

Insurance Claim Document

Claim Number: CLM-398723

Policyholder: Michael Williams

Claim Type: Auto

Claim Amount: \$37,567.00

Status: Denied

Date Filed: 10/12/2023

Client ID: CUST0080

Code	Description	Amount
LF004	Legal Fees	\$4,689.93
LF004	Legal Fees	\$3,183.20
RC001	Repair Costs	\$2,228.93
ME002	Medical Expenses	\$2,859.45
ER007	Equipment Replacement	\$24,605.49
Total		\$37,567.00