



ROMAN CATHOLIC DIOCESE
OF ST. PETERSBURG

Workers' Compensation Claim Initial Treatment Form

Diocese of St. Petersburg authorizes initial treatment under our workers' compensation policy for the following employee. All the contact and billing information is contained below for our workers' compensation carrier. If you have any questions, please contact

Parish/School Name: _____

Supervisors Name: _____

Phone Number: _____

Please treat for the following injuries: _____

Date: _____ **Employee Name:** _____

Claim #: _____

Please submit all bills to:

Commercial Risk Management
PO Box 18366
Tampa, Florida 33679

Claims Phone Number:

- 1-800-786-6070
- 813-289-3900

Claims Fax Number:

- 813-289-3771

*****All bills for services must be submitted to the carrier on the appropriate health care form.**

W Wallace Welch & Willingham is providing this information solely as general guidance on the subjects covered and should not be considered legal advice. We are only offering assistance from a risk management perspective to help reduce your exposure and limit your liability. Any legal issues should be reviewed by your legal counsel to apply the laws to the particular facts of your situation.