

Surgery Expense Insurance Claim

Policyholder Details

Name:
Alex Johnson

Policy Number:
SEI4081275

Contact Number:
+1 555-123-4567

Address:
456 Main Street, Springfield, USA

Patient Information

Patient Name:
Alex Johnson

Date of Birth:
Nov 20, 1980

Relationship to Policyholder:
Self

Surgery Details

Hospital Name:
Springfield General Hospital

Type of Surgery:
Appendectomy

Date of Surgery:
May 15, 2023

Attending Physician:
Dr. Lisa Evans

Hospitalization Period:
May 14, 2023 – May 18, 2023

Claimed Expenses

Description	Date	Amount (USD)
Surgical Fees	May 15, 2023	3,500
Hospital Room Charges	May 14–18, 2023	1,200
Laboratory Tests	May 14, 2023	350
Medications	May 14–18, 2023	225
Total		5,275

Bank Details for Claim Payment

Account Holder Name:
Alex Johnson

Bank Name:
First United Bank

Account Number:
*****8612

IFSC / Routing Number:
111000025

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge.

Signature:

Date:
