

CLAIM REPORTING FORM

Insured Name: Nikhilesh Mishra

CLAIM INFORMATION

Date of Loss: 06/07/2023 Estimated Amount of Loss: \$1,000,000

Location of Loss (address, building): 2403 West 13th St N, Wichita, Kansas

Description of Loss: significant damage to the rear bumper and trunk area of my vehicle

Describe Damage: I was driving on when another vehicle collided with my car from the rear

Authority Contacted (if applicable): NY Windstorm Insurance Association Report #: 123455

Name of Person Responsible for Causing Damage (if applicable): _____

Phone #: (_____) _____

WITNESS(ES)

Name: Jazlynn Zachman Phone #: (844) 123-4567

Name: Bruno Canoy Phone #: (844) 123-6789

COMMENTS

Reported By: Nikhilesh Mishra Phone #: (844) 123-0000

Email: nikhilesh.mihsra@uipath.com Date: 06/07/2023