

Insurance Claim Document

Claim Number: CLM-615793

Policyholder: Michael Smith

Claim Type: Life

Claim Amount: \$42,191.00

Status: Pending

Date Filed: 4/14/2022

Client ID: CUST0075

Code	Description	Amount
LF004	Legal Fees	\$4,929.52
ER007	Equipment Replacement	\$3,682.73
RC001	Repair Costs	\$7,393.19
LF004	Legal Fees	\$1,104.51
CF006	Consultation Fees	\$25,081.06
Total		\$42,191.00