Claim ID: CLM-2025-0457

Claimant Name: Mr. John Smith

Policy Number: HLTH-9988776655

Date of Incident: July 12, 2025

Type of Claim: Motor Accident

Location: Downtown Crossing, Boston, MA

## Description of Incident:

While driving his Toyota Camry on the way to work, Mr. Smith was rear-ended at a red light by another veh

## Supporting Documents Attached:

- Photos of the vehicle damage
- Police Report (Case No. BPD-2025-1421)
- Medical receipts (emergency room visit)

Claim Amount Requested: \$3,450.00

**Urgency Level: Moderate** 

Additional Notes: Mr. Smith is seeking expedited processing due to the car being required for daily commu

Fraud Risk Indicator: None detected

Adjuster Notes: Awaiting repair estimate for final processing.