

Insurance Claim Document

Claim Number: CLM-170081

Policyholder: Jessica Johnson

Claim Type: Home

Claim Amount: \$45,881.00

Status: Under Review

Date Filed: 9/12/2022

Client ID: CUST0069

Code	Description	Amount
RC001	Repair Costs	\$1,850.65
ER007	Equipment Replacement	\$5,433.07
ME002	Medical Expenses	\$10,169.07
ER007	Equipment Replacement	\$3,775.10
CF006	Consultation Fees	\$24,653.11
Total		\$45,881.00