## Proof of Loss

Document Type: Proof of Loss

Customer Name: James Thompson

Policy Number: P567890123 Policy Coverage: Full Coverage

Incident Date: 2024-09-15
Incident Type: Collision
Collision Type: Rear-End
Incident Severity: Low
Authorities Contacted: Yes

Authorities Contacted: Yes Police Report Available: Yes

Claim Amount: \$8,500

Property Damage: Rear-end damage to the vehicle, minimal body work required.