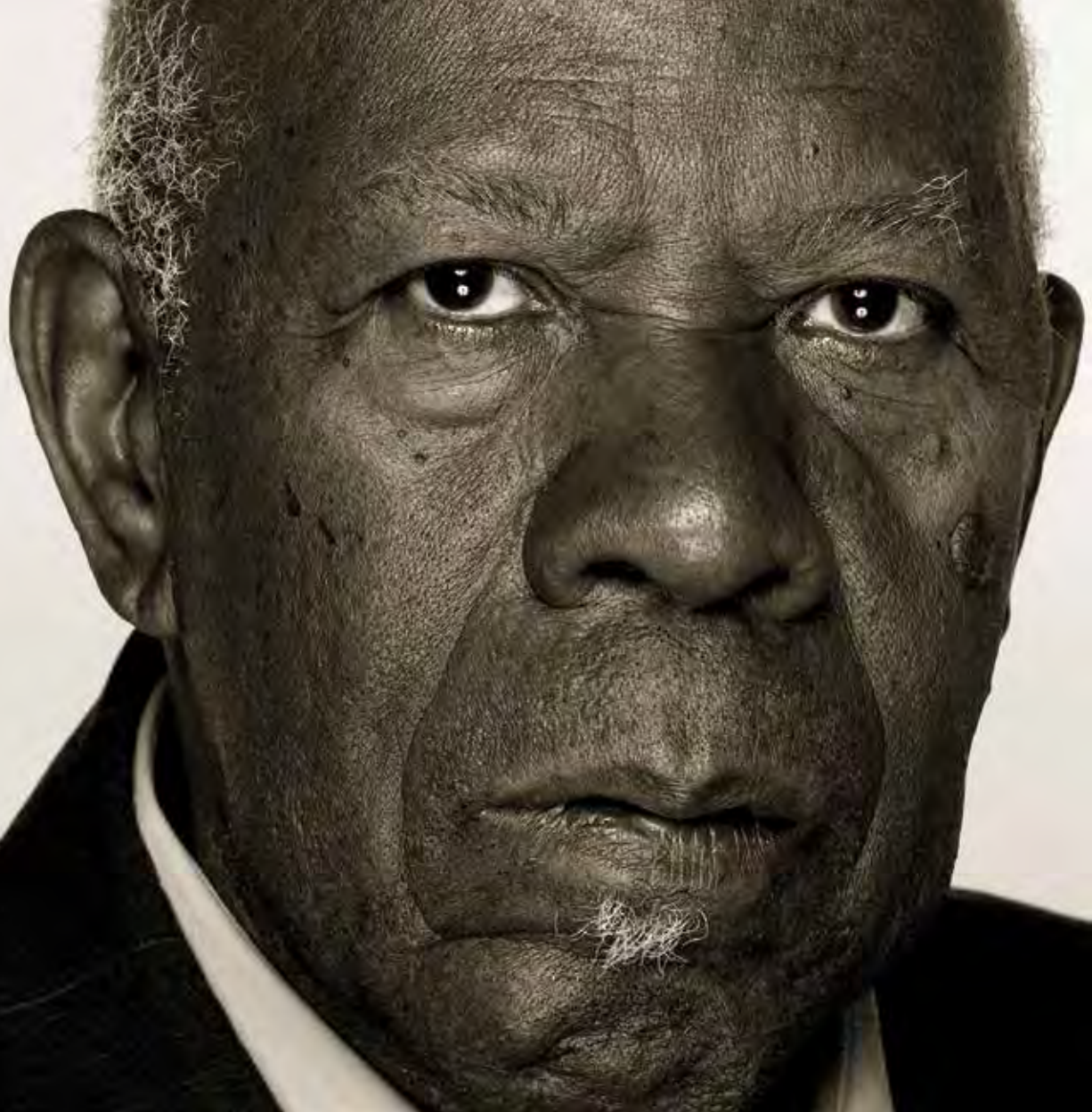


INSURANCE COMPANIES *(and others)* BEHAVING BADLY

REAL LIFE, REAL STORIES

From the front lines of the
Law Offices of James Scott Farrin





This booklet is about justice. It's about some powerful organizations trying to take advantage of people, but not getting away with it. The best reason I can think of to wake up and come to work every day is to try to make sure that our clients are protected from abuses, and get what is right under the law.

Our attorneys, and our entire team of more than 150 people, lend a strong, experienced hand to those who need help. You could be injured through the fault of another, hurt on the job, seeking Social Security Disability benefits, or learning that the government is going to seize your house under eminent domain because of a road project.

We know that dealing with an insurance company, a government staffer or a judge is often the last thing you want or are prepared to do. That's where we come in. The people on the other side of your case do not typically have your interests in mind. They have their own rules and their own bottom lines - their own pressures, their own numbers to meet.

In turn, as "Insurance Companies (and Others) Behaving Badly" reveals, they can resort to what we think is very bad behavior. They can bully, rush, delay, and treat you poorly. The stories herein illustrate what can sometimes happen, and what we try to do about it. Every day, we seek to strengthen clients against their own strong opponent. We know these kinds of opponents and their tactics well.

For the clients we serve, we listen patiently to what's happened to you. We investigate and find the facts. We use the skills of our remarkable staff to follow up. Going in, we discuss your case with you for free.

If we join forces, we advise you on what we believe is the best course. Our firm fights for a fair recovery, for benefits, for the best price you can get on your house. We fight for you and your family's future.

We don't back down. We don't frighten. We stay with it. If you have our firm on your side, the other side had better be prepared.

It is disturbing, many times, to hear and witness what some insurance companies will say or do to save money and reduce your payout. But we believe our experience and knowledge often keeps us several steps ahead.

The stories here come from members of the Law Offices of James Scott Farrin, wonderful people who stand up for what's right time and again. Together, we become difference makers. Together, we fight to achieve results.

We believe we stand out precisely because of who we are and how much we care.

The anecdotes and insights to follow are most definitely real. They'll open your eyes, help you see what you may face, and how we have made a difference for thousands of clients.

Call us or recommend us to a family member, friend or co-worker. When the time comes, we'll be ready to fight...for justice.

JAMES S. FARRIN

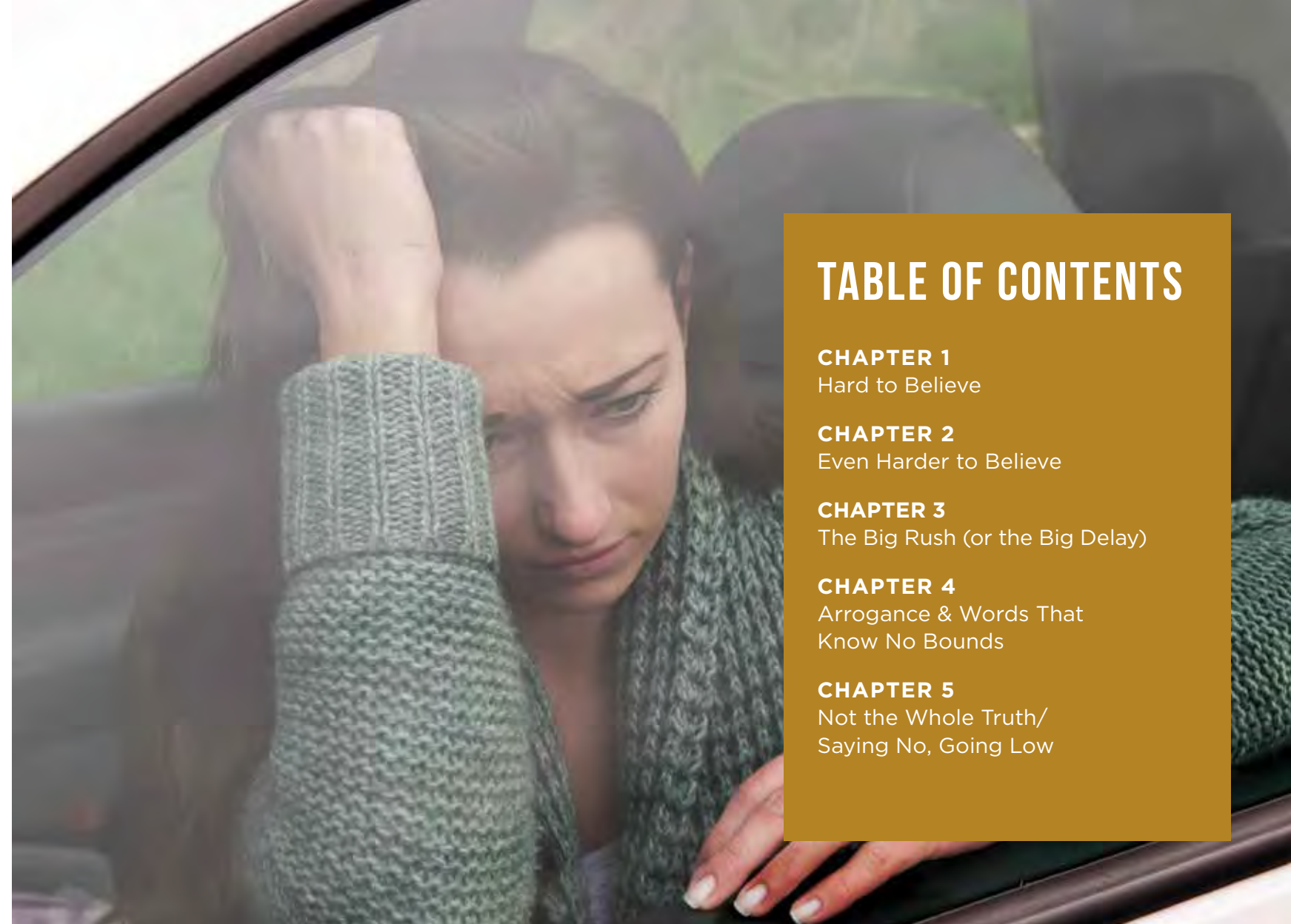


TABLE OF CONTENTS

CHAPTER 1
Hard to Believe

CHAPTER 2
Even Harder to Believe

CHAPTER 3
The Big Rush (or the Big Delay)

CHAPTER 4
Arrogance & Words That Know No Bounds

CHAPTER 5
Not the Whole Truth/
Saying No, Going Low

Insurance adjusters (or others who stand to lose money in your case) are almost never your friend. The personally recollected stories we present here come from dozens of our employees. They involve real clients with real cases dealing with real insurance companies, adjusters, and government officials.



We believe they help illuminate the great challenges that face clients if they try to handle their claims alone, how our years of experience have provided us with tremendous insight and skill on how to assist from day one, and how much it means to the Law Offices of James Scott Farrin to be able to address and often overcome bad from “the other side” and make a difference for those who need us.

DISCLAIMER:

*Cases or matters referenced do not represent the law firm’s entire record. Each case is unique and must be evaluated on its own merits. The outcome of a particular case cannot be predicated upon a lawyer’s or a law firm’s past results. These are specific examples of experiences we have had with some insurance companies, adjusters, employers, clients or others. These stories do not necessarily represent any industry or employer as a whole. These descriptions of events are based upon the recollections of individual staff members. Client identities have been removed or changed to protect their privacy. Images used do not represent actual events or real people.

**In re Black Farmers Discrimination Litigation, the Law Offices of James Scott Farrin was the leading part of a team of law firms that ultimately recovered \$1.25 billion for African-American farmers from the United States government for discrimination.



CHAPTER 1

Hard To Believe

LAW & ORDER

In the workers' compensation department, the adversary we most often see is the employer.

We had a client who was a public servant and she injured her back when she helped a stranded motorist push her car.

Evidently the employer didn't like her and didn't want her to file a claim. One of the things we were able to do was to obtain witness statements to support her claim.

On workers' comp, we often see where a claim will be denied seemingly because the employer doesn't like the employee who filed it.

Sounds like high school. Except it's not.

WHAT REALLY HAPPENS

We often deal with a lot of adversarial behavior toward our minority clients, especially if they don't speak English. We have a client that serves as a good example.

Our client was hit by a truck while she was riding a bike and despite overwhelming evidence that their insured was guilty, the insurance company denied liability.

I think one of the reasons the insurance company maintained their denial is because they were counting on a jury to penalize our client because she doesn't speak English.

We hired an accident reconstructionist who concluded the truck driver was at fault in the accident.

Our aim: to fight for the little guy.

THE GOVERNMENT RUNAROUND

I've witnessed firsthand Social Security's inadequacies when it comes to issuing disability.

A relative of mine suffered an injury several years back, and my husband was working with him to obtain Disability. It was such a strenuous process.

I remember my husband telling me stories about how my relative would go to the disability office, wait for four hours, and then be told he was at the wrong office, or the person he needed to see wasn't working that day.

They were getting nowhere. We signed him as a client. Within a matter of months, he was receiving disability*.

We saw his quality of life improve after that, and it was both enlightening and frustrating to see the runaround the government gives people. It's just awful how they treat these people sometimes... people who have spent their lives contributing into the system.

When people need Social Security Disability, it should be there for them.

“Everyone starts degenerating in their 40s and an accident can cause a symptomatic person to suffer pain that an insurance company will blame on degeneration. In my experience, it’s one of their favorite phrases...”

OPEN YOUR EYES

I work in the Social Security Department, where I see the government as our client’s adversary. I remember a client who was denied Social Security at the initial and reconsideration levels. He came to the firm after those denials. We appealed and asked for a hearing and he was finally approved* after about 3 years.

He suffered from significant mental health issues that prohibited him from working and also led to being hospitalized. For the disability office to see his case and not realize how significant his problems were and to deny him twice was astonishing.

A little patience from an insurance company can go a long, long way. Compassion, of course, helps, too. We have plenty of both at JSF.

DOCTORS CHECK YOU OUT, SO YOU CHECK THEM OUT

Sometimes our biggest adversaries are medical providers. I had a client who broke a bone in a car accident, but failed to mention any pain or discomfort at the emergency room because she was being treated for so many other things. A couple days later, she made an appointment with another doctor who confirmed she had broken a bone. However, the doctor indicated in her notes that the broken bone was caused by something other than the car accident.

I instantly knew what had happened – the doctor had probably just copied and pasted the notes from another case and forgotten to change that part.

When we received the offer from the insurance company, they did not include any reimbursement for my client’s broken bone, which I expected. I took it upon myself to contact the doctor, which was not an easy task. It took me months to finally reach her. She admitted what she had done and amended my client’s medical records.

We settled the case for triple the initial offer*.

We believe bad behavior should not be rewarded.

BE ON YOUR TOES

Even though I don’t have a lot of contact with insurance adjusters, they often try to obtain as much client information from me as possible. When I answer the phones, they want to know if we’re representing certain clients and they ask leading questions to get me to give information.

It happens just about every day. It’s as if they think they can bully me into giving out information, but it doesn’t work. Some adjusters try to bully clients more than even we want to admit.

Sometimes, they try to bully us, too. That’s a big mistake.



AN AGE-OLD PROBLEM

I see a lot of adversarial behavior from insurance adjusters when they test causation, especially if the victim is an older person. Everyone starts degenerating in their 40s and an accident can cause a symptomatic person to suffer pain that an insurance company will blame on degeneration. Sometimes it seems like they’ll do anything not to issue causation to the accident. In my experience, it’s one of their favorite phrases: must be degeneration.

We also see some doctors who will make comments in their records, and try to do anything not to issue causation to the accident. I don’t get it. But, it happens more often than you think.

If you hear the word “degeneration,” it could mean you’ve got a claim.

RIGHTS (& WRONGS)

We took a worker’s compensation case with a client who had her arm caught in a machine. It had gotten infected and she spent several days in the hospital. It was one of the most gruesome pictures I’ve had to take.

Less than a month after she got out of the hospital, her employer wanted her to go back to work, even telling her she could work with one arm.

She didn’t understand what her rights were, so we explained them.



CHAPTER 2



Even Harder To Believe

SEEKING WORK: SENIOR CITIZEN (W/CANE)

We have a client who is over the age of 65. He cannot drive and he walks with a cane. He's on Social Security retirement with multiple injuries and restrictions...and he has a limited education.

His insurance company wanted him to try vocational rehabilitation to see if he could find a job, but the chances of that happening were slim. But, I believe they knew that already.

I think their intention was to stress our client to the point that he'd take the offer that was on the table. His case is an example of how some insurance companies will seemingly try to bully our clients into accepting their offer.

If you feel bullied or taken advantage of, call. It's even better to call before that happens.

20 YEARS

We have a client who worked at a store for over 20 years making minimum wage.

He fell at work and before we intervened, the adjuster didn't want to give him anything. His employer gave him time off work, and asked him not to come back.

He came back, though. With us.

NO SHOW

There are some cases where you throw your hands in the air and wonder what's wrong with workers' compensation adjusters, and this case is an example of that.

Our client was rear-ended in a work truck. The hospital sent her bill to collections. We went back and forth with workers' comp for months. We gave them two months' notice and set the hearing date. Nobody showed up at the hearing.

The judge called me and said he signed our order*, which was good news. About an hour later, I got a phone call from a different adjuster from the workers' comp company saying she wanted to follow up on the status of the case. She admitted she knew about the hearing and tried to accuse us of notifying the wrong person.

No go. That case was done...and the client won.

BAD TASTE

I remember a case where an adjuster would go into a client's house, make an offer and sit on the couch, refusing to leave until someone accepted. That leaves a bad taste in your mouth. The client doesn't know what to do.

It's rude, and it's unprofessional. I don't know that it happens very often, but I've certainly never forgotten it.

If we see unprofessional behavior, we'll fight back. It's an insult to us and to the client.



ACTING LIKE CHILDREN

When I think about examples of adversarial behavior I've encountered since being at the firm, one of the first stories that comes to mind is when an adjuster berated me in front of a potential client.

I met a client who suffered a couple of broken bones in an accident. When I arrived at her house, a car from the insurance company was sitting outside. I went in the house and introduced myself to our potential client and to the adjuster.

The adjuster immediately began calling me names, and said I was there only to take the client's money. I'd never seen this kind of behavior before. After the client saw this, she asked the adjuster to leave. The adjuster left, but threw a fit first like a little child.

Our client later told me the adjuster wanted to give her \$1,000 and have her sign the release forms that day. It's amazing the lengths some adjusters will go to in order to try not to pay victims what they may rightfully deserve.

It's a waste of time — a misuse of the system. Fair is not trying to play the client for a fool.

PLAYING HARDBALL

Oftentimes we see adversarial behavior toward our Latino clients. I had a client whose claim was denied because the defense said they had a video contradicting what our client said about how she got her injuries. In mediation, we proved it wasn't our client on the video, but the defense continued to deny the claim.

I decided to launch discovery into the insurance company's treatment of Hispanic clients. They ended up settling the case for six figures*.

We'll play hardball. We do not appreciate bad behavior.

So a client is a minority? What does that mean? To us, that means...he or she is...a client. They will get our best effort, period.

UNNECESSARY SUFFERING

It's very sad to see our clients' lives catastrophically impacted by the adversarial behavior of insurance companies. One example that still troubles me is a client who was in litigation for two years before his own insurance company paid him the money he deserved*. He suffered so much in those two years. He lost his home, his car, and his job.

They finally ended up tendering in his case, but it was so unfortunate to see him suffer for those two years. It was so unnecessary.

We see it, or we find it, and we always seek to prevent it.

THERE'S AGGRESSIVE, AND THEN THERE'S JUST PLAIN WRONG

I come from a somewhat anti-legal-field background, so my perception before coming here was that insurance companies were probably somewhat fair.

However, early on I began working on a project that required me to delve into the case notes of clients who had suffered burn injuries. I remember reading the notes on a particular case and I was absolutely shocked at the insurance company's aggressive efforts to keep our client from getting prescriptions filled or seeing the doctor. The height of disgust for me was when I read how the insurance company tried to force our client back to work, even though her doctors said she wasn't ready yet. After reading her case notes, I realized how ugly some insurance adjusters are capable of behaving.

Clients should never have to take that, and we will do everything we can to stop it.

“So a client is a minority? What does that mean? To us, that means...he or she is...a client. They will get our best effort, period.”



CHAPTER 3

The Big Rush (Or The Big Delay)

BUYING TIME—AT YOUR EXPENSE

I had a client who suffered a significant fracture in an accident and was out of work for a long time.

She went through surgery, treatment and physical therapy and had very good coverage of \$250,000 liability. Our hope was that once she was done treating and we sent the demand letter to the insurance company, it wouldn't be any problem getting her full benefits.

But as often happens with these companies, weeks went by and we heard nothing. Finally the insurance adjuster said he could not make an offer because her injuries were prior to the accident. The adjuster demanded we prove her injuries were accident-related, even though the doctor indicated in her notes that the injury was caused from the accident.

Our client went into litigation. She was angry she had to wait so long, but she was not going to settle for just anything.

When the insurance company faces a large potential payout, some will often delay. That's their preferred way of doing business.

Don't give up. We don't.

A YEAR TOO LATE

I have two clients that waited nearly a year to get an offer from the insurance company.

We made phone calls, left messages, talked to supervisors and still nothing. We sent the case to litigation, so they could deal with it and fight for what our clients may deserve.

A year? Are you kidding?

If we have to go to litigation for our clients, we will. We're good at it, too.

CAUTION BEFORE CASHING

The day I called to make initial contact with a new client, he said his insurance company sent him a check and that he cashed it that morning. He didn't know any better.

It was money in the mail and he didn't think twice - he took it to the bank. The insurance company didn't give him a chance, but what's worse is the check was only for \$500.

This happens over and over and over again. The word is this: you see a check in the mail before you even talk to an adjuster? Talk to a lawyer before you cash it. You may just be cashing in your financial future.

If it looks like "free" money—money you get with no effort—be suspicious. Very suspicious.

DELAY IS PART OF THE PLAN

I know a story about an insurance adjuster who waited several months before responding to our client.

When we got involved and finally reached the adjuster, she made light of the situation and said she would make a decision in two weeks.

I see stories like this in case notes all the time, where some adjusters will sit on cases, just to keep our clients waiting. Wear them out... that's the idea.

Here at this firm, we know that plan. We'll fight that plan.

WE'RE NOT GOING AWAY

We often see insurance companies acting as adversaries against our clients.

We have a client- a father and his young daughter - who were in an accident, and after what we felt was an unreasonable amount of time, we still hadn't received an offer from the insurance company. Of course, they were saying they were not responsible, but we had a witness statement backing up our client's story.

We felt they were trying to bully our client by stalling the case. He was in a desperate situation and couldn't take care of his daughter. Even though there was not a lot of value to the case, we filed a suit against the insurance company to force them to move forward.

Keep cases moving. That's what we do.

IS THIS REALLY HAPPENING?

Workers' compensation clients typically receive checks every week, but what some adjusters will do is to try to keep our clients from getting on "repetitive pay" - that's when the checks are delivered on the same day each week.

Instead, they'll issue a check on one day one week and then another day on the next week, so our clients are at times forced to go almost two weeks without a check.

Our hands are tied, though, because technically they're getting a check every week. It's not until there's a 14-day lapse between checks that we're able to do anything.

In one case, we filed a motion to get the checks on repetitive pay because even though our client was only receiving around \$100 per week, he was a single dad and needed the money.

What's the point of all this? It's only going to make us more determined to make sure the client is treated right.

LANGUAGE IS NO BARRIER

I worked on the Spanish team as a negotiator, and I witnessed how the insurance adjusters dealt with our Latino clients. I remember one case in particular when we signed a Spanish-speaking client, and I called the adjuster to make initial contact.

He said they had already settled the case for a couple hundred dollars. I asked the adjuster to send me the information, including the letter that would have explained to the client what he was signing. What we discovered was this: the insurance company did not use a translator to explain to our client what he was agreeing to. We were able to reverse the settlement* because they admitted they failed to follow protocol.

If this can happen with a check for a couple hundred dollars, you can bet it might happen with a \$25,000 check. As responsible attorneys, we follow up; we help make sure the legal steps are taken. That's the way it works. We pay attention and, unfortunately, you can see that we have to.

There's more. We often hear about adjusters who will put \$500 checks and releases on the cars of people who have been in wrecks to encourage them to take the settlement money. If the people sign the checks, sometimes there's nothing we can do. They don't realize they're signing away their rights. This happens a lot in the Latino community because the releases and checks are in English.

What starts badly...doesn't have to end badly—if you ask for our help.

NO RELEASE

One of my favorite stories about adversarial behavior is about a client who was in the emergency room after a bad accident.

A man showed up and implied he was a family member, so the hospital staff gave him access to the patient. But it was the insurance adjuster. He was trying to entice our client to sign the release before he left the emergency room.

Some adjusters go so far beyond the norm, they wind up in booklets like this one.

“When the insurance company faces a large potential payout, some will often delay. That's their preferred way of doing business. Don't give up. We don't.”





4

CHAPTER 4

Arrogance & Words That Know No Bounds

TO MY FACE

I work on the phones, so I don't have a lot of in-person contact with different clients, but one case that caught my attention was a client who was in the office meeting with litigation. It was a case where a man was walking and was hit by a car and killed.

While they were in the office I heard the adjuster make a snide comment about the person who died.

We ended up winning* the case and it made me happy after hearing that man's comment.

This firm prides itself on professionalism. The adversary may be abusive; we won't be.

A HISTORIC CAUSE

Most of my work in the firm has been on the black farmers' case, known as Pigford II. The case revolved around thousands of black farmers who were discriminated against by the federal government in loan decisions.

Even though my team and I met with hundreds of folks, we'll always remember one loan officer in particular. She was a very ugly-spirited woman who would ball up applications in front of our client's faces and throw them away and call them all kinds of slurs.

It was shocking. It fueled our team to stay with it, and for years we did. In the end, we won that case*.

Honestly, we don't know how some of these types of people get hired. Or trained. Or evaluated. Because at times, the unprofessionalism is almost beyond belief.

WORTH THE WAIT

One of my favorite clients is a case that came into the litigation department as a denied claim. He suffered severe injuries after his vehicle was T-boned when someone ran a red light.

We decided to take the case through district court arbitration, which is a faster process, and they ruled in our favor. However, before disbursement we had to wait 30 days to see if the insurance company would appeal it to the superior court, and they did.

The client is a very sweet man and was very nervous about testifying in front of a judge and jury.

The jury took a long time and we found out later it was because they were trying to figure out how much they could possibly award us. They ended up awarding the man more than what he was originally awarded in arbitration, which meant the client took away four times* his medical bills.

It was such a feeling of victory to know we fought and fought for this client, and the jury did the right thing.

“Sometimes, it takes us putting our foot down and demanding respect for our clients before the other side starts behaving a little better.”

QUICK & CHEAP

We have a client who broke his ankle in a public place.

The insurance adjuster sent him a few thousand dollars and said it was enough to cover his medical bills. We disagreed!

The adjuster was very rude when I called him. He told me the money was enough, and if we wanted to file a lawsuit to go ahead and do it. So we did. They want to settle it quick and cheap, too often. That's not the way to do business.

Threats don't concern us.

YOU MISTREAT A CLIENT, YOU ARE MISTREATING THE FIRM, TOO

When we're dealing with insurance companies, sometimes there's a point when we have to fiercely defend our clients from being abused by them. I was in mediation with a client over what I believed to be a bogus denial.

The adjusters sat there for two hours and insulted us repeatedly with ridiculous offers. Finally I said, "We're done. You've had two hours to do something reasonable." They ended up settling for more* than they originally said.

Since then, we have mediated numerous cases with this carrier, and I do not give them the opportunity to take advantage of our clients this way. I tell them immediately, "You put your best offer on the table, but I won't let you beat up our clients."

Sometimes, it takes us putting our foot down and demanding respect for our clients before the other side starts behaving a little better.

IGNORANCE IS NO EXCUSE

I remember I was negotiating with an insurance adjuster for a client who had a Hispanic surname, but was not Latino. She didn't come from another country; she didn't speak even Spanish. The insurance adjuster offered \$5,000 to our client and I told her it was a low offer.

The adjuster said, in response: "I'll tell you what. You take your Mexican into Raleigh and we'll see what happens." This happens every day. I don't know if it's racism, or ignorance, or just going after an easy target, but there is definitely a jaded look on the part of some adjusters who see our clients' suffering...especially those who are Latino. Too often, they seem to see and treat them as numbers, but then they will add that it's "nothing personal."

Nothing gets more personal treating someone's life and heritage like a meaningless number...and it happens too often. We will call it out every single time.

MISTRUST V. TRUST

Some adjusters often use intimidation. I think they feel they have all the power. They do, until a powerful attorney gets involved.

Sometimes though, they still won't quit. One man was so mean—literally mean—to everyone he spoke to at the firm...we had to get management involved. It had become abusive. We don't tolerate abusive.

Trust us, this adjuster got the message.

NOTHING FUNNY ABOUT IT

We had a client who suffered truly serious injuries and was left with tens of thousands of dollars in medical bills.

The adjuster offered pennies on the dollar and I told her she might as well offer nothing—that it was a slap in the face—and she laughed about it. That's right: she laughed.

She said the reason she offered so little was because our client didn't initially complain about her injuries at the emergency room; she complained a couple days later.

I said, "Is that your reason?" and she said, "Yep," and then hung up on me.

We won the case in litigation*. I think she stopped laughing.

So many adjusters treat the process as if it's a game, even when their companies have to pay. Why?



CHAPTER 5

Not The Whole Truth/ Saying No, Going Low

JUST HOW MANY FACTS DO YOU NEED?

I had a case involving a little boy who was hit while boarding a school bus. Even though the bus had its arm out and red lights on, the defendant sped by in a car and hit our client.

The defendant maintained his innocence and said the bus didn't have its red lights on.

Finally, on the eve of trial, they admitted fault*.

Facts matter. Not twisting the facts. The facts themselves. We'll work to find them.

DENIALS OFTEN DON'T MAKE ANY SENSE

We had a client come to the litigation department who was denied by his insurance company because they said the accident was partially his fault. What?

A car ran over him! We worked hard on his case and the insurance company paid the entire amount of the policy*. It was awesome to give him that, because he was going to get nothing if we hadn't represented him.

An insurance company saying no is often just another good reason for us to wonder why.

SHIFTING THE BLAME

When I was relatively new to the firm, we had a wrongful death case of a young boy whom the insurance company said was to blame for his own death. They were denying his father benefits.

We took the case. We hired an expert, who proved the boy was not to blame for his death.

The insurance company paid the benefits* and the father was at peace knowing his son did not contribute to his own death. It's an example of how some insurance companies may try to keep victims from their rightful dues, and it's also an example of how we fight for them to have a favorable financial outcome and peace of mind.

Sometimes, we have to spend money to find truth...and then justice.

THE NEGOTIATING ROOM

We had a client who was denied a workers' compensation claim.

It was a slip-and-fall at work, and even though they didn't deny the fall, they denied disability and medical causation. We were able to settle the case for over \$100,000*.

That's the kind of difference we can make to our clients.

IGNORING THE CLEAR FACTS

Being in personal injury, our adversary is almost always the insurance company. We had a case where I just can't believe we even had to file for something to get justice.

Our client was hit by a driver who ran a red light at a high rate of speed. We had our client's story and three independent witnesses backing him up. Still the insurance company denied his claim.

And so the stories go.

The facts can be clear as day sometimes, but some insurance companies will find a way to add lots of clouds. For the sake of paying less, no matter what.

WRITE DOWN EVERYTHING THEY SAY

Over and over, some insurance companies will try to settle with potential clients before they have a chance to seek legal counsel.

In this case, we have a woman who was in a car accident and suffered soft tissue injuries. Her insurance company called our client the day after the wreck and told her the most they would pay was her medical bills.

Our client was about to settle, but something told her to call us first. We explained to her that she possibly could get punitive damages in this case, so we represented her.

Of course, the adjuster later claimed she never said that it would be medical bills only. This is a prime example of how some adjusters will sometimes try to trick people before attorneys get involved.

Who knows what can happen before an attorney gets involved? Best not to find out.

THREATS WON'T WORK

I had a workers' compensation client whose insurance company told him that if he didn't settle his case for the amount they were offering, they would discontinue his weekly checks.

Luckily he knew that couldn't happen, but unfortunately there are so many clients who don't know.

When he contacted us, he'd gone two weeks without being paid and I immediately called the adjuster. She said he "fell off the system" and that she would mail his check that day.

After that, we got him a second opinion on his injuries and he needed surgery, which means his case was worth a lot more than what the insurance company was offering*. It's sad, but we often see adjusters try to bully our clients into a settlement.

Bullying is wrong. But it can work in the early stages, before a client gets a good attorney. Against an experienced attorney, it usually backfires.

Injured clients don't need to be re-injured this way.

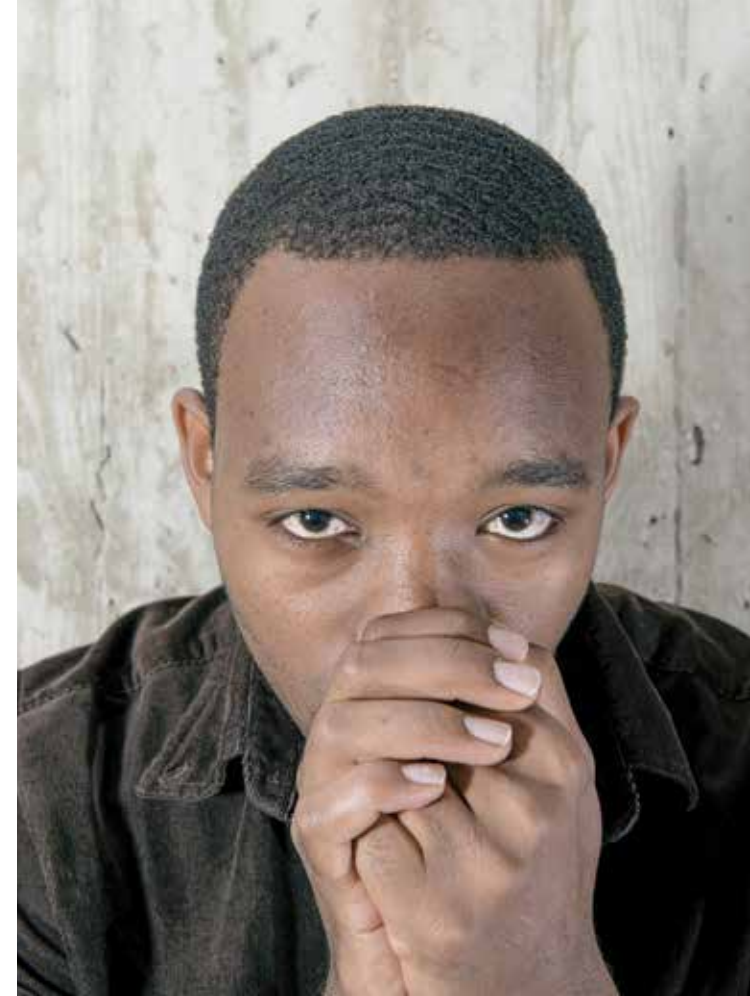
DANGER ON THE ROAD

We've seen a theme with how one particular insurance company handles DWI cases. It's as if they're operating under the assumption that so many cases get dismissed.

They often say they won't pay anything until there's been a conviction, to which I respond: I can prove impairment without a conviction.

DWI's are incredibly dangerous. It's usually a small miracle when no one is killed. Insurance companies know that, too, but some will fight almost everything.

A DWI is a dangerous premeditated act. People know how much they are drinking until they drink too much.



“The facts can be clear as day sometimes, but some insurance companies will find a way to add lots of clouds. For the sake of paying less, no matter what.”

Injured? Tell Them You Mean Business!

Injuries have a terrible way of affecting everything important in your life: your health, your job, your finances and your family. You shouldn't also have to worry about whether or not you're being treated fairly by the insurance company.

That's why our firm was founded in 1997: to try to make sure injured people aren't bullied or taken advantage of.

Since then we've recovered over \$750 million in gross for over 30,000 clients, not including the \$1.25 billion we helped recover against the U.S. government for 18,400 claimants in a historic class action case.

We've done this because we have lots of quality professionals. Over 35 attorneys. Over 100 staff. 7 attorneys board certified in North Carolina in their fields.

If you've been injured, please give us a call 24/7 at 1-866-900-7078 or visit us at www.farrin.com.

DISCLAIMER:

*Cases or matters referenced do not represent the law firm's entire record. Each case is unique and must be evaluated on its own merits. The outcome of a particular case cannot be predicated upon a lawyer's or a law firm's past results. These are specific examples of experiences we have had with some insurance companies, adjusters, employers, clients or others. These stories do not necessarily represent any industry or employer as a whole. These descriptions of events are based upon the recollections of individual staff members. Client identities have been removed or changed to protect their privacy. Images used do not represent actual events or real people.

**In re Black Farmers Discrimination Litigation, the Law Offices of James Scott Farrin was the leading part of a team of law firms that ultimately recovered \$1.25 billion for African-American farmers from the United States government for discrimination.

LAW OFFICES OF

JAMES SCOTT FARRIN

LAW OFFICES OF JAMES SCOTT FARRIN

1.866.900.7078
www.farrin.com
280 S. Mangum St.
Suite 400
Durham, NC 27701

Car Accidents | Commercial Truck Accidents | Workers' Compensation |
Social Security Disability | Personal Injury | Eminent Domain | Intellectual
Property | Civil Rights | Defective Drugs & Products