

Compensatory Damages Calculation

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Subject: Calculation of Compensatory Damages for Accident Settlement

Dear [Recipient's Name],

We are writing to provide a detailed calculation of compensatory damages resulting from the accident that occurred on [Insert Accident Date]. Below is a summary of the damages incurred:

1. Medical Expenses

Total medical expenses incurred: \$[Insert Amount]

2. Lost Wages

Total lost wages due to the accident: \$[Insert Amount]

3. Pain and Suffering

Estimated pain and suffering damages: \$[Insert Amount]

4. Property Damage

Total property damage incurred: \$[Insert Amount]

5. Miscellaneous Expenses

Other related expenses: \$[Insert Amount]

Total Compensatory Damages

Total amount for compensatory damages: \$[Insert Total Amount]

Please review the calculations and feel free to reach out with any questions or concerns. We appreciate your attention to this matter and look forward to resolving it promptly.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Your Contact Information]