## Insurance Claim Document

Claim Number: CLM-229171

Policyholder: James Smith

Claim Type: Home

Claim Amount: \$22,926.00

Status: Denied

Date Filed: 7/25/2023

Client ID: CUST0007

Code	Description	Amount
PD003	Property Damage	\$5,040.84
PD003	Property Damage	\$2,495.07
CF006	Consultation Fees	\$3,192.84
ER007	Equipment Replacement	\$12,197.26
Total		\$22,926.00