BALTIMORE
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NEW ORLEANS
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ALEXANDER & ALEXANDER
INCORPORATED
INSURANCE
AVERAGE ADJUSTERS CONSULTING ACTUARIES
2225 NORTH CHARLES STREET, BALTIMORE 18, MD.

TELEPHONE
TUXEDO 9-4304
BELL SYSTEM
TELETYPE BA 582
CABLE ADDRESS
"ALEXBLUE"

November 16th, 1959

Mr. R. C. Schiedt, Jr.
Insurance Department
Armstrong Cork Company
Lancaster, Pennsylvania

PLAINTIFF'S EXHIBIT A-173

Dear Mr. Schiedt:

Vincent P. Coll.
1/15/57 - New York
Claim B 8284919

Referring to your letter of November 3rd, 1959 on the above case, the matter was further discussed with the Travelers Insurance Company and we attach hereto copy of their letter of November 10th, which will be found self explanatory.

We trust this is the desired information, however, if any additional data is needed, please let us know and we shall endeavor to secure it for you.

Sincerely

ALEXANDER & ALEXANDER, INC.

Sue Loseman
LOSS DEPARTMENT

R

The Travelers

The Travelers Insurance Company
The Travelers Indemnity Company

CLAIM DEPARTMENT
E. H. BURNHAM, Claim Manager

BRANCH OFFICE
737 Delaware Avenue
BUFFALO 9, NEW YORK
Telephone Summit 0370

November 10, 1959

Alexander & Alexander, Inc.
2225 North Charles Street
Baltimore 18, Maryland

B-8284919
Armstrong Cork Co.
Re: Vincent P. Coll
Accident: 1-15-57

Gentlemen:

In reply to yours of November 5, 1959, on the above captioned file, may we advise that the compensation awards were made under Section 15-8-EE of the compensation Law, with reimbursement from the Special Funds to be secured after payment of 260 weeks of disability. The claimant died from metastatic carcinoma of the lung after only 20 4/5 weeks of disability.

Under Section 15-Subdivision 8, the liability for compensation and medical expense is that of the last employer and there is no apportionment against the prior employer.

Very truly yours,

C.F. O'Hearn
Supvg. Adjuster

CFO'H/mez

November 3, 1959

Mr. O. H. Finley
Alexander & Alexander, Inc.
2225 N. Charles Street
Baltimore 18, Md.

Dear Mr. Finley:

Subject: Vincent P. Coll
1/15/57 - New York
Claim #3-8284919

Thanks for your October 30 letter showing final payments on the above workmen's compensation claim.

If we add the compensation payments from July 18, 1957, to July 31, 1957, which were not included in the Notice of Decision issued by the Workmen's Compensation Board, we tie in with the temporary total compensation of $748.80 shown in your letter. Apparently the $1,441.57 medical expenses were incurred from July 1, 1957, the date of his operation, to July 31, 1957, the date of his death.

Records indicate Coll was about sixty-two years of age at the time of his death, and his lifetime employment with Armstrong covered a three-year period, during which he worked a total of fifty-nine weeks for Armstrong Cork Company.

Are apportionment proceedings being initiated by Travelers in connection with this asbestosis claim?

Very truly yours,

R. C. Schiedt, Jr.
Insurance Department

JTZ

18 A-1

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ALEXANDER & ALEXANDER
INCORPORATED
INSURANCE
AVERAGE ADJUSTERS CONSULTING ACTUARIES
2225 NORTH CHARLES STREET, BALTIMORE 18, MD.

TELEPHONE
TUXEDO 9-1000
BELL SYSTEM
TELETYPE BA 682
CABLE ADDRESS
"ALEXBLUE"

October 30th, 1959

Mr. R. C. Schiedt, Jr.
Insurance Department
Armstrong Cork Company
Lancaster, Pennsylvania

Dear Mr. Schiedt:

re: Vincent P. Coll
January 15, 1957 - New York
Workmen's Compensation
Claim No. B 8284919

Thanks very much for your letter of October 27th, 1959 submitting copies of correspondence pertinent to the above case,

It so happens that we have today received closing report from the Travelers, which indicates final payments as follows:-

Temporary total	$ 748.80
Medical	1,441.57
Expense	828.00

We trust this information will enable you to close your file on this old case.

Sincerely

ALEXANDER & ALEXANDER, INC.

GENERAL ADJUSTER

R

October 27, 1959

Mr. G. E. Finlay
Alexander & Alexander, Inc.
2225 N. Charles Street
Baltimore 18, Md.

Dear Mr. Finlay:

Subject: Vincent P. Coll
1/15/57 - New York
Workmen's Compensation
Claim #B-3234919

In reply to your October 23 letter, this is an asbestosis claim which had been listed on your various loss experience exhibits for the year 1957.

The first retrospective rating adjustment for the same year lists the following reserves:

Medical - $1,000
Compensation - $11,005

We do not have a copy of the original report. We are, however, enclosing copies of some correspondence which might be of some help. Travelers Buffalo office handled this claim.

Very truly yours,

ARMSTRONG CORK COMPANY

R. C. Schiedt, Jr.
Insurance Department

JEZ

Enclosures

BALTIMORE
NEW YORK
CLARKSBURG
TULSA
ST. LOUIS
CHICAGO
LOS ANGELES
ATLANTA
PITTSBURGH
SAN FRANCISCO
NEW ORLEANS
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ALEXANDER & ALEXANDER
INCORPORATED
INSURANCE
AVERAGE ADJUSTERS CONSULTING ACTUARIES
2225 NORTH CHARLES STREET, BALTIMORE 18, MD.

TELEPHONE
TUXEDO 9-1004
BELL SYSTEM
TELETYPE BA 182
CABLE ADDRESS
"ALEXBLUE"

October 23rd, 1959

OCT 26 1959 WLH

Mr. R. C. Schiedt, Jr.
Insurance Department
Armstrong Cork Company
Lancaster, Pennsylvania

Dear Mr. Schiedt:

Vincent P. Coll.
1/15/57 - New York
Workmen's Compensation
Claim B 8234919

We have your letter of October 21st pertinent to the above accident inquiring as to its status.

We cannot locate a record of this [illegible] and would appreciate it very much if you would let us have a copy of the original report and information as to whether we have previously written you on the matter.

Upon receipt of your reply, we will contact the Travelers.

Sincerely

ALEXANDER & ALEXANDER, INC.

GENERAL ADJUSTER

R

October 21, 1959

Mr. G. H. Finlay
Alexander & Alexander, Inc.
2225 N. Charles Street
Baltimore 13, Md.

Dear Mr. Finlay:

Subject: Vincent P. Coll
1/15/57 - New York
Workmen's Compensation
Claim #B-6284919

We are wondering about the status of the above claim. Our records [illegible] his lifetime employment with Armstrong covered a period of [illegible] the years 1955, 1956, and 1957.

The last notice we received was a copy of Form C-7 filed by Travelers August 16, 1957, contesting this claim. A letter from our district office indicated Mr. Coll died July 31, 1957.

Very truly yours,

ARMSTRONG CORK COMPANY

R. C. Schiedt, Jr.
Insurance Department

JEZ

WORKMEN'S COMPENSATION BOARD
STATE OF NEW YORK

NOTICE OF CONTROVERSY

If the employer controverts this claim and the carrier is not paying compensation directly and without waiting for an award, this prescribed Form C-7 must be completed and filed with the Chairman, Workmen's Compensation Board at the office of the district in which the alleged accident occurred, on or before the 15th day after disability began or within 10 days after employer first had knowledge of the alleged accident, whichever period is greater.

Copy of this notice shall be sent to the claimant and to his representative, if any.

1. WCB Case Number	2. Carrier Case Number and Code	3. Date of Alleged Accident	4. Date Person Became Disabled
85702510	B-8281919 69	1/15/57	

Name	Address to which notices should be sent (Give Number and Street, City, Zone, State)	
5. Injured Person: Vincent P. Coll	719 Cleveland Drive, Cheektowaga	Social Security No.
6. Employer: Armstrong Cork Co.	1674 Elmore Ave., Buffalo 23, N.Y.	Employer ID. Reg. No.
7. Carrier: THE TRAVELERS INSURANCE COMPANY	424 Main St., Buffalo 2, New York	

8. Nature of alleged accident _____

9. This claim is contested by the employer and compensation therefore is not being paid by the carrier, for the reasons stated below: (Check each item of controversy and explain below, grounds for position taken.)

(a) ☐ Notice of accident was not given as required.
(b) ☐ Claim was not timely filed.
(c) ☐ Accident did not occur.
(d) ☐ Accidental injury did not arise out of and in the course of employment.
(e) ☐ Jurisdiction.
*(f) ☐ Claimant is not disabled.
*(g) ☐ Disability is not causally related.
(h) ☒ Other reason for contesting claim

*Attach supporting medical reports. If already filed with Chairman, identify.

Explain reason for controversy separately for each box checked in item 9:

(h) No proof death on 7/31/57 causally related to occupational disease.

10. Has notice been sent to Disability Benefits carrier? (See Sec. 206 subd. 2) _____ ☐ Yes

If "Yes", give name and address of Disability Benefits carrier (or employer) to whom notice was sent: _____

Has medical report also been sent? _____ ☐ Yes ☐ No

11. Date "Employer's Report of Injury" first received: (Self-insured employer enter date of first knowledge of alleged accident) _____

12. COPY OF THIS FORM C-7 HAS BEEN MAILED TO ☐ CLAIMANT ☐ CLAIMANT'S REPRESENTATIVE

Carrier Name THE TRAVELERS INSURANCE COMPANY

Dated: August 16, 1957 Signed C. T. O'Hearn

Official Title Claim Adjuster

C-4782 REV. 8-55 Printed in U.S.A.

C-7 C-7 C-7 C-7 C-7

Inter-Office Communication — Armstrong Cork Company

To R. C. Schiedt, Jr., Insurance Dept, Lancaster — August 7, 1957

From M. A. Dickson, Insulation Divn, Buffalo

Subject VINCENT P. COLL

In connection with Mr Pendleton's previous communications to you on July 31, here are the hospital operative record and the Compensation Board's Notice of Decision concerning this person, to complete your file.

Md

8/9/57 WSH

Form 1501 10-46

INTER/
/OFFICE COMMUNICATION

Armstrong

To R. C. Schiedt Jr. Insurance Department Lancaster

July 31, 1957
(Dict. 7-29-57)

From K. E. Pendleton, Insulation Division, Buffalo

Subject Vincent P. Coll - Occupational Disease

Supplementing our memo of earlier today on the same subject, here are some additional comments for what they may be worth.

For a number of years, Coll was employed by A. J. Addy Co. asbestos contractors of Buffalo, frequently as a supervisory employee. After the death of the head of that company, Coll left for personal reasons. We picked him up as a mechanic because of his known ability and wide experience.

Shortly after Coll's illness began, our superintendent D. J. Solly visited Coll at his home. A representative of Traveler's Insurance company was there and told Solly that Coll had worked for a number of contractors over the years in Buffalo and that any claim would be pro-rated on the basis of time worked in each shop. We assumed this to be established procedure.

KEP/rk

CC: D. J. Solly - Buffalo

FORM 1501 3.55

18 B

INTER/OFFICE COMMUNICATION — Armstrong

To R. C. Schiedt Jr. Insurance Department, Lancaster

July 31, 1957
(Dict. 7-29-57)

From M. A. Pendleton, Insulation Division, Buffalo

Subject Vincent P. Coll - Occupational Disease

This is in reply to your request for information of July 25, 1957.

First of all Coll was not laid off: He was unable to work because of illness. Our records do not show this but we have checked with our superintendent to clear the point.

There is no particular reason for Coll working on small jobs. No power saw was used on any of his jobs but we have employed him on occasion to cut beveled cork legs on our warehouse band saw.

We are told that there are no children under 18 years of age. Coll's birth date from our records is January 14, 1895.

MAP/mk

CC: D. J. Scully - Buffalo

Since writing this we have learned that Vince Coll died this morning 7/31/57

FORM 1501 3.55

16 B.

H. E. Pendleton, Insulation Division, Buffalo — July 25, 1957

R. C. Schiedt, Jr., Insurance Department, Lancaster

Vincent P. Coll
Occupational Disease

According to a notice received from our insurance broker, Travelers has established a $27,800 reserve on an asbestosis claim filed by Vincent P. Coll. Although the date of the accident is shown as January 15, 1957, payroll records here in Lancaster indicate the last day worked by this man was March 29, 1957, at which time he was laid off due to no work.

In reviewing his employment record, we find he worked a total of 59 weeks for Armstrong, and only half of this time, approximately 1,100 hours, was spent on jobs which called for the use of products containing asbestos, air cell and magnesia insulation.

A review of the payrolls indicates Coll usually worked with a small gang, five men or less. We are wondering if there was any particular reason for this, and because of the small gang, could we safely say that [illegible] was not used on any of his jobs or any preliminary work he might have performed in the warehouse.

Could you give us his date of birth and whether or not he has any children under 18 years of age? Your replies will be used in an effort to have Travelers reduce the $27,800 reserve.

According to the terms of our insurance policy, $25,000 is the maximum amount Travelers may charge for one claim. However, when the first retrospective rating is made, Armstrong will be required to deposit with them this maximum charge of $25,000 plus 14.032% or a total of $28,[illegible]. The first retrospective rating will be made shortly after July 1, 1958, and subsequent retrospective ratings will be made at twelve month intervals. In these subsequent ratings, the amount of the deposit on this claim could vary considerably. Adjustments are made to reflect the actual loss incurred if the claim has been settled, or the estimated costs if the claim is still open.

JEL

J. W. Liddell, Jr., Insulation Division

18 C

REC'D
AUG 2 1957
[illegible] COPY CO.

WORKMEN'S COMPENSATION BOARD
STATE OF NEW YORK

NOTICE OF DECISION

1. Claim Case No.	2. Carrier Case No. and Code No.	3. Date of Accident
[illegible]	[illegible] 67 [illegible]	1 15 57
4. Date of Hearing	**5. Date of Reserved Decision**	**6. Date of This Notice**
[illegible] 57		7 30 57

CLAIMANT

Vincent P. Coll
713 [illegible]
[illegible], N. Y.

EMPLOYER

[illegible] Work Co.
1571 [illegible] Ave.
[illegible], N. Y.

Special Funds Conc. Unit
920 [illegible] Bldg.
Buffalo, N. Y.

George [illegible], Finance Officer
Workmen's Compensation Board
55 [illegible] Bldg. 4th Floor
New York, N. Y.

TO THE CLAIMANT.

1. Any compensation due will be sent to you by check by the employer or his insurance carrier.
2. Keep a careful record of the payments received in order that you may have evidence of payment or non-payment in case of dispute.
3. No compensation shall be allowed for the first seven days of disability. However, if the injury results in disability of more than thirty-five days, compensation shall be allowed from the first day of disability.
4. Do not pay money to anyone representing you. The fee, if any, for such representation is determined by the Board or Referee and will be deducted from your award and paid by the employer or his insurance carrier to your representative or attorney.

COPY TO:

filed 7-30-57

After hearing on date stated above a Decision and Award was made and duly filed this day as follows:

AWARD: THE EMPLOYER AND/OR THE INSURANCE CARRIER ARE DIRECTED TO PAY AT ONCE

for disability from a period of weeks			at rate per week	the sum of	TO:
2 4/5	1 15 57	2 4 57	$ 35.00	$ 100.00	CLAIMANT
1/5	3 [illegible] 57	3 25 57	35.00	7.00	
2/5	3 [illegible] 57	3 22 57	35.00	[illegible].00	less payments made covering this period.
15 3/5	4 1 57	7 13 57	35.00	[illegible].00	
				[illegible]	

as lien on award payable on account of attorney to CLAIMANT'S REPRESENTATIVE OR ATTORNEY

Liability is [illegible] that this case [illegible] within the purview of Section [illegible] of the Workmen's Compensation Law, and that the carrier is entitled to reimbursement from Special Funds for all compensation and medical expenses paid pursuant to [illegible] herein. Finding further that the claimant is permanently, totally disabled.

fee to DOCTOR for attendance at hearing $ [illegible]

DECISION: Case was closed. Payments to continue at $35.00 until and is filed thereafter, continue in conformity with Section 15 and otherwise same. Accident date 1-15-57, due to accidental, notice and causal relation established. First date of disbursement is 2/15/57.

If case was "continued" and continuing payment was directed, it shall be made at the above rate for the period stated and shall be continued thereafter until the employer or carrier has medical or payroll evidence of a change of condition and gives notice thereof to the Chairman, Workmen's Compensation Board, unless otherwise provided in the decision. A further hearing will be held in a "continued" case to determine the extent of further disability, if any.

JI [illegible] cr

Angelo R. Rossi
Chairman

C-23 C-23 C-23 C-23 C-2

18 D

Compensation

[illegible]MORE HOSPITAL

OPERATIVE RECORD
719 Cleveland Dr., Cheektowaga, N.Y.

Name Coll, Mr. Vincent - Age 62 Case No. 6-527 Date of Operation 7-1-57

Surgeon Dr. F. W. O'Donnell Assistants Dr. C. Johnson

Anesthetist Instrument Nurse Miss Eidenier

Anesthetic Local Sponge Nurse Miss Bolton

Began 9:40 A.M. Closed 10:25 A.M.

Pre-operative diagnosis complete

Pulmonary insufficiency from probable asbestosis with a moderately rapid down-hill course the last nine months and recent development of node, left neck.

Operation

EXCISION OF NODE, LEFT POSTERIOR TRIANGLE OF NECK.

What was done Under procaine infiltration anesthesia in the supine position the head turned towards the right, a straight 3cm. incision was made in the left posterior triangle of the neck, carried down thru the skin, fat, platysma, and then by blunt dissection the node was dissected out, which lay on the brachial plexsus. Bleeding was minimal, nothing had to be clamped. The wound was closed in two layers, using interrupted and then a continuous subcuticular of triple plain catgut.

P.O. Metastatic neoplasm to node, left neck.

Technique

Pl.00[illegible]
Clean
FWO'D;nce
cc:- Dr. Carl Conrad

RECEIVED
AUG 7 1957
ARMSTRONG CORK CO.
BUFFALO, N. Y.

Recorded by

18E

Date of birth 06-09-4300

No. of dependent 2 on [illegible]

Occupation Fife [illegible]

Employment

In	Out	
11-25-55	4-10-56	no work 2 weeks
6-5-56	1-14-57	sick [illegible] weeks
2-4-57	3-29-57	no work [illegible] weeks

747-111
130749-1
130759-1
130639-11111 > [illegible]
130741-1
133129-1
130671-111111 > cook covering
x-1
130643-11111 > cook covering
130679-11111111 > cook covering
130633-11
130653-1

130771-1
130635-1
130743-1
130769-11

Last Cutoff [illegible]

27500
31414 113
32419 1,032
1600 5

130 537

130 621

633

635

639

653

671 C C

679 C C

693 C C

741 C C

749

751

759

769

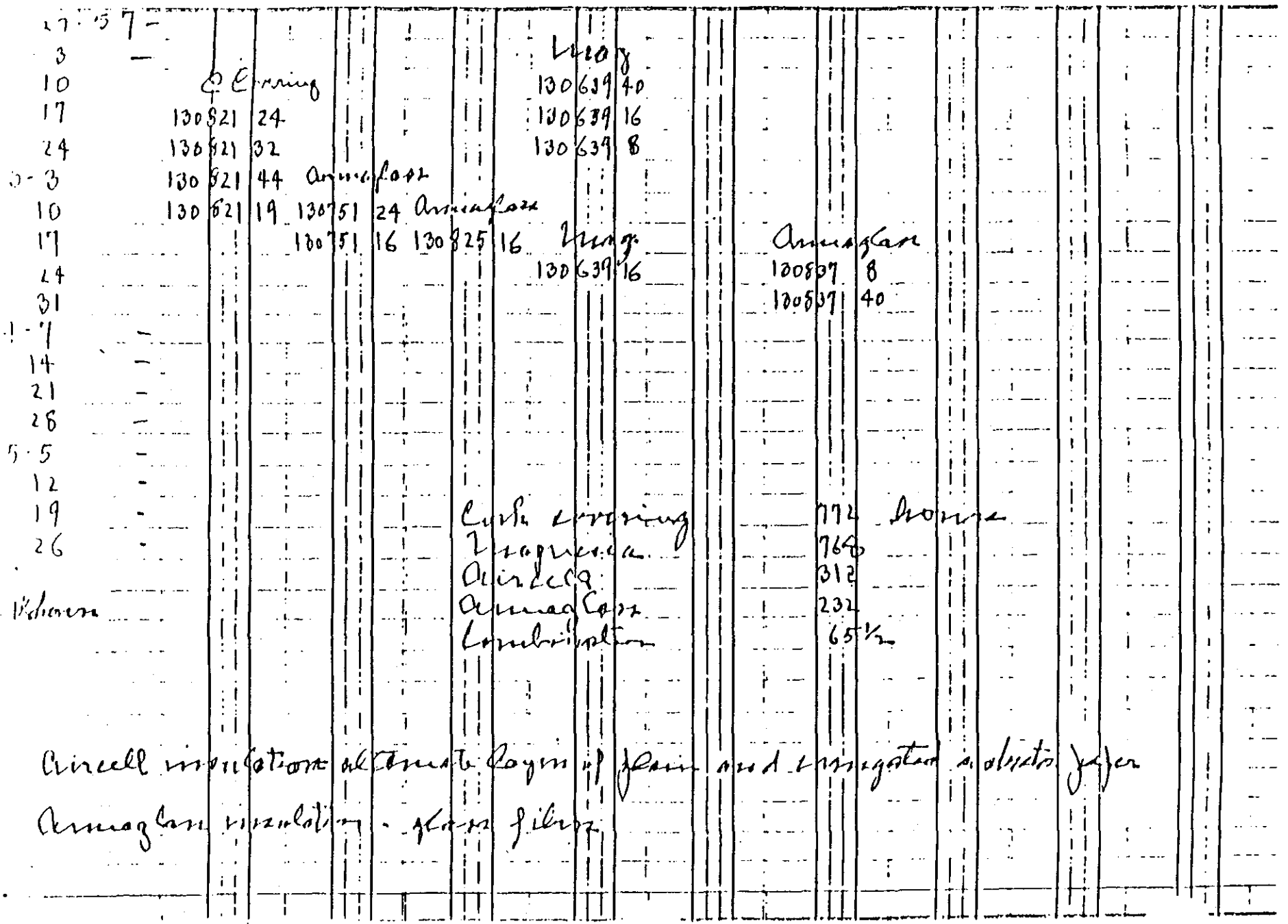
771

130 821 C C

825

837

1331-9 C C



27·57	–						
3	–				Mag		
10		C Covering			130639 40		
17		130821 24			130639 16		
24		130821 32			130639 8		
3-3		130821 44	Armaglass				
10		130821 19	130751 24	Armaglass			
17			130751 16	130825 16	Mag	Armaglass	
24					130639 16	130837 8	
31						130837 40	
4-7	–						
14	–						
21	–						
28	–						
5·5	–						
12	–						
19	–				Cork covering	772	hours
26	–				Magnesia	768	
					Aircell	312	
Whorn					Armaglass	232	
					Combination	65½	

Aircell insulation alternate layers of plain and corrugated asbestos paper

Armaglass insulation - glass fibre