

xvyonau Ynsurance Company

1045 Riverside Avenue, Suite 155 • Jacksonville, Florida 32204

75 (0796

	File #	
Primary Carrier	ARGONAUT INSURANCE COMPANY	*.*
Policy Number	83 294-601705	
	ADGOVANT TUCKDANCE COMMANY	
Excess Carrier	ARGONAUT INSURANCE COMPANY	<u></u>
Policy Number	83-300 813351	_
		-
Insured	DAVID V. HICKS, M.D.	<u></u>
Address	709 LOMAY STREET, JACKSONVILLE, FL	
Specialty	PSYCHIATRY	<u> </u>
Date of incident	4/6/73	_
Date of Suit	9/11/73	
		The second secon
Disposition of incide	ent:	
Date	12/10/74	en e
Settlement \$	8,250,00	
	.54067-25.	
Summary Judgemer	NATE OF THE PARTY	
Directed Verdict		
	N/A	
Reason for final dis	position, if no settlement.	

Summary of occurrence which created claim.

Insured doctor admitted patient to psychiatric ward of hospital and she jumped out of window and fractured a lumbar vertabrae.