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COMMERCIAL UNION ASSURANCE COMPANIES  
801 Riverside Ave.  
Jacksonville, Florida 32204

Primary Carrier Employers Fire Ins.Co. File # OBI X2-6844

Policy Number \_\_\_\_\_

Excess Carrier Unknown

Policy Number \_\_\_\_\_

Insured Dr. C. P. Deminico

Address 1211 N. W. Shore Blvd., Tampa, Fla.

Specialty Neurology

Date of incident 5/29/72

Date of Suit None

Disposition of incident:

Date 11/20/75

Settlement Nil

Defense Cost \$16

Summary Judgement No

Directed Verdict No

Let out by the jury No

Reason for final disposition, if no settlement. Claim not pressed against insured.

Summary of occurrence which created claim. Claimant alleged that she was admitted to hospital for psychiatric treatment against her consent.

JPK/jw