

# WORKERS' COMPENSATION

## LA COMPENSACIÓN DEL TRABAJADOR

### Job Related Accidental Personal Injury

If you are disabled and unable to work for more than three (3) days, workers' compensation will pay your medical expenses and replace two-thirds (2/3) of your salary, limited to the maximum \$2,000 per week.

### If you are injured on the job

1. Notify your employer or supervisor as soon as you know you are injured.
2. Tell the doctor who treats you that you were hurt on the job.
3. Complete an Employee's Claim Form and send it to us.

**Note:** With this form or return to work could prevent your claim for benefits.

Employee's Name: Sally Ann Henderson

Business Address: \_\_\_\_\_

City/State/Zip: Salisbury

Ciudad/Estado/Código Postal: \_\_\_\_\_

Federal Employer's Identification Number: \_\_\_\_\_

Indefinición Federal del E.P.:

Telephone Number: 410-543-6000

Insurance Company Name: \_\_\_\_\_

La Compañía de Seguro:

Insurance Company Telephone Number: 410-406-1000

Telefónico de la Compañía de Seguro:

MD WCC Form G-24-05/2007

This notice must be printed on a 4 1/2" x 6 1/2" sheet of paper.