

Insurance Claim Document

Claim Number: CLM-539576

Policyholder: Jessica Johnson

Claim Type: Home

Claim Amount: \$24,823.00

Status: Denied

Date Filed: 10/20/2023

Client ID: CUST0068

Code	Description	Amount
ME002	Medical Expenses	\$5,533.37
CF006	Consultation Fees	\$19,289.63
Total		\$24,823.00