

{INCLUDETEXT

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App_expxx2x1s6rv4\\LocalState\\OspreyDocuments\\23b4f10a-d8b8-4582-9925-
e4dcb7b84a1c\\header.doc"}

Our Ref: { MERGEFIELD MATTER_FEE_EARNER_ID }/{ MERGEFIELD
 client_no }/{ MERGEFIELD matter_no }

Your Ref:

{ SET LETTER{ DATE \@ "d MMMM yyyy" } }{ref LETTER \@ "d MMMM yyyy" \ *
MERGEFORMAT }

{ IF { MERGEFIELD TK_PICLIENINFO_tkCLIENTMINOR } = "Yes" "{ MERGEFIELD
TK_PICLIENINFO_TK_LITFRNDTITLE } { MERGEFIELD
TK_PICLIENINFO_TK_LITFRNDFORE } { MERGEFIELD
TK_PICLIENINFO_TK_LITFRNDSURN }
{ MERGEFIELD TK_PICLIENINFO_TK_LITFRNDADDR }" "{ MERGEFIELD
LINKNAME_TITLE_1 } { MERGEFIELD LINKNAME_INITIALS_1 } { MERGEFIELD
LINKNAME_SURNAME_1 }
{ MERGEFIELD CALCULATION_ADDRESS }" }

Dear { IF { MERGEFIELD TK_PICLIENINFO_tkCLIENTMINOR } = "Yes" "{ MERGEFIELD
TK_PICLIENINFO_TK_LITFRNDTITLE } { MERGEFIELD
TK_PICLIENINFO_TK_LITFRNDSURN }" "{ IF { MERGEFIELD
TK_PICLIENINFO_tk_SALUTATION } = "" "{ MERGEFIELD LINKNAME_TITLE_1 } {
MERGEFIELD LINKNAME_SURNAME_1 }" "{ MERGEFIELD
TK_PICLIENINFO_tk_SALUTATION }" }" }

Re: { MERGEFIELD MATTER MATTER DESCRIPTION }

I write to update you on the progress with this claim.

Thank you for returning the Settlement Authority Infant Claim Form confirming that you are happy with the medical evidence, Schedule of Loss and valuation together with our settlement offer advice.

I confirm the formal offer with supporting medical evidence and Schedule of Loss have now been sent to the defendant insurers.

They now have 28 days in which to respond to us and I will advise you within your regular monthly update once I have received their response.

Yours sincerely

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e4dcb7b84a1c\\footer.doc"}

{ MERGEFIELD CALCULATION_FEE_EARNER_DESCRIPTION }
{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME*UPPER }