NOTICE OF CLAIM

Claim and documentary evidence (i.e., police report, pictures, receipts, estimates, etc.) must be submitted to the Office of Compliance and Risk Assurance (1720 2nd Avenue South, AB 990, Birmingham, Alabama, 35294-0109). 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 M	uiling address of claimant:
2. Phone numb	r of claimant: Home: Work:
	minor (less than 19 years of age)? Yes No If yes, give age of minor and the name of minor's uardian: Age: Name:
4. Date and tin	the incident occurred:
5. Location of	acident (building, street address):
	s of the occurrence, including the names of any witnesses. Include the extent of any injuries to person(s) and/o erty, and the amount of damage/loss. Be sure to state the amount of your claim. Attach a separate page i is required.
-	ther source of recovery/payment for these expenses? (E.g., Homeowners/renters policy, automobile insurance, nsurance, 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:	
Before me appeared	, a Notary Public in and for said State and County, personally who, being made known to me and informed of the contents nd the statements by him/her therein, and being duly sworn, says such statements are true and correct.
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Sworn to and s	bscribed before me this day of , 20
	Notary Public