

Insurance Claim Document

Claim Number: CLM-462087

Policyholder: Sarah Brown

Claim Type: Home

Claim Amount: \$32,375.00

Status: Approved

Date Filed: 2/18/2020

Client ID: CUST0009

Code	Description	Amount
RC001	Repair Costs	\$2,135.86
CF006	Consultation Fees	\$13,912.17
RC001	Repair Costs	\$16,326.97
Total		\$32,375.00