

Compensatory Damages Calculation

Date: [Insert Date]

To: [Recipient's Name]

From: [Your Name]

Subject: Compensatory Damages Calculation for Personal Injury Claim

Re: Claim Number: [Insert Claim Number]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to provide you with a detailed calculation of the compensatory damages related to my personal injury claim resulting from the incident on [insert date of incident]. Below is a breakdown of the damages incurred:

1. Medical Expenses

- Initial Consultation: \$[Amount]
- Medical Treatments: \$[Amount]
- Medications: \$[Amount]
- Physical Therapy: \$[Amount]

Total Medical Expenses: \$[Total Amount]

2. Lost Wages

Total number of lost days: [Number] days

Daily Wage: \$[Amount]

Total Lost Wages: \$[Total Amount]

3. Pain and Suffering

Compensation for pain and suffering has been calculated based on [insert method, e.g., multiplier, per diem].

Total Pain and Suffering: \$[Total Amount]

4. Other Expenses

- Transportation for Medical Appointments: \$[Amount]
- Home Care Assistance: \$[Amount]

Total Other Expenses: \$[Total Amount]

Grand Total of Compensatory Damages

Total Compensatory Damages: \$[Grand Total]

I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your consideration.

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]