



Claim Form



**Questions?** Call us at 855-898-8991 or email us at [claims@healthypawspetinsurance.com](mailto:claims@healthypawspetinsurance.com).

## FILING A CLAIM IS AS EASY AS 1-2-3!

### 1. Complete Your Claim Form

Please complete all information below. Don't forget to sign and date!

### 2. Send Us Your Claim Form and Itemized Invoice

Help us process your claim quickly. Email, fax, or mail us this claim form, your itemized veterinary invoice, and include your pet's complete medical records if this is your first claim. **We're unable to process a claim without your pet's medical records.**

### 3. The Healthy Paws Team Processes Your Claim

Our goal is to process your claim as quickly as possible. We typically complete the processing of your claim within ten business days. Some claims may take a little longer, depending on when we receive all of your pet's medical records.

## YOUR POLICY INFORMATION

**Policy Number:** hp122345 **Pet Name:** Bo

**Pet Parent Name:** Larry Levin **Pet Id:**

**Phone Number:** (312) 305-0403 **Email:** larry@uglydogadventures

## YOUR CLAIM INFORMATION

**Invoice Number:** \_\_\_\_\_ **Invoice Date:** 11/07/2025

Please refer to the veterinary invoice that you will submit with this claim.

**Veterinary Hospital Name:** \_\_\_\_\_ **\$** \_\_\_\_\_

Animal Dermatology Clinic -Tustin \$235.76

**Date when your pet first showed symptoms of this illness or injury:** \_\_\_\_\_

### What was your pet treated for?

Exam - Medical Progress

**Note:** If this is the first claim for your pet, please ask your veterinary hospital to include a copy of your pet's complete medical history with doctor's exam notes and any laboratory results.

### Has your pet been seen by another veterinary hospital? If yes, which hospital(s)?

DECLARATION: I certify with my signature below that the information provided is accurate to the best of my knowledge. I authorize any veterinary hospital or veterinarian to provide additional information about my pet to Healthy Paws Pet Insurance. I understand that missing information or delays in delivering the pet's medical records may delay the processing of my claim. Claims must be submitted for processing within 90 days of invoice date.

For your protection California law requires that you sign this form for insurance coverage or to not

on who knowingly presents false or fraudulent information to obtain or amend a claim and may be subject to fines and confinement in state prison.

**Policyholder Signature:** \_\_\_\_\_ **Date:** November 24, 2025

## SUBMIT YOUR CLAIM FORM AND INVOICE



EMAIL  
[claims@healthypawspetinsurance.com](mailto:claims@healthypawspetinsurance.com)



FAX  
1-888-228-4129



REGULAR MAIL  
**Healthy Paws**  
P.O. Box 1156, Portland, ME 04104



**Animal Dermatology Clinic -Tustin**

2965 Edinger Avenue  
Tustin, CA 92780  
(949) 936-0066

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Al McGough  
10 Tioga Place  
Irvine, CA 92602

Client ID: T57446  
Invoice #: 1112911  
Date: 12/31/2024  
(714) 342-1731  
amcgruff@gmail.com

|                      |                            |   |
|----------------------|----------------------------|---|
| Patient ID: 55996    | Species: Canine            | Weight: 34.80 kilograms                 |
| Patient Name: Jaeger | Breed: Retriever, Labrador | Birthday: 05/26/2017 Sex: Neutered Male |

|                          | <u>Description</u>             | <u>Quantity</u> | <u>Total</u>    |
|--------------------------|--------------------------------|-----------------|-----------------|
| 12/31/2024               | Exam - Medical Progress        | 1.00            | \$160.00        |
|                          | Examination - Medical Progress | 1.00            |                 |
|                          | Clindamycin 150mg capsule      | 24.00           | \$45.32         |
|                          | Clindamycin 300mg capsule      | 24.00           | \$30.44         |
|                          | Patient Cared for by Vanessa   | 1.00            | \$0.00          |
|                          | Recheck 6 Months               | 1.00            | \$0.00          |
| <b>Patient Subtotal:</b> |                                |                 | <b>\$235.76</b> |

Reminder

06/30/2025 Recheck 6 Months

|                             |                 |
|-----------------------------|-----------------|
| <b>Invoice Total:</b>       | <b>\$235.76</b> |
| Total:                      | \$235.76        |
| Invoice Balance Due:        | \$235.76        |
| Credit/Debit Card:          | (\$235.76)      |
| Less Payment:               | (\$235.76)      |
| <b>Invoice Balance Due:</b> | <b>\$0.00</b>   |
| <b>Balance Due:</b>         | <b>\$0.00</b>   |

Visit our online pharmacy for your pet's diets, medications, and other pet care needs at [www.animaldermatology.com](http://www.animaldermatology.com)

And catch Animal Dermatology Group's own Dr. Joya Griffin on her new TV show, Pop Goes the Vet with Dr. Joya, airing on Nat Geo WILD and streaming on Disney+