



# Client Loss Report

CALIFORNIA ROADWAYS INC

IMP E958835												0 Claim Count	
Policy	Policy Period	Claim Number	Loss Date	Loss State	Reported Date	Claimant Name	Claim Adjuster Name	Cause Loss Description	Claim Status	Total Incurred	Total Incurred Details		
IMP E958835	03/09/2024 to 03/09/2025	No Losses											
										<b>0 Claim Count</b>	<b>\$ 0.00</b>	<b>Subtotal for Policy Period</b>	
	03/09/2023 to 03/09/2024	No Losses											
										<b>0 Claim Count</b>	<b>\$ 0.00</b>	<b>Subtotal for Policy Period</b>	
									<b>0 Claim Count</b>	<b>\$ 0.00</b>	<b>Total for IMP E958835</b>		
									<b>0 Total Claim Count</b>		<b>Total For Customer</b>		