

11. A detailed statement concerning your claim:

12. Preferred legal action to be taken (if applicable):

13. Documents attached:

A) _____

B) _____

C) _____

D) _____

E) _____

F) _____

I, hereby, certify that the above information is to the best of my knowledge true and correct and fully understand that this claim may be repudiated in the event that I have intentionally provided Trustco Insurance with false information.

Signature of Person Submitting Claim: _____

Relationship to Policy Holder: _____

Date: _____

UNDERWRITTEN BY TRUSTCO LIFE LIMITED



TRUSTCO
oshi li nawa | it's all good