



# Argonaut Insurance Company 760842

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

File # 83M004669

Primary Carrier ARGONAUT INSURANCE COMPANY

Policy Number GL83-306-602557

Excess Carrier ARGONAUT INSURANCE COMPANY

Policy Number IL83-300-813030

Insured EDWARD ROSSARIO, M.D.

Address 631 N. OLANDER AVENUE, DAYTONA BEACH, FLORIDA

Specialty PSYCHIATRIST

Date of incident 5-20-74

Date of Suit NONE

MEDICAL MEDIATION CLAIM 5-25-76

Disposition of incident:

Date 11-10-76

Settlement \$ 25,000.00

Defense Cost \$ 17,790.38

Summary Judgement N/A

Directed Verdict N/A

Let out by the jury N/A

Reason for final disposition, if no settlement.

Summary of occurrence which created claim.  
PATIENT ALLEGES IMPROPER TREATMENT BY INSURED.