Incident Report Form 7/1/2023-2024 St Joseph Real Estate Services Corporation

Report an Automobile Claims 24/7

Auto Policy Number: 0500232-09-422879 1-800-554-2642 Option 2

Report other claims

Property / Liability / Crime Policy Number: 8878 1-800-228-6108

Complete applicable boxes as they correspond to you claim.

Parish/School: Name & Complete Mailing Address			Phone:		
			Fax:		
			E-mail:		
Contact:			Title:		
Date/Time of Incident:	ent:				
Injured Party: Name/Address/Age: (include parent or guardian name if a minor)					
Phone Number:			Alternate Number:		
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Injured Party: Parishioner Volunteer Vendor General Public Other Please check the most applicable description as it relates to the incident.					
Medical or First Aid Offered? Accepted or Refused				Transported by Ambulance:	
Yes No					
Description of Accident or Damage:					
Were Photographs Taken? – Suggested for property losses over \$5,000, vehicle accidents and liability claim that may have premises factors involved:					
Public Authority Contacted:	Contacted: Name of Authority:			Incident Report Number:	
Yes No No					
Auto Claim Information:	Vehicle Inv	Vehicle Involved - Year:		Make/Model:	
Witnesses: Name/Address/Phone:					
Additional Comments/Information: (If additional space is required, please use reverse side or an additional page)					
Date:		Complete	d Pv:		
			Completed By:		
Please complete and report immediately with as much information as available at the time of loss. Submit this report directly to Catholic Mutual Group. Preference for submission:					
E-mail: reportaclaim@catholicmutual.org or fax: 402-551-2943 or					
Auto 1-800-554-2642 Option2, All Other: 800-228-6108					
Also submit a copy to Aon Risk Solutions: Laura Erdmann: laura.erdmann@aon.com or fax 920-431-6352.					
RETAIN A COPY IN YOUR PERMANENT FILE					

Prepared on: 7/1/2023