## **NOTICE OF CLAIM**

Claim and documentary evidence (i.e., police report, pictures, receipts, estimates, etc.) must be submitted to the Office of Risk Management (1720 2nd Avenue South, JNWB 504B, Birmingham, Alabama, 35294-0500). Give complete information and be specific. Itemize and substantiate all damages claimed by attaching estimates of property damage/loss, statement of account for all medical treatment, and any other items of damage/loss. All claims on behalf of minors (persons under 19 years of age) must be signed by a parent or guardian and notarized.

1. Name and Ma	ling address of claimant:
2. Phone numbe	of claimant: Home: Work:
	inor (less than 19 years of age)? Yes No If yes, give age of minor and the name of minor's ardian: Age: Name:
4. Date and time	he incident occurred:
<b>5.</b> Location of ir	ident (building, street address):
	of the occurrence, including the names of any witnesses. Include the extent of any injuries to person(s) and/or ty, and the amount of damage/loss. Be sure to <u>state the amount</u> of your claim. Attach a separate page if s required.
-	er source of recovery/payment for these expenses? (E.g., Homeowners/renters policy, automobile insurance, surance, worker's compensation coverage, etc.)
Yes:	Please explain:
	If 'yes', have you filed a claim with this carrier?
No:	There is no other coverage or payment source for this damage/loss/injury.
The information	provided by me in the above statements is true and correct to the best of my knowledge.
	Signature of claimant (or parent/guardian if claimant is a minor)
State of:	
County of:	
appeared	, a Notary Public in and for said State and County, personally who, being made known to me and informed of the contents d the statements by him/her therein, and being duly sworn, says such statements are true and correct.
Sworn to and su	scribed before me this day of , 20

Notary Public