 0.00 |
| | Other | 0.00 | 38.90 | 111.10 | 150.00 | 0.00 |
| | Insured Total | 0.00 | 64,288.40 | 60,020.48 | 124,308.88 | 0.00 |

Insured : San Mateo - JBWCP

| | | | | | | |
|-------------------------|----------------------|-----------|-----------|-----------|------------|------|
| Insured Total: 2 | Indemnity | 19,613.13 | 47,973.79 | 6,973.98 | 54,947.77 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 12,200.98 | 31,004.15 | 43,205.13 | 0.00 |
| | Legal | 985.50 | 985.50 | 3,064.50 | 4,050.00 | 0.00 |
| | Other | 0.00 | 674.29 | 4,825.71 | 5,500.00 | 0.00 |
| | Insured Total | 20,598.63 | 61,834.56 | 45,868.34 | 107,702.90 | 0.00 |

Insured : Santa Barbara - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|----------|-----------|-----------|------|
| Insured Total: 1 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 4,053.85 | 15,665.97 | 19,719.82 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 0.00 | 4,053.85 | 15,665.97 | 19,719.82 | 0.00 |

Insured : Santa Clara - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2004/2005 | | | | | | | | | |
| Insured : Santa Clara - JBWCP | | | | | | | | | |
| Insured Total: 5 | | | Indemnity | | 0.00 | 88,404.74 | 31,302.00 | 119,706.74 | 0.00 |
| | | | Rehab | | 0.00 | 1,696.59 | 6,303.41 | 8,000.00 | 0.00 |
| | | | Medical | | 839.63 | 74,790.26 | 52,214.96 | 127,005.22 | 0.00 |
| | | | Legal | | 811.13 | 9,784.24 | 650.26 | 10,434.50 | 0.00 |
| | | | Other | | 0.00 | 1,661.44 | 4,595.64 | 6,257.08 | 0.00 |
| | | | Insured Total | | 1,650.76 | 176,337.27 | 95,066.27 | 271,403.54 | 0.00 |
| Insured : Santa Cruz - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 120.00 | 6,672.00 | 6,792.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | Medical | | 0.00 | 4,855.69 | 12,186.99 | 17,042.68 | 0.00 |
| | | | Legal | | 0.00 | 1,849.43 | 4,650.57 | 6,500.00 | 0.00 |
| | | | Other | | 0.00 | 161.63 | 2,338.37 | 2,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 6,986.75 | 26,847.93 | 33,834.68 | 0.00 |
| Insured : Shasta - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 17,381.60 | 1,761.08 | 19,142.68 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Medical | | 121.02 | 26,113.34 | 19,414.01 | 45,527.35 | 0.00 |
| | | | Legal | | 0.00 | 3,077.75 | 6,880.00 | 9,957.75 | 0.00 |
| | | | Other | | 0.00 | 2,202.77 | 1,297.23 | 3,500.00 | 0.00 |
| | | | Insured Total | | 121.02 | 48,775.46 | 29,852.32 | 78,627.78 | 0.00 |
| Insured : Solano - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 9,133.85 | 10,000.00 | 19,133.85 | 0.00 |
| | | | Rehab | | 0.00 | 104.00 | 0.00 | 104.00 | 0.00 |
| | | | Medical | | 88.06 | 14,680.69 | 37,221.19 | 51,901.88 | 0.00 |
| | | | Legal | | 0.00 | 7,494.55 | 1,487.15 | 8,981.70 | 0.00 |
| | | | Other | | 0.00 | 502.46 | 3,258.96 | 3,761.42 | 0.00 |
| | | | Insured Total | | 88.06 | 31,915.55 | 51,967.30 | 83,882.85 | 0.00 |
| Insured : Sonoma - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2004/2005

Insured : Sonoma - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|--------|----------|-----------|-----------|------|--|--|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 12,300.00 | 12,300.00 | 0.00 | | |
| | | Rehab | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | | |
| | | Medical | 66.19 | 8,399.09 | 23,953.64 | 32,352.73 | 0.00 | | |
| | | Legal | 756.00 | 756.00 | 5,744.00 | 6,500.00 | 0.00 | | |
| | | Other | 0.00 | 608.54 | 3,683.86 | 4,292.40 | 0.00 | | |
| | | Insured Total | 822.19 | 9,763.63 | 47,181.50 | 56,945.13 | 0.00 | | |

Insured : Stanislaus - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|------|-----------|-----------|-----------|------|--|--|
| Insured Total: 1 | | Indemnity | 0.00 | 3,797.86 | 2,749.16 | 6,547.02 | 0.00 | | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | | Medical | 0.00 | 11,016.14 | 17,683.86 | 28,700.00 | 0.00 | | |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | | Other | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 | | |
| | | Insured Total | 0.00 | 14,814.00 | 24,433.02 | 39,247.02 | 0.00 | | |

Insured : Tehama - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|-----------|-----------|-----------|------------|------|--|--|
| Insured Total: 1 | | Indemnity | 35,000.00 | 35,059.93 | 5,840.00 | 40,899.93 | 0.00 | | |
| | | Rehab | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 | | |
| | | Medical | 0.00 | 13,998.99 | 10,001.01 | 24,000.00 | 0.00 | | |
| | | Legal | 4,300.50 | 21,319.80 | 3,880.60 | 25,200.40 | 0.00 | | |
| | | Other | 0.00 | 9,618.54 | 2,500.00 | 12,118.54 | 0.00 | | |
| | | Insured Total | 39,300.50 | 79,997.26 | 26,221.61 | 106,218.87 | 0.00 | | |

Insured : Trial Court Judges - 45

| | | | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|-----------|------|--|--|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 13,050.00 | 13,050.00 | 0.00 | | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | | Medical | 0.00 | 4,251.67 | 10,748.33 | 15,000.00 | 0.00 | | |
| | | Legal | (585.75) | 10,901.31 | 3,098.69 | 14,000.00 | 0.00 | | |
| | | Other | 110.32 | 1,900.72 | 599.28 | 2,500.00 | 0.00 | | |
| | | Insured Total | (475.43) | 17,053.70 | 27,496.30 | 44,550.00 | 0.00 | | |

Insured : Tulare - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2004/2005 | | | | | | | | | |
| Insured : Tulare - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 686.51 | 18,582.89 | 19,269.40 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 17,212.38 | 35,702.91 | 52,915.29 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 5,000.00 | 5,000.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 8,500.00 | 8,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 17,898.89 | 67,785.80 | 85,684.69 | 0.00 |
| Insured : Ventura - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | | 0.00 | 138,357.03 | 30,371.45 | 168,728.48 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 |
| | | | Medical | | 1,610.95 | 96,039.18 | 35,452.49 | 131,491.67 | 0.00 |
| | | | Legal | | 2,137.90 | 15,119.93 | 13,651.84 | 28,771.77 | 0.00 |
| | | | Other | | 0.00 | 9,323.56 | 4,980.48 | 14,304.04 | 0.00 |
| | | | Insured Total | | 3,748.85 | 258,839.70 | 88,456.26 | 347,295.96 | 0.00 |
| Insured : Yolo - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 10,175.00 | 1,825.00 | 12,000.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 917.36 | 26,588.82 | 4,907.37 | 31,496.19 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 917.36 | 36,763.82 | 6,732.37 | 43,496.19 | 0.00 |
| Fiscal Year Total: 183 | | | Indemnity | | 95,507.91 | 2,463,165.56 | 998,977.75 | 3,462,143.31 | 0.00 |
| | | | Rehab | | 4,000.00 | 19,432.87 | 87,063.16 | 106,496.03 | 0.00 |
| | | | Medical | | 26,882.26 | 2,555,868.93 | 1,888,074.84 | 4,443,943.77 | 0.00 |
| | | | Legal | | 40,547.44 | 460,478.74 | 204,880.56 | 665,359.30 | 0.00 |
| | | | Other | | 8,069.14 | 163,060.23 | 210,417.54 | 373,477.77 | 0.00 |
| | | | Fiscal Year Total | | 175,006.75 | 5,662,006.33 | 3,389,413.85 | 9,051,420.18 | 0.00 |

Fiscal Year : 2005/2006

Insured : Administrative Office of the Courts - 27

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2005/2006

Insured : Administrative Office of the Courts - 27

| | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|------------|------|
| Insured Total: 5 | | Indemnity | 3,452.48 | 10,319.08 | 11,820.92 | 22,140.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 199.43 | 16,423.61 | 78,226.39 | 94,650.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 3,445.52 | 3,564.48 | 7,010.00 | 0.00 |
| | | Insured Total | 3,651.91 | 30,188.21 | 93,611.79 | 123,800.00 | 0.00 |

Insured : Alameda - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 12 | | Indemnity | 2,135.93 | 121,330.14 | 120,027.17 | 241,357.31 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 5,500.00 | 5,500.00 | 0.00 |
| | | Medical | 3,342.01 | 190,728.99 | 171,098.62 | 361,827.61 | 0.00 |
| | | Legal | 2,025.35 | 13,342.55 | 5,657.45 | 19,000.00 | 0.00 |
| | | Other | 217.76 | 4,014.96 | 22,321.14 | 26,336.10 | 0.00 |
| | | Insured Total | 7,721.05 | 329,416.64 | 324,604.38 | 654,021.02 | 0.00 |

Insured : Amador - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|-----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 6,116.78 | 3,607.98 | 9,724.76 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 6,828.61 | 9,887.42 | 16,716.03 | 0.00 |
| | | Legal | 0.00 | 5,174.77 | 4,325.23 | 9,500.00 | 0.00 |
| | | Other | 0.00 | 1,224.33 | 2,025.67 | 3,250.00 | 0.00 |
| | | Insured Total | 0.00 | 19,344.49 | 19,846.30 | 39,190.79 | 0.00 |

Insured : Butte - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|--------|-----------|-----------|------------|------|
| Insured Total: 6 | | Indemnity | 0.00 | 14,080.07 | 23,118.39 | 37,198.46 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 105.56 | 40,634.49 | 46,835.66 | 87,470.15 | 0.00 |
| | | Legal | 549.20 | 20,434.15 | 7,065.85 | 27,500.00 | 0.00 |
| | | Other | 0.00 | 6,652.27 | 5,197.73 | 11,850.00 | 0.00 |
| | | Insured Total | 654.76 | 81,800.98 | 82,217.63 | 164,018.61 | 0.00 |

Insured : Contra Costa - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------------|--------------------|-------------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Contra Costa - JBWCP | | | | | | | | | |
| Insured Total: 13 | | | Indemnity | | 14,270.47 | 102,061.61 | 50,437.58 | 152,499.19 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 5,500.00 | 5,500.00 | 0.00 |
| | | | Medical | | 5,132.98 | 98,331.31 | 215,292.17 | 313,623.48 | 0.00 |
| | | | Legal | | 11,866.15 | 39,700.08 | 19,375.96 | 59,076.04 | 0.00 |
| | | | Other | | 0.00 | 13,196.70 | 22,874.85 | 36,071.55 | 0.00 |
| | | | Insured Total | | 31,269.60 | 253,289.70 | 313,480.56 | 566,770.26 | 0.00 |
| Insured : Court of Appeal, Fifth Appellate District - 35 | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 6,957.50 | 6,957.50 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 3,505.12 | 4,994.88 | 8,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 3,505.12 | 12,452.38 | 15,957.50 | 0.00 |
| Insured : Court of Appeal, First Appellate District - 31 | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 1,358.43 | 141.57 | 1,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 10.00 | 10.00 | 0.00 |
| | | | Insured Total | | 0.00 | 1,358.43 | 151.57 | 1,510.00 | 0.00 |
| Insured : Court of Appeal, Second Appellate District - 32 | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 920.00 | 8,345.71 | 10,169.29 | 18,515.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 4,951.70 | 9,148.30 | 14,100.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 405.58 | 694.42 | 1,100.00 | 0.00 |
| | | | Insured Total | | 920.00 | 13,702.99 | 20,012.01 | 33,715.00 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Del Norte - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 3,300.00 | 3,300.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 958.43 | 5,000.00 | 5,958.43 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 3,500.00 | 3,500.00 | 0.00 |
| | | | Other | | 286.80 | 286.80 | 713.20 | 1,000.00 | 0.00 |
| | | | Insured Total | | 286.80 | 1,245.23 | 12,513.20 | 13,758.43 | 0.00 |
| Insured : El Dorado - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 6,393.36 | 7,306.64 | 13,700.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 |
| | | | Insured Total | | 0.00 | 6,393.36 | 8,056.64 | 14,450.00 | 0.00 |
| Insured : Fresno - JBWCP | | | | | | | | | |
| Insured Total: 8 | | | Indemnity | | 2,123.64 | 32,184.78 | 22,219.34 | 54,404.12 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 |
| | | | Medical | | 2,838.91 | 31,958.08 | 59,190.49 | 91,148.57 | 0.00 |
| | | | Legal | | 6,478.57 | 9,796.06 | 10,703.94 | 20,500.00 | 0.00 |
| | | | Other | | (2,220.76) | 1,464.42 | 13,907.98 | 15,372.40 | 0.00 |
| | | | Insured Total | | 9,220.36 | 75,403.34 | 112,021.75 | 187,425.09 | 0.00 |
| Insured : Imperial - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 1,914.34 | 11,640.00 | 13,554.34 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 11,743.11 | 10,372.87 | 22,115.98 | 0.00 |
| | | | Legal | | 0.00 | 6,567.00 | 4,433.00 | 11,000.00 | 0.00 |
| | | | Other | | 0.00 | 1,544.96 | 2,955.04 | 4,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 21,769.41 | 29,400.91 | 51,170.32 | 0.00 |
| Insured : Kern - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Kern - JBWCP | | | | | | | | | |
| Insured Total: 7 | | | Indemnity | | 0.00 | 32,396.17 | 34,707.00 | 67,103.17 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 128.26 | 45,611.68 | 109,117.97 | 154,729.65 | 0.00 |
| | | | Legal | | 1,410.00 | 2,445.00 | 19,555.00 | 22,000.00 | 0.00 |
| | | | Other | | 0.00 | 5,713.21 | 6,141.19 | 11,854.40 | 0.00 |
| | | | Insured Total | | 1,538.26 | 86,166.06 | 169,521.16 | 255,687.22 | 0.00 |
| Insured : Lake - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 2,259.20 | 6,777.60 | 17,415.10 | 24,192.70 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 24,998.38 | 32,011.67 | 1,488.33 | 33,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 |
| | | | Insured Total | | 27,257.58 | 38,789.27 | 19,653.43 | 58,442.70 | 0.00 |
| Insured : Madera - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 636.64 | 19,827.36 | 20,464.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 5,000.62 | 28,199.38 | 33,200.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 5,637.26 | 48,526.74 | 54,164.00 | 0.00 |
| Insured : Marin - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 71,400.00 | 12,255.00 | 83,655.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 4,000.00 | 4,000.00 | 0.00 |
| | | | Medical | | 0.00 | 9,973.66 | 17,526.34 | 27,500.00 | 0.00 |
| | | | Legal | | 3,229.73 | 13,830.60 | 2,669.40 | 16,500.00 | 0.00 |
| | | | Other | | 0.00 | 3,540.52 | 1,959.48 | 5,500.00 | 0.00 |
| | | | Insured Total | | 3,229.73 | 98,744.78 | 38,410.22 | 137,155.00 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Mendocino - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 10,470.00 | 10,470.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | Medical | | 0.00 | 4,789.29 | 17,710.71 | 22,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | | Other | | 0.00 | 373.10 | 1,126.90 | 1,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 5,162.39 | 30,807.61 | 35,970.00 | 0.00 |
| Insured : Merced - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 19,441.71 | 28,177.01 | 47,618.72 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 |
| | | | Medical | | 0.00 | 15,942.55 | 67,469.11 | 83,411.66 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 395.23 | 604.77 | 1,000.00 | 0.00 |
| | | | Insured Total | | 0.00 | 35,779.49 | 102,250.89 | 138,030.38 | 0.00 |
| Insured : Monterey - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | | 0.00 | 0.00 | 1,930.18 | 1,930.18 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 26,000.00 | 26,000.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 7,500.00 | 7,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 35,430.18 | 35,430.18 | 0.00 |
| Insured : Orange - JBWCP | | | | | | | | | |
| Insured Total: 20 | | | Indemnity | | 1,264.40 | 115,837.63 | 97,806.24 | 213,643.87 | 0.00 |
| | | | Rehab | | 1,077.00 | 2,763.60 | 923.00 | 3,686.60 | 0.00 |
| | | | Medical | | 1,044.19 | 213,523.96 | 192,376.08 | 405,900.04 | 0.00 |
| | | | Legal | | 6,682.72 | 32,254.81 | 32,954.47 | 65,209.28 | 0.00 |
| | | | Other | | 824.56 | 16,862.88 | 26,733.46 | 43,596.34 | 0.00 |
| | | | Insured Total | | 10,892.87 | 381,242.88 | 350,793.25 | 732,036.13 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Placer - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 2,640.00 | 2,640.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 68.28 | 4,625.45 | 9,574.55 | 14,200.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 |
| | | | Insured Total | | 68.28 | 4,625.45 | 12,964.55 | 17,590.00 | 0.00 |
| Insured : Riverside - JBWCP | | | | | | | | | |
| Insured Total: 21 | | | Indemnity | | 2,214.00 | 76,693.61 | 80,354.56 | 157,048.17 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 4,055.70 | 151,214.33 | 143,195.27 | 294,409.60 | 0.00 |
| | | | Legal | | 1,561.70 | 46,828.58 | 34,676.76 | 81,505.34 | 0.00 |
| | | | Other | | 0.00 | 14,635.01 | 19,055.55 | 33,690.56 | 0.00 |
| | | | Insured Total | | 7,831.40 | 289,371.53 | 277,282.14 | 566,653.67 | 0.00 |
| Insured : Sacramento - JBWCP | | | | | | | | | |
| Insured Total: 11 | | | Indemnity | | 2,081.40 | 79,764.53 | 93,828.91 | 173,593.44 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 6,450.00 | 6,450.00 | 0.00 |
| | | | Medical | | 250.19 | 106,088.72 | 103,171.62 | 209,260.34 | (2,500.00) |
| | | | Legal | | 445.16 | 21,166.60 | 15,983.40 | 37,150.00 | 0.00 |
| | | | Other | | 0.00 | 9,175.27 | 7,824.73 | 17,000.00 | 0.00 |
| | | | Insured Total | | 2,776.75 | 216,195.12 | 227,258.66 | 443,453.78 | (2,500.00) |
| Insured : San Bernardino - JBWCP | | | | | | | | | |
| Insured Total: 8 | | | Indemnity | | 2,297.96 | 53,676.13 | 52,381.21 | 106,057.34 | 0.00 |
| | | | Rehab | | 587.25 | 587.25 | 1,912.75 | 2,500.00 | 0.00 |
| | | | Medical | | 378.54 | 60,914.91 | 134,613.60 | 195,528.51 | 0.00 |
| | | | Legal | | 1,907.00 | 25,097.51 | 21,402.49 | 46,500.00 | 0.00 |
| | | | Other | | 434.11 | 9,339.62 | 9,908.18 | 19,247.80 | 0.00 |
| | | | Insured Total | | 5,604.86 | 149,615.42 | 220,218.23 | 369,833.65 | 0.00 |
| Insured : San Diego - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> | |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|------|
| Fiscal Year : 2005/2006 | | | | | | | | | | |
| Insured : San Diego - JBWCP | | | | | | | | | | |
| Insured Total: 17 | | | | | Indemnity | 10,546.19 | 185,758.52 | 53,314.82 | 239,073.34 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 851.27 | 193,015.60 | 162,989.42 | 356,005.02 | 0.00 |
| | | | | | Legal | 132.50 | 7,321.76 | 3,678.24 | 11,000.00 | 0.00 |
| | | | | | Other | 393.22 | 1,894.95 | 2,096.76 | 3,991.71 | 0.00 |
| | | | | | Insured Total | 11,923.18 | 387,990.83 | 222,079.24 | 610,070.07 | 0.00 |
| Insured : San Francisco - JBWCP | | | | | | | | | | |
| Insured Total: 20 | | | | | Indemnity | 8,965.32 | 367,601.40 | 203,336.87 | 570,938.27 | 0.00 |
| | | | | | Rehab | 0.00 | 2,728.34 | 49,771.66 | 52,500.00 | 0.00 |
| | | | | | Medical | 2,912.50 | 236,249.07 | 309,646.15 | 545,895.22 | 0.00 |
| | | | | | Legal | 5,967.00 | 53,003.29 | 36,202.07 | 89,205.36 | 0.00 |
| | | | | | Other | 2,585.00 | 29,610.69 | 32,319.99 | 61,930.68 | 0.00 |
| | | | | | Insured Total | 20,429.82 | 689,192.79 | 631,276.74 | 1,320,469.53 | 0.00 |
| Insured : San Joaquin - JBWCP | | | | | | | | | | |
| Insured Total: 1 | | | | | Indemnity | 0.00 | 14,677.06 | 518.90 | 15,195.96 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 0.00 | 4,497.82 | 4,652.18 | 9,150.00 | 0.00 |
| | | | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Other | 0.00 | 4.09 | 2,995.91 | 3,000.00 | 0.00 |
| | | | | | Insured Total | 0.00 | 19,178.97 | 8,166.99 | 27,345.96 | 0.00 |
| Insured : San Luis Obispo - JBWCP | | | | | | | | | | |
| Insured Total: 3 | | | | | Indemnity | 1,680.00 | 5,400.00 | 14,384.80 | 19,784.80 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 0.00 | 15,084.38 | 59,915.62 | 75,000.00 | 0.00 |
| | | | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Other | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | | | Insured Total | 1,680.00 | 20,484.38 | 75,300.42 | 95,784.80 | 0.00 |
| Insured : San Mateo - JBWCP | | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------------|--------------------|-------------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : San Mateo - JBWCP | | | | | | | | | |
| Insured Total: 7 | | | Indemnity | | 6,720.00 | 140,192.76 | 105,238.16 | 245,430.92 | 0.00 |
| | | | Rehab | | 0.00 | 458.25 | 12,131.75 | 12,590.00 | 0.00 |
| | | | Medical | | 1,776.71 | 72,783.15 | 150,869.24 | 223,652.39 | 0.00 |
| | | | Legal | | 162.00 | 2,767.00 | 19,683.00 | 22,450.00 | 0.00 |
| | | | Other | | 183.21 | 14,561.37 | 23,287.19 | 37,848.56 | 0.00 |
| | | | Insured Total | | 8,841.92 | 230,762.53 | 311,209.34 | 541,971.87 | 0.00 |
| Insured : Santa Barbara - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 6,250.00 | 6,250.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 2,120.96 | 4,579.04 | 6,700.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 2,120.96 | 10,829.04 | 12,950.00 | 0.00 |
| Insured : Santa Clara - JBWCP | | | | | | | | | |
| Insured Total: 15 | | | Indemnity | | 5,556.39 | 54,832.78 | 97,792.22 | 152,625.00 | 0.00 |
| | | | Rehab | | 0.00 | 4,609.98 | 13,994.41 | 18,604.39 | 0.00 |
| | | | Medical | | 304.68 | 111,028.32 | 159,335.64 | 270,363.96 | 0.00 |
| | | | Legal | | 0.00 | 36,429.57 | 20,951.93 | 57,381.50 | 0.00 |
| | | | Other | | 226.37 | 11,005.53 | 16,694.73 | 27,700.26 | 0.00 |
| | | | Insured Total | | 6,087.44 | 217,906.18 | 308,768.93 | 526,675.11 | 0.00 |
| Insured : Santa Cruz - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 171.88 | 6,396.12 | 6,568.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | Medical | | 0.00 | 9,179.09 | 19,820.91 | 29,000.00 | 0.00 |
| | | | Legal | | 0.00 | 5,337.60 | 4,362.40 | 9,700.00 | 0.00 |
| | | | Other | | 0.00 | 1,260.50 | 3,239.50 | 4,500.00 | 0.00 |
| | | | Insured Total | | 0.00 | 15,949.07 | 34,818.93 | 50,768.00 | 0.00 |
| Insured : Shasta - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Shasta - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 0.00 | 4,350.00 | 4,350.00 | 0.00 |
| | | | Rehab | | 0.00 | 373.41 | 26.59 | 400.00 | 0.00 |
| | | | Medical | | 245.76 | 12,997.99 | 14,202.01 | 27,200.00 | 0.00 |
| | | | Legal | | 0.00 | 4,667.75 | 4,332.25 | 9,000.00 | 0.00 |
| | | | Other | | 0.00 | 1,557.50 | 5,442.50 | 7,000.00 | 0.00 |
| | | | Insured Total | | 245.76 | 19,596.65 | 28,353.35 | 47,950.00 | 0.00 |
| Insured : Solano - JBWCP | | | | | | | | | |
| Insured Total: 7 | | | Indemnity | | 2,931.79 | 74,160.98 | 40,299.46 | 114,460.44 | 0.00 |
| | | | Rehab | | 0.00 | 1,041.70 | 4,458.30 | 5,500.00 | 0.00 |
| | | | Medical | | 1,819.94 | 60,068.19 | 126,041.80 | 186,109.99 | 0.00 |
| | | | Legal | | 0.00 | 1,756.15 | 4,743.85 | 6,500.00 | 0.00 |
| | | | Other | | 63.11 | 1,777.61 | 5,142.89 | 6,920.50 | 0.00 |
| | | | Insured Total | | 4,814.84 | 138,804.63 | 180,686.30 | 319,490.93 | 0.00 |
| Insured : Sonoma - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 1,530.00 | 24,307.82 | 25,364.82 | 49,672.64 | 0.00 |
| | | | Rehab | | 143.00 | 143.00 | 2,000.00 | 2,143.00 | 0.00 |
| | | | Medical | | 0.00 | 7,877.02 | 15,456.78 | 23,333.80 | 0.00 |
| | | | Legal | | 54.00 | 9,899.54 | 307.31 | 10,206.85 | 0.00 |
| | | | Other | | 60.47 | 1,734.82 | 2,432.10 | 4,166.92 | 0.00 |
| | | | Insured Total | | 1,787.47 | 43,962.20 | 45,561.01 | 89,523.21 | 0.00 |
| Insured : Tehama - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 0.00 | 1,437.29 | 1,437.29 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 508.42 | 9,675.34 | 12,324.66 | 22,000.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 2,700.00 | 2,700.00 | 0.00 |
| | | | Insured Total | | 508.42 | 9,675.34 | 16,461.95 | 26,137.29 | 0.00 |
| Insured : Trial Court Judges - 45 | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2005/2006

Insured : Trial Court Judges - 45

| | | | | | | | | |
|-------------------------|--|----------------------|------|----------|-----------|-----------|------|--|
| Insured Total: 4 | | Indemnity | 0.00 | 0.00 | 17,710.00 | 17,710.00 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Medical | 0.00 | 8,186.96 | 15,313.04 | 23,500.00 | 0.00 | |
| | | Legal | 0.00 | 866.25 | 3,633.75 | 4,500.00 | 0.00 | |
| | | Other | 0.00 | 783.66 | 741.34 | 1,525.00 | 0.00 | |
| | | Insured Total | 0.00 | 9,836.87 | 37,398.13 | 47,235.00 | 0.00 | |

Insured : Tulare - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|--------|-----------|------------|------------|------|--|
| Insured Total: 4 | | Indemnity | 0.00 | 10,711.01 | 38,314.99 | 49,026.00 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Medical | 399.93 | 26,948.44 | 59,660.04 | 86,608.48 | 0.00 | |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Other | 0.00 | 110.09 | 2,189.91 | 2,300.00 | 0.00 | |
| | | Insured Total | 399.93 | 37,769.54 | 100,164.94 | 137,934.48 | 0.00 | |

Insured : Tuolumne - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|------|----------|-----------|-----------|------|--|
| Insured Total: 1 | | Indemnity | 0.00 | 1,586.10 | 0.00 | 1,586.10 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 | |
| | | Medical | 0.00 | 4,792.37 | 4,532.63 | 9,325.00 | 0.00 | |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Other | 0.00 | 61.33 | 2,438.67 | 2,500.00 | 0.00 | |
| | | Insured Total | 0.00 | 6,439.80 | 12,971.30 | 19,411.10 | 0.00 | |

Insured : Ventura - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|------------|------|--|
| Insured Total: 4 | | Indemnity | 0.00 | 31,448.59 | 4,369.63 | 35,818.22 | 0.00 | |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | Medical | 1,583.96 | 23,725.30 | 17,151.16 | 40,876.46 | 0.00 | |
| | | Legal | 1,716.00 | 16,338.44 | 11,961.56 | 28,300.00 | 0.00 | |
| | | Other | 1,606.41 | 11,236.44 | 6,959.85 | 18,196.29 | 0.00 | |
| | | Insured Total | 4,906.37 | 82,748.77 | 40,442.20 | 123,190.97 | 0.00 | |

Insured : Yolo - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2005/2006 | | | | | | | | | |
| Insured : Yolo - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | | 0.00 | 12,891.24 | 7,254.40 | 20,145.64 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 102.11 | 32,072.32 | 28,786.83 | 60,859.15 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 1,950.00 | 1,950.00 | 0.00 |
| | | | Insured Total | | 102.11 | 44,963.56 | 37,991.23 | 82,954.79 | 0.00 |
| Fiscal Year Total: 225 | | | Indemnity | | 70,949.17 | 1,676,716.67 | 1,341,423.22 | 3,018,139.89 | 0.00 |
| | | | Rehab | | 1,807.25 | 12,705.53 | 126,668.46 | 139,373.99 | 0.00 |
| | | | Medical | | 53,047.71 | 1,893,814.40 | 2,633,215.12 | 4,527,029.52 | (2,500.00) |
| | | | Legal | | 44,187.08 | 375,025.06 | 292,659.31 | 667,684.37 | 0.00 |
| | | | Other | | 4,660.26 | 167,868.96 | 270,000.11 | 437,869.07 | 0.00 |
| | | | Fiscal Year Total | | 174,651.47 | 4,126,130.62 | 4,663,966.22 | 8,790,096.84 | (2,500.00) |
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : Administrative Office of the Courts - 27 | | | | | | | | | |
| Insured Total: 12 | | | Indemnity | | 0.00 | 0.00 | 10,000.00 | 10,000.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 1,201.03 | 17,013.92 | 62,186.08 | 79,200.00 | 0.00 |
| | | | Legal | | 584.20 | 2,311.10 | 5,188.90 | 7,500.00 | 0.00 |
| | | | Other | | 814.89 | 8,098.00 | 9,102.00 | 17,200.00 | 0.00 |
| | | | Insured Total | | 2,600.12 | 27,423.02 | 86,476.98 | 113,900.00 | 0.00 |
| Insured : Alameda - JBWCP | | | | | | | | | |
| Insured Total: 17 | | | Indemnity | | 2,296.00 | 33,139.40 | 66,884.12 | 100,023.52 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 7,552.71 | 66,325.29 | 192,555.80 | 258,881.09 | 0.00 |
| | | | Legal | | 0.00 | 2,237.79 | 11,262.21 | 13,500.00 | 0.00 |
| | | | Other | | 0.00 | 1,766.81 | 25,583.19 | 27,350.00 | 0.00 |
| | | | Insured Total | | 9,848.71 | 103,469.29 | 296,285.32 | 399,754.61 | 0.00 |
| Insured : Amador - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Amador - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|------|--------|----------|----------|------|------|
| Insured Total: 3 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 699.72 | 8,900.28 | 9,600.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 699.72 | 8,900.28 | 9,600.00 | 0.00 | 0.00 |

Insured : Butte - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|--------|----------|----------|-----------|------|------|
| Insured Total: 3 | | Indemnity | 0.00 | 757.94 | 568.46 | 1,326.40 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 347.94 | 2,333.05 | 8,566.95 | 10,900.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 347.94 | 3,090.99 | 9,135.41 | 12,226.40 | 0.00 | 0.00 |

Insured : Contra Costa - JBWCP

| | | | | | | | | |
|--------------------------|--|----------------------|----------|-----------|------------|------------|------|------|
| Insured Total: 14 | | Indemnity | 4,662.25 | 44,420.62 | 78,689.38 | 123,110.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 5,500.00 | 5,500.00 | 0.00 | 0.00 |
| | | Medical | 3,121.30 | 43,912.92 | 148,737.08 | 192,650.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | 0.00 |
| | | Other | 307.22 | 4,544.73 | 31,355.27 | 35,900.00 | 0.00 | 0.00 |
| | | Insured Total | 8,090.77 | 92,878.27 | 265,781.73 | 358,660.00 | 0.00 | 0.00 |

Insured : Court of Appeal, Fourth Appellate District - 34

| | | | | | | | | |
|-------------------------|--|----------------------|--------|----------|-----------|-----------|------|------|
| Insured Total: 3 | | Indemnity | 0.00 | 0.00 | 15,000.00 | 15,000.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 | 0.00 |
| | | Medical | 152.56 | 2,513.86 | 38,186.14 | 40,700.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 16,000.00 | 16,000.00 | 0.00 | 0.00 |
| | | Other | 215.07 | 2,010.15 | 1,989.85 | 4,000.00 | 0.00 | 0.00 |
| | | Insured Total | 367.63 | 4,524.01 | 71,675.99 | 76,200.00 | 0.00 | 0.00 |

Insured : Court of Appeal, Second Appellate District - 32

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Court of Appeal, Second Appellate District - 32

| | | | | | | | | |
|-------------------------|--|----------------------|------|--------|----------|----------|------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 184.25 | 5,515.75 | 5,700.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 128.62 | 371.38 | 500.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 312.87 | 5,887.13 | 6,200.00 | 0.00 | 0.00 |

Insured : Del Norte - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|----------|----------|-----------|-----------|------|------|
| Insured Total: 6 | | Indemnity | 0.00 | 0.00 | 7,279.41 | 7,279.41 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 294.54 | 4,025.80 | 55,934.20 | 59,960.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 1,215.00 | 16,495.00 | 17,710.00 | 0.00 | 0.00 |
| | | Other | 2,113.94 | 3,597.83 | 7,902.17 | 11,500.00 | 0.00 | 0.00 |
| | | Insured Total | 2,408.48 | 8,838.63 | 87,610.78 | 96,449.41 | 0.00 | 0.00 |

Insured : El Dorado - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|------|--------|-----------|-----------|------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 4,782.96 | 4,782.96 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 925.34 | 20,474.66 | 21,400.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 2,250.00 | 2,250.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 925.34 | 29,007.62 | 29,932.96 | 0.00 | 0.00 |

Insured : Fresno - JBWCP

| | | | | | | | | |
|--------------------------|--|----------------------|----------|-----------|------------|------------|------|------|
| Insured Total: 15 | | Indemnity | 0.00 | 17,362.63 | 27,691.77 | 45,054.40 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 4,672.73 | 42,854.13 | 206,045.87 | 248,900.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 2,214.98 | 7,885.02 | 10,100.00 | 0.00 | 0.00 |
| | | Insured Total | 4,672.73 | 62,431.74 | 241,622.66 | 304,054.40 | 0.00 | 0.00 |

Insured : Habeas Corpus Resource Center - 29

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Habeas Corpus Resource Center - 29

| | | | | | | | | |
|-------------------------|--|----------------------|------|--------|----------|----------|------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 290.17 | 2,909.83 | 3,200.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 290.17 | 2,909.83 | 3,200.00 | 0.00 | 0.00 |

Insured : Humboldt - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|--------|-----------|-----------|-----------|------|
| Insured Total: 3 | | Indemnity | 912.28 | 9,602.46 | 9,359.10 | 18,961.56 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 2,000.00 | 2,000.00 | 0.00 |
| | | Medical | 75.60 | 12,401.25 | 27,098.75 | 39,500.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 1,600.00 | 1,600.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 2,100.00 | 2,100.00 | 0.00 |
| | | Insured Total | 987.88 | 22,003.71 | 42,157.85 | 64,161.56 | 0.00 |

Insured : Imperial - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 5 | | Indemnity | 1,297.96 | 1,946.94 | 6,423.06 | 8,370.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 183.09 | 8,701.14 | 45,398.86 | 54,100.00 | 0.00 |
| | | Legal | 595.01 | 907.51 | 5,592.49 | 6,500.00 | 0.00 |
| | | Other | 884.96 | 1,306.58 | 3,693.42 | 5,000.00 | 0.00 |
| | | Insured Total | 2,961.02 | 12,862.17 | 61,107.83 | 73,970.00 | 0.00 |

Insured : Kern - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|-----------|------------|------------|------------|------|
| Insured Total: 26 | | Indemnity | 2,587.02 | 19,154.86 | 42,791.52 | 61,946.38 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 6,332.45 | 70,386.50 | 119,313.50 | 189,700.00 | 0.00 |
| | | Legal | 0.00 | 6,062.39 | 1,437.61 | 7,500.00 | 0.00 |
| | | Other | 1,128.80 | 4,533.60 | 17,266.40 | 21,800.00 | 0.00 |
| | | Insured Total | 10,048.27 | 100,137.35 | 180,809.03 | 280,946.38 | 0.00 |

Insured : Kings - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : Kings - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 2,707.66 | 217.85 | 2,925.51 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 1,055.47 | 10,518.61 | 5,981.39 | 16,500.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 250.00 | 250.00 | 0.00 |
| | | | Insured Total | | 1,055.47 | 13,226.27 | 6,449.24 | 19,675.51 | 0.00 |
| Insured : Lake - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 1,791.77 | 4,509.37 | 4,249.43 | 8,758.80 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 15,167.58 | 27,479.89 | 15,720.11 | 43,200.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 |
| | | | Insured Total | | 16,959.35 | 31,989.26 | 25,969.54 | 57,958.80 | 0.00 |
| Insured : Madera - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 2,252.18 | 2,747.82 | 5,000.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 2,252.18 | 2,747.82 | 5,000.00 | 0.00 |
| Insured : Marin - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | | 0.00 | 914.90 | 2,528.60 | 3,443.50 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 250.00 | 10,832.37 | 9,167.63 | 20,000.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 3,036.12 | 3,913.88 | 6,950.00 | 0.00 |
| | | | Insured Total | | 250.00 | 14,783.39 | 15,610.11 | 30,393.50 | 0.00 |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Mendocino - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 1,170.39 | 6,502.13 | 1,296.80 | 7,798.93 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | Medical | 823.66 | 10,245.03 | 18,754.97 | 29,000.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| Insured Total | | | 1,994.05 | 16,747.16 | 23,051.77 | 39,798.93 | 0.00 |

Insured : Merced - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 3 | | Indemnity | 1,489.52 | 5,730.16 | 373.84 | 6,104.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 576.61 | 7,859.51 | 14,540.49 | 22,400.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| Insured Total | | | 2,066.13 | 13,589.67 | 15,414.33 | 29,004.00 | 0.00 |

Insured : Monterey - JBWCP

| | | | | | | | |
|--------------------------|--|------------------|----------|-----------|------------|------------|------|
| Insured Total: 79 | | Indemnity | 0.00 | 3,118.22 | 65,907.47 | 69,025.69 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,046.11 | 16,768.05 | 522,531.95 | 539,300.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 847.65 | 185,502.35 | 186,350.00 | 0.00 |
| Insured Total | | | 1,046.11 | 20,733.92 | 773,941.77 | 794,675.69 | 0.00 |

Insured : Napa - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 4,603.05 | 2,390.97 | 6,994.02 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,149.46 | 11,351.24 | 11,148.76 | 22,500.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| Insured Total | | | 1,149.46 | 15,954.29 | 16,039.73 | 31,994.02 | 0.00 |

Insured : Orange - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : Orange - JBWCP | | | | | | | | | |
| Insured Total: 34 | | | Indemnity | 7,444.75 | 73,733.22 | 89,690.80 | 163,424.02 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 5,030.45 | 94,257.63 | 147,620.05 | 241,877.68 | 0.00 | |
| | | | Legal | 4,963.00 | 17,410.91 | 29,389.09 | 46,800.00 | 0.00 | |
| | | | Other | 1,685.52 | 13,992.35 | 27,407.40 | 41,399.75 | 0.00 | |
| | | | Insured Total | 19,123.72 | 199,394.11 | 294,107.34 | 493,501.45 | 0.00 | |
| Insured : Placer - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 214.53 | 2,657.75 | 9,942.25 | 12,600.00 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Insured Total | 214.53 | 2,657.75 | 9,942.25 | 12,600.00 | 0.00 | |
| Insured : Riverside - JBWCP | | | | | | | | | |
| Insured Total: 24 | | | Indemnity | 54.82 | 13,549.10 | 41,094.84 | 54,643.94 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 4,391.31 | 46,199.69 | 135,095.25 | 181,294.94 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 11,300.00 | 11,300.00 | 0.00 | |
| | | | Other | 487.80 | 4,339.29 | 15,435.71 | 19,775.00 | 0.00 | |
| | | | Insured Total | 4,933.93 | 64,088.08 | 202,925.80 | 267,013.88 | 0.00 | |
| Insured : Sacramento - JBWCP | | | | | | | | | |
| Insured Total: 11 | | | Indemnity | 3,526.64 | 12,615.13 | 23,369.98 | 35,985.11 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 2,092.21 | 22,604.53 | 90,552.65 | 113,157.18 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Other | 0.00 | 909.74 | 16,090.26 | 17,000.00 | 0.00 | |
| | | | Insured Total | 5,618.85 | 36,129.40 | 130,012.89 | 166,142.29 | 0.00 | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : San Benito - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 56.04 | 56.04 | 12,753.96 | 12,810.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | | Medical | | 25.00 | 25.00 | 17,975.00 | 18,000.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | | | Other | | 904.55 | 904.55 | 3,595.45 | 4,500.00 | 0.00 |
| | | | Insured Total | | 985.59 | 985.59 | 37,324.41 | 38,310.00 | 0.00 |
| Insured : San Bernardino - JBWCP | | | | | | | | | |
| Insured Total: 11 | | | Indemnity | | (603.20) | 13,983.64 | 41,379.91 | 55,363.55 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 4,081.84 | 37,585.00 | 103,627.42 | 141,212.42 | 0.00 |
| | | | Legal | | 800.00 | 2,615.00 | 7,390.00 | 10,005.00 | 0.00 |
| | | | Other | | 0.00 | 7,239.43 | 9,290.09 | 16,529.52 | 0.00 |
| | | | Insured Total | | 4,278.64 | 61,423.07 | 161,687.42 | 223,110.49 | 0.00 |
| Insured : San Diego - JBWCP | | | | | | | | | |
| Insured Total: 30 | | | Indemnity | | 2,455.82 | 60,195.70 | 60,276.59 | 120,472.29 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 7,315.51 | 112,267.86 | 152,436.68 | 264,704.54 | 0.00 |
| | | | Legal | | 65.00 | 65.00 | 13,935.00 | 14,000.00 | 0.00 |
| | | | Other | | 0.00 | 4,471.17 | 3,457.40 | 7,928.57 | 0.00 |
| | | | Insured Total | | 9,836.33 | 176,999.73 | 230,105.67 | 407,105.40 | 0.00 |
| Insured : San Francisco - JBWCP | | | | | | | | | |
| Insured Total: 20 | | | Indemnity | | 9,385.43 | 116,981.01 | 158,635.99 | 275,617.00 | 0.00 |
| | | | Rehab | | 0.00 | 409.50 | 24,590.50 | 25,000.00 | 0.00 |
| | | | Medical | | 11,508.81 | 129,474.17 | 271,525.83 | 401,000.00 | 0.00 |
| | | | Legal | | 148.50 | 3,163.70 | 22,336.30 | 25,500.00 | 0.00 |
| | | | Other | | 298.79 | 7,826.38 | 33,673.62 | 41,500.00 | 0.00 |
| | | | Insured Total | | 21,341.53 | 257,854.76 | 510,762.24 | 768,617.00 | 0.00 |
| Insured : San Joaquin - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> | |
|--|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-----------------|--------------------|-------------------|-------------------|-------------|
| Fiscal Year : 2006/2007 | | | | | | | | | | |
| Insured : San Joaquin - JBWCP | | | | | | | | | | |
| Insured Total: 5 | | | | | Indemnity | 653.76 | 6,324.92 | 15,583.64 | 21,908.56 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 2,191.02 | 8,380.50 | 36,569.50 | 44,950.00 | 0.00 |
| | | | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Other | 251.68 | 636.92 | 2,563.08 | 3,200.00 | 0.00 |
| | | | | | Insured Total | 3,096.46 | 15,342.34 | 54,716.22 | 70,058.56 | 0.00 |
| Insured : San Luis Obispo - JBWCP | | | | | | | | | | |
| Insured Total: 4 | | | | | Indemnity | 2,261.57 | 24,586.85 | 17,846.78 | 42,433.63 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 107.63 | 14,874.91 | 82,625.09 | 97,500.00 | 0.00 |
| | | | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Other | 0.00 | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| | | | | | Insured Total | 2,369.20 | 39,461.76 | 103,471.87 | 142,933.63 | 0.00 |
| Insured : San Mateo - JBWCP | | | | | | | | | | |
| Insured Total: 7 | | | | | Indemnity | 839.52 | 26,563.39 | 40,219.72 | 66,783.11 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 4,232.63 | 22,264.36 | 49,085.64 | 71,350.00 | 0.00 |
| | | | | | Legal | 877.50 | 877.50 | 3,622.50 | 4,500.00 | 0.00 |
| | | | | | Other | 1,154.85 | 2,213.87 | 13,236.13 | 15,450.00 | 0.00 |
| | | | | | Insured Total | 7,104.50 | 51,919.12 | 106,163.99 | 158,083.11 | 0.00 |
| Insured : Santa Barbara - JBWCP | | | | | | | | | | |
| Insured Total: 3 | | | | | Indemnity | 0.00 | 12,750.00 | 2,370.00 | 15,120.00 | 0.00 |
| | | | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Medical | 25.83 | 12,765.99 | 15,984.01 | 28,750.00 | 0.00 |
| | | | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | Insured Total | 25.83 | 25,515.99 | 18,354.01 | 43,870.00 | 0.00 |
| Insured : Santa Clara - JBWCP | | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Santa Clara - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|----------|------------|------------|------------|------|
| Insured Total: 26 | | Indemnity | 4,435.40 | 27,679.93 | 146,309.38 | 173,989.31 | 0.00 |
| | | Rehab | 0.00 | 1,626.13 | 21,883.87 | 23,510.00 | 0.00 |
| | | Medical | 3,117.10 | 83,949.76 | 234,100.76 | 318,050.52 | 0.00 |
| | | Legal | 694.40 | 13,064.98 | 30,445.02 | 43,510.00 | 0.00 |
| | | Other | 137.71 | 13,183.90 | 48,517.80 | 61,701.70 | 0.00 |
| | | Insured Total | 8,384.61 | 139,504.70 | 481,256.83 | 620,761.53 | 0.00 |

Insured : Santa Cruz - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|--------|-----------|-----------|-----------|------|
| Insured Total: 2 | | Indemnity | 104.00 | 184.48 | 9,019.52 | 9,204.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | | Medical | 261.61 | 9,521.56 | 18,378.44 | 27,900.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 2,000.00 | 2,000.00 | 0.00 |
| | | Other | 0.00 | 1,018.54 | 4,981.46 | 6,000.00 | 0.00 |
| | | Insured Total | 365.61 | 10,724.58 | 36,879.42 | 47,604.00 | 0.00 |

Insured : Shasta - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|-----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 2,162.12 | 4,324.24 | 25,519.61 | 29,843.85 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 444.00 | 3,630.95 | 56,569.05 | 60,200.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 2,895.00 | 3,105.00 | 6,000.00 | 0.00 |
| | | Insured Total | 2,606.12 | 10,850.19 | 85,193.66 | 96,043.85 | 0.00 |

Insured : Sierra - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|----------|-----------|-----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 3,996.26 | 3,996.26 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 2,378.36 | 10,821.64 | 13,200.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 |
| | | Insured Total | 0.00 | 2,378.36 | 15,567.90 | 17,946.26 | 0.00 |

Insured : Siskiyou - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : Siskiyou - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | 939.20 | 8,690.62 | 8,920.58 | 17,611.20 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 1,674.03 | 4,168.45 | 28,031.55 | 32,200.00 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Other | 0.00 | 0.00 | 1,750.00 | 1,750.00 | 0.00 | |
| | | | Insured Total | 2,613.23 | 12,859.07 | 38,702.13 | 51,561.20 | 0.00 | |
| Insured : Solano - JBWCP | | | | | | | | | |
| Insured Total: 14 | | | Indemnity | 1,139.67 | 14,534.27 | 58,150.34 | 72,684.61 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 10,000.00 | 10,000.00 | 0.00 | |
| | | | Medical | 3,571.75 | 45,565.30 | 181,694.77 | 227,260.07 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 4,500.00 | 4,500.00 | 0.00 | |
| | | | Other | 0.00 | 2,012.70 | 5,187.30 | 7,200.00 | 0.00 | |
| | | | Insured Total | 4,711.42 | 62,112.27 | 259,532.41 | 321,644.68 | 0.00 | |
| Insured : Sonoma - JBWCP | | | | | | | | | |
| Insured Total: 2 | | | Indemnity | 0.00 | 0.00 | 26,812.05 | 26,812.05 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 0.00 | 525.00 | 34,475.00 | 35,000.00 | 0.00 | |
| | | | Legal | 0.00 | 4,732.00 | 27,808.00 | 32,540.00 | 0.00 | |
| | | | Other | 0.00 | 98.76 | 4,401.24 | 4,500.00 | 0.00 | |
| | | | Insured Total | 0.00 | 5,355.76 | 93,496.29 | 98,852.05 | 0.00 | |
| Insured : Stanislaus - JBWCP | | | | | | | | | |
| Insured Total: 4 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| | | | Medical | 743.70 | 8,363.00 | 19,759.55 | 28,122.55 | 0.00 | |
| | | | Legal | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 | |
| | | | Other | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 | |
| | | | Insured Total | 743.70 | 8,363.00 | 20,759.55 | 29,122.55 | 0.00 | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2006/2007

Insured : Supreme Court of California - 26

| | | | | | | | | |
|-------------------------|--|--|----------------------|------|--------|----------|----------|------|
| Insured Total: 1 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 0.00 | 0.00 | 5,000.00 | 5,000.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 311.20 | 1,188.80 | 1,500.00 | 0.00 |
| | | | Insured Total | 0.00 | 311.20 | 6,188.80 | 6,500.00 | 0.00 |

Insured : Sutter - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|------|------|--------|--------|------|
| Insured Total: 1 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |

Insured : Trial Court Judges - 45

| | | | | | | | | |
|-------------------------|--|--|----------------------|------|----------|----------|----------|------|
| Insured Total: 2 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 0.00 | 1,763.60 | 1,936.40 | 3,700.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | 0.00 | 1,763.60 | 1,936.40 | 3,700.00 | 0.00 |

Insured : Tulare - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|--------|-----------|-----------|-----------|------|
| Insured Total: 7 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 887.32 | 11,393.97 | 20,906.03 | 32,300.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | | | Other | 0.00 | 1,102.32 | 997.68 | 2,100.00 | 0.00 |
| | | | Insured Total | 887.32 | 12,496.29 | 24,403.71 | 36,900.00 | 0.00 |

Insured : Ventura - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|---|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|--------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2006/2007 | | | | | | | | | |
| Insured : Ventura - JBWCP | | | | | | | | | |
| Insured Total: 5 | | | Indemnity | | 0.00 | 0.00 | 3,232.42 | 3,232.42 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 387.95 | 6,723.94 | 12,876.06 | 19,600.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 8,500.00 | 8,500.00 | 0.00 |
| | | | Other | | 391.92 | 2,181.59 | 5,818.41 | 8,000.00 | 0.00 |
| | | | Insured Total | | 779.87 | 8,905.53 | 30,426.89 | 39,332.42 | 0.00 |
| Insured : Yolo - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 179.52 | 2,442.32 | 5,757.68 | 8,200.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 179.52 | 2,442.32 | 5,757.68 | 8,200.00 | 0.00 |
| Fiscal Year Total: 427 | | | Indemnity | | 51,062.73 | 571,222.88 | 1,131,617.11 | 1,702,839.99 | 0.00 |
| | | | Rehab | | 0.00 | 2,035.63 | 69,474.37 | 71,510.00 | 0.00 |
| | | | Medical | | 96,486.59 | 1,053,657.82 | 3,286,463.17 | 4,340,120.99 | 0.00 |
| | | | Legal | | 8,727.61 | 54,662.88 | 226,802.12 | 281,465.00 | 0.00 |
| | | | Other | | 10,777.70 | 97,422.78 | 514,611.76 | 612,034.54 | 0.00 |
| | | | Fiscal Year Total | | 167,054.63 | 1,779,001.99 | 5,228,968.53 | 7,007,970.52 | 0.00 |
| Fiscal Year : 2007/2008 | | | | | | | | | |
| Insured : Administrative Office of the Courts - 27 | | | | | | | | | |
| Insured Total: 11 | | | Indemnity | | 0.00 | 0.00 | 5,500.00 | 5,500.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 39,400.00 | 39,400.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 16,800.00 | 16,800.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 61,700.00 | 61,700.00 | 0.00 |
| Insured : Alameda - JBWCP | | | | | | | | | |

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Alameda - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|------|------|----------|----------|------|------|------|
| Insured Total: 4 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 3,400.00 | 3,400.00 | 0.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 0.00 | 3,400.00 | 3,400.00 | 0.00 | 0.00 | 0.00 |

Insured : Butte - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|-------|--------|----------|----------|------|------|------|
| Insured Total: 3 | | Indemnity | 0.00 | 591.47 | 591.47 | 1,182.94 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 94.38 | 217.45 | 7,882.55 | 8,100.00 | 0.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 94.38 | 808.92 | 8,474.02 | 9,282.94 | 0.00 | 0.00 | 0.00 |

Insured : Contra Costa - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|----------|----------|-----------|-----------|------|------|------|
| Insured Total: 7 | | Indemnity | 125.95 | 125.95 | 3,400.69 | 3,526.64 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,387.00 | 1,562.00 | 11,938.00 | 13,500.00 | 0.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 762.50 | 762.50 | 2,737.50 | 3,500.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 2,275.45 | 2,450.45 | 18,076.19 | 20,526.64 | 0.00 | 0.00 | 0.00 |

Insured : Del Norte - JBWCP

| | | | | | | | | | |
|-------------------------|--|----------------------|--------|--------|-----------|-----------|------|------|------|
| Insured Total: 3 | | Indemnity | 0.00 | 0.00 | 1,647.00 | 1,647.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 20,000.00 | 20,000.00 | 0.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 14,600.00 | 14,600.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 883.96 | 883.96 | 7,016.04 | 7,900.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 883.96 | 883.96 | 43,263.04 | 44,147.00 | 0.00 | 0.00 | 0.00 |

Insured : Fresno - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Fresno - JBWCP

| | | | | | | | | | |
|-------------------------|----------------------|--------|--------|-----------|-----------|------|--|--|--|
| Insured Total: 9 | Indemnity | 0.00 | 431.90 | 0.00 | 431.90 | 0.00 | | | |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | |
| | Medical | 311.28 | 311.28 | 12,788.72 | 13,100.00 | 0.00 | | | |
| | Legal | 0.00 | 0.00 | 1,300.00 | 1,300.00 | 0.00 | | | |
| | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | | | |
| | Insured Total | 311.28 | 743.18 | 15,588.72 | 16,331.90 | 0.00 | | | |

Insured : Glenn - JBWCP

| | | | | | | | | | |
|-------------------------|----------------------|----------|----------|-----------|-----------|------|--|--|--|
| Insured Total: 1 | Indemnity | 1,056.54 | 1,056.54 | 6,986.16 | 8,042.70 | 0.00 | | | |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | |
| | Medical | 0.00 | 0.00 | 9,200.00 | 9,200.00 | 0.00 | | | |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | |
| | Other | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 | | | |
| | Insured Total | 1,056.54 | 1,056.54 | 16,936.16 | 17,992.70 | 0.00 | | | |

Insured : Humboldt - JBWCP

| | | | | | | | | | |
|-------------------------|----------------------|------|------|-----------|-----------|------|--|--|--|
| Insured Total: 2 | Indemnity | 0.00 | 0.00 | 12,810.00 | 12,810.00 | 0.00 | | | |
| | Rehab | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | | | |
| | Medical | 0.00 | 0.00 | 15,700.00 | 15,700.00 | 0.00 | | | |
| | Legal | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 | | | |
| | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 | | | |
| | Insured Total | 0.00 | 0.00 | 32,010.00 | 32,010.00 | 0.00 | | | |

Insured : Imperial - JBWCP

| | | | | | | | | | |
|-------------------------|----------------------|--------|--------|-----------|-----------|------|--|--|--|
| Insured Total: 3 | Indemnity | 0.00 | 0.00 | 8,070.00 | 8,070.00 | 0.00 | | | |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | |
| | Medical | 460.24 | 842.24 | 31,557.76 | 32,400.00 | 0.00 | | | |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | |
| | Other | 0.00 | 0.00 | 600.00 | 600.00 | 0.00 | | | |
| | Insured Total | 460.24 | 842.24 | 40,227.76 | 41,070.00 | 0.00 | | | |

Insured : Kern - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Kern - JBWCP

| | | | | | | | | |
|--------------------------|--|----------------------|--------|----------|-----------|-----------|------|------|
| Insured Total: 11 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 759.22 | 1,548.19 | 17,051.81 | 18,600.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 2,100.00 | 2,100.00 | 0.00 | 0.00 |
| | | Insured Total | 759.22 | 1,548.19 | 19,151.81 | 20,700.00 | 0.00 | 0.00 |

Insured : Kings - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|--------|--------|--------|----------|------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 316.56 | 887.00 | 513.00 | 1,400.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 316.56 | 887.00 | 513.00 | 1,400.00 | 0.00 | 0.00 |

Insured : Lake - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|------|------|--------|--------|------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 | 0.00 |

Insured : Madera - JBWCP

| | | | | | | | | |
|-------------------------|--|----------------------|------|------|----------|----------|------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 1,400.00 | 1,400.00 | 0.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 0.00 | 1,400.00 | 1,400.00 | 0.00 | 0.00 |

Insured : Mendocino - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Mendocino - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|--------|--------|-----------|-----------|------|
| Insured Total: 3 | | | Indemnity | 0.00 | 0.00 | 4,400.00 | 4,400.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 111.61 | 111.61 | 11,288.39 | 11,400.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 3,950.00 | 3,950.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | 111.61 | 111.61 | 19,638.39 | 19,750.00 | 0.00 |

Insured : Merced - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|------|------|--------|--------|------|
| Insured Total: 1 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |

Insured : Monterey - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|-------|-------|-----------|-----------|------|
| Insured Total: 2 | | | Indemnity | 0.00 | 0.00 | 959.78 | 959.78 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 62.49 | 62.49 | 9,937.51 | 10,000.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 5,450.00 | 5,450.00 | 0.00 |
| | | | Insured Total | 62.49 | 62.49 | 16,347.29 | 16,409.78 | 0.00 |

Insured : Napa - JBWCP

| | | | | | | | | |
|-------------------------|--|--|----------------------|--------|--------|--------|--------|------|
| Insured Total: 1 | | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | 153.87 | 153.87 | 546.13 | 700.00 | 0.00 |
| | | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | 153.87 | 153.87 | 546.13 | 700.00 | 0.00 |

Insured : Orange - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Orange - JBWCP

| | | | | | | | |
|--------------------------|--|----------------------|----------|----------|-----------|-----------|------|
| Insured Total: 15 | | Indemnity | 1,426.33 | 1,426.33 | 0.00 | 1,426.33 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 573.35 | 2,129.19 | 19,970.81 | 22,100.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 391.50 | 358.50 | 750.00 | 0.00 |
| | | Insured Total | 1,999.68 | 3,947.02 | 20,329.31 | 24,276.33 | 0.00 |

Insured : Placer - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|------|-----------|-----------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 11,400.00 | 11,400.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | Insured Total | 0.00 | 0.00 | 12,400.00 | 12,400.00 | 0.00 |

Insured : Plumas - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|------|------|----------|----------|------|
| Insured Total: 2 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 3,200.00 | 3,200.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Insured Total | 0.00 | 0.00 | 3,200.00 | 3,200.00 | 0.00 |

Insured : Riverside - JBWCP

| | | | | | | | |
|-------------------------|--|----------------------|----------|----------|-----------|-----------|------|
| Insured Total: 9 | | Indemnity | 2,084.46 | 2,084.46 | 15,515.54 | 17,600.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 402.14 | 690.81 | 21,749.19 | 22,440.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 8,000.00 | 8,000.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | | Insured Total | 2,486.60 | 2,775.27 | 45,764.73 | 48,540.00 | 0.00 |

Insured : Sacramento - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Sacramento - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|----------|----------|-----------|-----------|------|
| Insured Total: 5 | | Indemnity | 802.02 | 3,123.80 | 2,934.29 | 6,058.09 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,339.11 | 2,583.95 | 41,716.05 | 44,300.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 2,750.00 | 2,750.00 | 0.00 |
| Insured Total | | | 2,141.13 | 5,707.75 | 47,400.34 | 53,108.09 | 0.00 |

Insured : San Benito - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|--------|--------|--------|----------|------|
| Insured Total: 1 | | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 349.51 | 687.11 | 812.89 | 1,500.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Insured Total | | | 349.51 | 687.11 | 812.89 | 1,500.00 | 0.00 |

Insured : San Bernardino - JBWCP

| | | | | | | | |
|-------------------------|--|------------------|----------|----------|-----------|-----------|------|
| Insured Total: 7 | | Indemnity | 0.00 | 0.00 | 1,200.00 | 1,200.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 1,130.40 | 3,229.13 | 23,240.87 | 26,470.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| Insured Total | | | 1,130.40 | 3,229.13 | 27,440.87 | 30,670.00 | 0.00 |

Insured : San Diego - JBWCP

| | | | | | | | |
|--------------------------|--|------------------|----------|----------|-----------|-----------|------|
| Insured Total: 20 | | Indemnity | 2,976.00 | 2,976.00 | 7,914.00 | 10,890.00 | 0.00 |
| | | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Medical | 0.00 | 0.00 | 58,690.00 | 58,690.00 | 0.00 |
| | | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | Other | 0.00 | 0.00 | 250.00 | 250.00 | 0.00 |
| Insured Total | | | 2,976.00 | 2,976.00 | 66,854.00 | 69,830.00 | 0.00 |

Insured : San Francisco - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
 Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : San Francisco - JBWCP

| | | | | | | |
|--------------------------|----------------------|----------|-----------|-----------|------------|------|
| Insured Total: 14 | Indemnity | 5,289.94 | 14,232.45 | 28,473.55 | 42,706.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 6,000.00 | 6,000.00 | 0.00 |
| | Medical | 865.92 | 4,137.61 | 50,662.39 | 54,800.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| | Other | 0.00 | 0.00 | 8,500.00 | 8,500.00 | 0.00 |
| | Insured Total | 6,155.86 | 18,370.06 | 96,635.94 | 115,006.00 | 0.00 |

Insured : San Joaquin - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|------|-----------|-----------|------|
| Insured Total: 5 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 0.00 | 13,600.00 | 13,600.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 1,100.00 | 1,100.00 | 0.00 |
| | Insured Total | 0.00 | 0.00 | 14,700.00 | 14,700.00 | 0.00 |

Insured : San Mateo - JBWCP

| | | | | | | |
|-------------------------|----------------------|--------|--------|----------|----------|------|
| Insured Total: 3 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 148.24 | 385.73 | 1,614.27 | 2,000.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 148.24 | 385.73 | 1,614.27 | 2,000.00 | 0.00 |

Insured : Santa Clara - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|------|-----------|-----------|------|
| Insured Total: 9 | Indemnity | 0.00 | 0.00 | 17,875.00 | 17,875.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | Medical | 0.00 | 0.00 | 22,100.00 | 22,100.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | Other | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | Insured Total | 0.00 | 0.00 | 43,475.00 | 43,475.00 | 0.00 |

Insured : Santa Cruz - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Santa Cruz - JBWCP

| | | | | | | |
|-------------------------|----------------------|--------|----------|-----------|-----------|------|
| Insured Total: 2 | Indemnity | 450.65 | 450.65 | 18,139.35 | 18,590.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 1,500.00 | 1,500.00 | 0.00 |
| | Medical | 213.00 | 920.64 | 27,279.36 | 28,200.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 500.00 | 500.00 | 0.00 |
| | Other | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | Insured Total | 663.65 | 1,371.29 | 48,418.71 | 49,790.00 | 0.00 |

Insured : Siskiyou - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|------|----------|----------|------|
| Insured Total: 1 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 0.00 | 5,950.00 | 5,950.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 0.00 | 0.00 | 5,950.00 | 5,950.00 | 0.00 |

Insured : Solano - JBWCP

| | | | | | | |
|-------------------------|----------------------|--------|----------|-----------|-----------|------|
| Insured Total: 3 | Indemnity | 0.00 | 0.00 | 1,364.26 | 1,364.26 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 267.55 | 1,359.04 | 21,840.96 | 23,200.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 597.70 | 597.70 | 2,402.30 | 3,000.00 | 0.00 |
| | Insured Total | 865.25 | 1,956.74 | 25,607.52 | 27,564.26 | 0.00 |

Insured : Sonoma - JBWCP

| | | | | | | |
|-------------------------|----------------------|------|--------|-----------|-----------|------|
| Insured Total: 3 | Indemnity | 0.00 | 0.00 | 1,589.34 | 1,589.34 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 175.00 | 12,025.00 | 12,200.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| | Other | 0.00 | 0.00 | 2,500.00 | 2,500.00 | 0.00 |
| | Insured Total | 0.00 | 175.00 | 19,114.34 | 19,289.34 | 0.00 |

Insured : Stanislaus - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07
 Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|-------------|--------------------|-----------------|-----------------|

Fiscal Year : 2007/2008

Insured : Stanislaus - JBWCP

| | | | | | | | | |
|-------------------------|----------------------|--------|--------|----------|----------|------|------|------|
| Insured Total: 4 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 368.77 | 368.77 | 4,931.23 | 5,300.00 | 0.00 | 0.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 650.00 | 650.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 368.77 | 368.77 | 5,581.23 | 5,950.00 | 0.00 | 0.00 | 0.00 |

Insured : Sutter - JBWCP

| | | | | | | | | |
|-------------------------|----------------------|--------|----------|-----------|-----------|------|------|------|
| Insured Total: 2 | Indemnity | 0.00 | 802.63 | 5,144.45 | 5,947.08 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 892.36 | 1,303.26 | 11,596.74 | 12,900.00 | 0.00 | 0.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 750.00 | 750.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 892.36 | 2,105.89 | 17,491.19 | 19,597.08 | 0.00 | 0.00 | 0.00 |

Insured : Tehama - JBWCP

| | | | | | | | | |
|-------------------------|----------------------|--------|--------|----------|----------|------|------|------|
| Insured Total: 2 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 160.70 | 160.70 | 1,239.30 | 1,400.00 | 0.00 | 0.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 160.70 | 160.70 | 1,239.30 | 1,400.00 | 0.00 | 0.00 | 0.00 |

Insured : Trial Court Judges - 45

| | | | | | | | | |
|-------------------------|----------------------|------|------|--------|--------|------|------|------|
| Insured Total: 1 | Indemnity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Rehab | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Medical | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 | 0.00 | 0.00 |
| | Legal | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Other | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | Insured Total | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 | 0.00 | 0.00 |

Insured : Tulare - JBWCP

Custom Claim Summary

09/01/2007 - 09/30/2007

JBWCP Open Claims DOI 1/1/2001 thru 9/30/07

Sorted by fiscal year and location

| <u>Claim Number/ Claim Type</u> | <u>Claimant Name/ Claimant Status</u> | <u>Injury Date/ Closed Date</u> | <u>Litigated/ Examiner</u> | <u>Denied/ Adj. Loc. Recd.</u> | <u>Paid this Period</u> | <u>Paid</u> | <u>Outstanding</u> | <u>Incurred</u> | <u>Recovery</u> |
|-------------------------------------|---|-------------------------------------|--------------------------------|------------------------------------|-----------------------------|---------------|--------------------|-----------------|-----------------|
| Fiscal Year : 2007/2008 | | | | | | | | | |
| Insured : Tulare - JBWCP | | | | | | | | | |
| Insured Total: 8 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 960.70 | 1,812.54 | 26,837.46 | 28,650.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 1,000.00 | 1,000.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 4,700.00 | 4,700.00 | 0.00 |
| | | | Insured Total | | 960.70 | 1,812.54 | 32,537.46 | 34,350.00 | 0.00 |
| Insured : Ventura - JBWCP | | | | | | | | | |
| Insured Total: 3 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 3,900.00 | 3,900.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 3,900.00 | 3,900.00 | 0.00 |
| Insured : Yolo - JBWCP | | | | | | | | | |
| Insured Total: 1 | | | Indemnity | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Medical | | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Other | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | Insured Total | | 0.00 | 0.00 | 700.00 | 700.00 | 0.00 |
| Fiscal Year Total: 188 | | | Indemnity | | 14,211.89 | 27,302.18 | 144,514.88 | 171,817.06 | 0.00 |
| | | | Rehab | | 0.00 | 0.00 | 10,500.00 | 10,500.00 | 0.00 |
| | | | Medical | | 11,328.40 | 25,639.61 | 579,760.39 | 605,400.00 | 0.00 |
| | | | Legal | | 0.00 | 0.00 | 36,350.00 | 36,350.00 | 0.00 |
| | | | Other | | 2,244.16 | 2,635.66 | 69,414.34 | 72,050.00 | 0.00 |
| | | | Fiscal Year Total | | 27,784.45 | 55,577.45 | 840,539.61 | 896,117.06 | 0.00 |
| Grand Total: 1356 | | | Indemnity | | 343,170.53 | 13,563,738.00 | 6,215,323.14 | 19,779,061.14 | (37,777.95) |
| | | | Rehab | | 14,319.61 | 570,169.54 | 765,222.71 | 1,335,392.25 | (458.23) |
| | | | Medical | | 244,678.66 | 13,535,749.86 | 13,145,162.54 | 26,680,912.40 | (93,811.95) |
| | | | Legal | | 146,838.32 | 2,636,948.34 | 1,261,691.26 | 3,898,639.60 | 0.00 |
| | | | Other | | 28,119.55 | 1,041,148.99 | 1,483,889.84 | 2,525,038.83 | 4,786.72 |
| | | | Grand Total | | 777,126.67 | 31,347,754.73 | 22,871,289.49 | 54,219,044.22 | (127,261.41) |