

Curriculum Vitae

of

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Summary/Overview:

My work with insurance property claims related matters for over 30 years has positioned me to speak in an expert capacity regarding the valuation of personal property and commercial contents as related to insurance claims settlement and in other matters requiring valuation expertise.

During my career, I have had the opportunity to assist insurance adjusters in the preparation and resolution of well over 1 million contents claims. My education and unique level of experience, accumulated over a career spanning 37 years, has allowed me to develop specialized technical knowledge and skill in contents valuation and insurance claims practice. This enables me to render expert findings, fair and impartial opinions, using research and valuation methods generally accepted in this field of endeavor.

Whether in Deposition, Testimony at Trial, or in Written Report for the consideration of the court, I deliver an objective analysis and evaluation of the evidence presented in any particular case. I also can act in an Expert Consultant capacity, in the event that rather than testimony, comments are required on the merits of a particular case or body of evidence.

In the area of Alternative Dispute Resolution, acting as Appraiser, I provide objective, independent review, analysis and testimony when a claim has been remanded to Appraisal. In regards to contents, with my technical knowledge, I can properly address all the key issues and disputes within the differing analyses of the claim and do so within the parameters of the applicable policy. Ultimately, I present a qualified and solid foundation for my findings and seek to do so in a clear and precise way.

Education:

1970 – 1973, Undergraduate studies, New England Conservatory

1995, MBA with Honors, Northeastern University, Beta Gamma Sigma Honor Society for Collegiate Schools of Business

Employment History:

1973 – 1984: Various

During this period, I held various sales, purchasing and management positions with companies involved in the retail sale and wholesale distribution of appliances, consumer electronics and recorded music.

1984 – 2012: Home Entertainment Distributors, Inc. dba Insurers World - President

The principal business of Insurers World was in the service of insurance carriers in relation to personal and commercial property claims. Services lines of business included: contents valuation software, on site scope of loss, valuation of contents through the research of like kind and quality replacement items and their associated replacement cost values. During my tenure, I was responsible for corporate management, insurance carrier relations, production practices, strategic initiatives, claims business logic, good faith compliance and product development.

1996 – 2012: Via Group, LLC – Executive Vice President

Via Group was founded to accommodate the spinoff and merger of the contents software divisions of Insurer's World and Waxman Insurance Services. I held this position simultaneously with my employment at Insurers World.

2012 – 2015: Enservio, Inc. – Senior Vice President & Consultant

I joined Enservio following their acquisition of Insurers World. Enservio is a technology and services company dedicated to the insurance industry and its claimants. Enservio software and service solutions include on site inventory, valuation, payments and contents replacement. My initial responsibilities were to assist in the transition and integration related to the acquisition and merger. My role developed to include internal consultation related to sales, product development, data analysis, claims market trends and customer experience. As consultant, I also worked with clients addressing issues regarding work flow, claims process and procedure.

2015 to Present: Stafford Claims Consulting LLC – Principal

Stafford Claims Consulting has 2 areas of focus. Litigation support in the form of consulting, dispute resolution, appraisal and expert witness services. The other area of endeavor is in consulting with insurance carriers on claims practice and process seeking to enhance efficiency, accuracy and customer satisfaction.

Experience/Achievements:

In my career spanning 4 decades, 31 years as President of Insurer's World and more recently as SVP at Enservio, I had the great pleasure of assisting a broad range of carrier clients – from Top Tier National writers and Super Regionals to local Mutuals – in the preparation, presentation and resolution of well over 1 million contents claims. Our work together benefited policyholders, indemnifying them for their losses, through settlements of over \$10 billion related to contents.

The shared objective with every claim was to ensure that each was handled expeditiously and accurately, within the terms and conditions of the policy, to allow for a fair, supported and credible settlement that, in the claims moment of truth, would be contributory to customer satisfaction.

In describing my experience and achievements, self-promotion makes it tempting to use the descriptive: Visionary. In truth, I have been fortunate to live in a period of great technological change and have had the benefit of working with a great many carrier executives, claims managers, front line adjusters and policyholders, all of whom have been very generous with me by sharing their insights, thoughts and knowledge about good faith claim process and their needs in adjusting contents claims. Over the years, together, we developed and enhanced contents best practices driving forward continuous improvement.

When I joined the industry, in regards to contents, the adjuster's tools of the trade were a legal pad, company contents paper form, pen and calculator with tape. To establish replacement cost, one compared the claimant's item descriptions to the JC Penny, Montgomery Ward, Sears and Service Merchandise catalogues. To determine depreciation amounts, the adjuster would consult a life expectancy chart and manually calculate a suitable rate. It was typical that small claims, theft and lightning, were desk adjusted by inside adjusters within the many local offices of the carriers. To establish a like kind and quality replacement value for a particular consumer electronics item, an adjuster might enlist the aid of a product specialist by calling them on the phone, stipulating the brand and model and the specialist would identify a current LKQ item and its current replacement cost. I would estimate the number of insurance replacement specialist employees participating in claims at that time was ~50.

In the intervening years, in the industry adaptation of technology, I worked with, and then led, teams in the design, development and delivery of Excel templates and contents estimating software that allowed for increased speed, efficiency, accuracy and consistency in the handling of contents claims. These started with green screen-main frame efforts, to the 1st Windows based system, leading to one of today's leading internet delivered SaaS Carrier-Insured-Vendor collaborative contents platforms. I personally led training sessions for over 1,000 adjusters during this time. Today contents software features include seamless research of LKQ replacement items and RC values, the application and adjustment of category

specific depreciation dependent on condition, settlement calculation that accounts for policy, special limits and the amount of deductible to be absorbed when damages exceed limits, as well as routines to handle replacement cost recovery and payment of recoverable depreciation.

I participated in the roll out of the nation's first carrier centralized call center devoted to theft as a peril specialty, this a precursor to today's Fast Path initiatives, many of which I have been involved with since. Here the insurance adjuster would outsource the LKQ/RCV contents item analysis to my firm, the adjuster would in turn leverage the response, within the contents software, to provide an adjusted settlement for the claimant. With this process, lower severity contents claims, typically theft and lightning, could be adjudicated in hours as opposed to days or weeks.

Expanding on the concepts of peril specialty and contents efficiency, I had opportunity to work to improve practices in high severity contents loss as well. In the case of a major fire loss, typical practice at the outset tasked the adjuster or contents valuator with LKQ analysis and pricing of the thousand or more loss items, researching one at a time, in sequence. The necessity of managing multiple claims and balancing the needs of many insureds often meant that the research effort to complete any particular claim took many weeks and often times more than a month. In this case, I was able to enhance the software to accommodate multiple research participants on any given contents claim. This allowed for coordinated and simultaneous processing of the contents research reducing cycle time to days rather than weeks.

Looking at another typical major loss practice, we found that many insureds took 6 months or longer to submit their contents lists after sustaining a major loss fire of catastrophe. Typically, the adjuster would perform a full scope of damages on the structure and would give the insured forms on which they would list their contents. The enormity of the task, combined with the other issues of getting their lives back to normal, left many insureds ill equipped for the task. Here, carrier recognition of a value add opportunity led to establishing major contents loss as a specialty. An adjuster responsible for the contents portion of the loss would be assigned to perform the on-site scope, gather information from the insured as to ages, values and those items burnt from sight. Here, I was able to assist carriers in defining the process and procedures for the on-site capture of contents qualifying details using digital voice recorders and cameras leveraging the contents software as a medium of exchange. Further, I established a business unit to provide this service as a business process outsource for carriers who either did not have sufficient scale to staff this position or for those with staff beyond current capacity.

Over the years, as the utility of contents software became the norm rather than the exception, the data warehouse of contents claims grew. This led me to analytics of contents data as an area of specialty, working with carriers in benchmarking efforts

and in cost benefit analysis when considering peril differentiated processes, contents technology solutions or contents process outsource versus in house efforts.

In terms of contents claims process, I am proud of my involvement in the development of key components of current industry practice: LKQ/RCV selection tools and techniques - whether practiced by carrier adjusters in-house or outsourced to vendors, accuracy improvement in the calculation of depreciation and specialized contents handling both in FastPath and Large Loss scenarios. During my years in the field, contents as an insurance industry business process outsource has grown from employing ~50 to over 1,000 with contents specialty firms today. I have witnessed the evolution of contents property claims handling towards a more informed contents practice and process, both on the part of carrier and public adjusters, delivering an expedited claims service, with greater speed, efficiency, accuracy, consistency and transparency. Regardless of past achievements, I look forward to using my contents expertise assisting the finder of fact in the resolution of disputes that may arise in the valuation of contents.

Continuing Education and Presentations:

I have presented at numerous industry events, these including: the ACE Claims Conference, the Property Loss Research Bureau conferences and the National Underwriter Executive Conference.

Courses approved for adjuster continuing education credits that I have developed and presented include:

Controlling Contents Losses in Residential and Commercial Losses – addressed learning objectives of the organization of large and complex contents loss during the physical inspection and scope capture, how to establish or verify accurate values for at RCV and ACV for residential and commercial contents items and repair versus replacement options in a variety of contents claim scenarios. This course was presented at the Property Loss Research Bureau's 2011 Regional Conferences in Baltimore, Indianapolis and Sacramento in June, September and November of 2011 respectively. This course was also presented at the Property Loss Research Bureau National Claims Conference held in Boston during March of 2013.

Challenging Personal Property Evaluations - was aimed at helping insurance claims adjusters better understand how to establish accurate values for musical instruments, high-end designer handbags and other designer consumer goods. Various techniques were covered for investigation, evaluation, repair, or replacement options along with tips on recognizing counterfeit items. This course was presented at the Property Loss Research Large Loss Conference in September 2011 in Chicago.

Articles:

Are you depressed by sinkholes? Published on-line on 11/14/2014 by Property Casualty 360. Informative article advising homeowners to review and choose an appropriate level of insurance coverage. (www.propertycasualty360.com)

History of Expert Witness Experience at Trial or by Deposition:

Ruggerio v. Harleysville Preferred Insurance, Civil Action NO. 3:11-cv-00760, U.S. District Court - District of Connecticut on 12-15-2014. Testimony on behalf of defendant.

Fitzgerald/Thornton v. American Family Mutual, Civil Action No. 6:14-cv-00497, U.S. District Court - District of Oregon on 12-9-2014. Report on behalf of defendant.

Not Yet Retained