



# Argonaut Insurance Company

9200 S. Dadeland Blvd., Suite 400, Miami, Florida 33156

78 1255

File # 83M004482-1

Primary Carrier ARGONAUT INSURANCE COMPANY

Policy Number GL83-318-603232

Excess Carrier UNKNOWN

Policy Number UNKNOWN

Insured DAVID TINGLE, M.D.

Address BOX 3248 VERO BEACH, FLORIDA

Specialty PSYCHIATRIST

Date of incident 1-3-75

Date of Suit 4-26-76

MEDICAL MEDIATION CLAIM NONE

Disposition of incident:

Date N/A

Settlement \$ 0

Defense Cost \$ 0

Summary Judgement N/A

Directed Verdict N/A

Let out by the jury N/A

**Reason for final disposition, if no settlement.**

NO FURTHER ACTION.  
FILE CLOSED 7-6-78.

**Summary of occurrence which created claim.**

PATIENT ALLEGES FALSE IMPRISONMENT BY INSURED, HE IS REPRESENTING HIMSELF AND HAS FILED SUIT AGAINST SEVERAL PEOPLE.