## **COOK COUNTY GOVERNMENT**

## **Self Insurance Liability Claim Settlements Report**

Claim Number	Claimant/Payee Name			Department Name	Loss Date	Transact ion Date	Amount	Damaged Property	Bodily Injury	County Driver Name	Prior Auto Accid ents	Alleged Damages	Detailed Loss Description
Transaction Date: 10/2025													
202519009	Bruce Powers	GL	1501	Mft Illinois First (Ist)	2/16/2025	10/2/2025	\$650.00	Mailbox					Department of Transportation and Highways was plowing near 287 Donlea Rd in Barrington Hills and struck the claimant's mailbox causing damage.
202518687	Rae Harris	GL	4897	Stroger Hospital Of Cook Cnty	5/27/2025	10/9/2025	\$5,038.00	Partial Dentures					Claimant's dentures were misplaced by the staff at John H. Stroger, Jr. Hospital.
Totals for <b>10/2025</b> - 2 Claims					\$5,688.00								
Grand Totals - 2 Claims						\$5,688.00							



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## **Report Definition**

**Description:** 

Filters: Coverage (Claim) is equal to Auto Liability or General Liability and Transaction Date is between 10/01/2025 and

10/31/2025 and Location (Budget) (Claim) is not equal to FPD - 0 and Payment Type is equal to Comptroller and

Settled By is equal to Risk Management

**Groups:** Transaction Date Monthly

Sorts: No Sorts

Options: None

Run Date: 10/24/2025