{INCLUDETEXT
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e814acaea430\\header.doc"**}**

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

 Your Ref: **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1INSREF **}**

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

{ MERGEFIELD TK_PIDEF1DETAIL_tkDEF1INSURER_name **}**
{ MERGEFIELD TK_PIDEF1DETAIL_tkDEF1INSURER_address **}**

Dear Sirs

Our Client: **{** MERGEFIELD LINKNAME_FORENAME_1 **} {**
                    MERGEFIELD LINKNAME_SURNAME_1 }
Accident Date: **{** MERGEFIELD
                    TK_ACCDETS_tkACCDATE\@"d"*Ordinal } {
                    MERGEFIELD TK_ACCDETS_tkACCDATE\@"MMMM
                    yyyy" }
Accident Location: **{** MERGEFIELD TK_ACCDETS_tkACCLCATION **}**

We now enclose, by way of service, the following documents:

(1)   Claim Form (and attached notes);
(2)   Particulars of Claim;
(3)   Medical evidence filed on issue of proceedings;
(4)   Schedule of Expenses and Losses;
(5)   Notice of Funding;
(6)   Form for Acknowledging Service;
(7)   Form for Defending the Claim;
(8)   Form for Admitting the Claim.

We have been in correspondence with the relevant insurers, **{** MERGEFIELD
TK_PIDEF1DETAIL_tkDEF1INSURER_name **}** of:
{ MERGEFIELD TK_PIDEF1DETAIL_tkDEF1INSURER_address **}**
(under reference **{** MERGEFIELD TK_PIDEF1DETAIL_tkDEF1INSREF **}**), to whom you may
care to refer these papers straight away.

We would be grateful if your insurers or their solicitors would acknowledge safe receipt.

Yours faithfully

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e814acaea430\\footer.doc"**}**

{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME*UPPER }