

To Report A Claim Contact:
ZURICH CLAIM SERVICES
Telephone: 800-987-2373

NOTICE TO EMPLOYEES

WORKERS' COMPENSATION

Employer: [Redacted]

The above named employer, an employer within the meaning of the Workers' Compensation Law, hereby gives notice to employees of the availability and terms of payment of workers' compensation benefits under the law in accordance with the provisions of the law.

Insurance:

1290 ZURICH WAY
SCHAMBERG, IL 60182
800-987-2373

Policy Effective Dates: 11/1/2022 - 11/1/2023

Policy Number: WIS-111311-22

If you are injured on the job, you should contact your employer immediately.

Claim Examiner:

PO BOX 28547
COLORADO SPRING, CO 80992
Telephone 800-987-2373

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Collecting workers' compensation benefits is not a business. It is a right. It is not to be misused. Misuse of this right is a crime. Fraudulent claims are subject to prosecution. All suspected fraud will be investigated. Anyone may report a potentially fraudulent claim by contacting the Workers' Compensation Division of the Department of Labor & Industry.