Insurance Claim Document

Claim Number: CLM-427666

Policyholder: Sarah Williams

Claim Type: Home

Claim Amount: \$22,673.00

Status: Pending

Date Filed: 6/8/2022

Client ID: CUST0090

| Code | Description | Amount |
|-------|------------------|-------------|
| LF004 | Legal Fees | \$95.02 |
| ME002 | Medical Expenses | \$22,577.98 |
| Total | | \$22,673.00 |