

**New Jersey Schedule "Q" - Accident Year Call for Compensation Experience Valued as of December 31, 2011  
Workers Compensation Insurance Plan Only (Call # 2Q)**

Carrier / Group \_\_\_\_\_

Submitted by: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Accident Year	(1)	(2)	(3)	Accumulated Accident Year Incurred Losses			
				Paid (Pg. 2 (9) + (10)) (4)	Outstanding Excl. IBNR & Bulk (Pg. 2 (11) + (12)) (5)	IBNR & Bulk Reserves (Pg. 2 (13) + (14)) (6)	Total Incurred Losses Incl. IBNR & Bulk (4) + (5) + (6) (7)
A. 1970 - 1987	R E S E R V E D  F O R  F U T U R E  U S E						
B. 1988							
C. 1989							
D. 1990							
E. 1991							
F. 1992							
G. 1993							
H. 1994							
I. 1995							
J. 1996							
K. 1997							
L. 1998							
M. 1999							
N. 2000							
O. 2001							
P. 2002							
Q. 2003							
R. 2004							
S. 2005							
T. 2006							
U. 2007							
V. 2008							
W. 2009							
X. 2010							
Y. 2011							
XX. Total as of 12/31/2011							

**This report is due on April 2, 2012.**

Send to: Mr. Chuck Santoro, Senior Actuarial Analyst, Compensation Rating & Inspection Bureau, 60 Park Place, Newark, New Jersey 07102

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**Accumulated Accident Year Incurred Losses**

Accident Year	Accident Year Incurred Indemnity Claim Count			Paid		Outstanding Excluding IBNR & Bulk		IBNR & Bulk Reserves	
	TOTAL (8A) + (8B) (8)	Accumulated Closed (Paid) (8A)	Open (Outstanding) (8B)	Indemnity (9)	Medical (10)	Indemnity (11)	Medical (12)	Indemnity (13)	Medical (14)
A. 1970 - 1987									
B. 1988									
C. 1989									
D. 1990									
E. 1991									
F. 1992									
G. 1993									
H. 1994									
I. 1995									
J. 1996									
K. 1997									
L. 1998									
M. 1999									
N. 2000									
O. 2001									
P. 2002									
Q. 2003									
R. 2004									
S. 2005									
T. 2006									
U. 2007									
V. 2008									
W. 2009									
X. 2010									
Y. 2011									
XX. Total as of 12/31/2011	x x x x	x x x x	x x x x						

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