



# Argonaut Insurance Company

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

File # 83M 004551

781253

Primary Carrier Argonaut Insurance Company

Policy Number GL-83-306-602359

Excess Carrier Argonaut Insurance Company

Policy Number IL-83-300-813718

Insured William H. McCullah, M.D.

Address 709 Lomax St., Jacksonville, FL 32204

Specialty Psychiatrist

Date of incident 3-21-74

Date of Suit 1-27-77

Medical Mediation Claim: 3-17-76

Disposition of incident: Settlement

Date 11-14-78

Settlement \$ \$4,000.00

Defense Cost \$ \$3,321.75

Summary Judgement Settlement

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 failure to order restraints for her and she was injured as a result.