

Claim Serial #:

**FIRST AGENCY, INC.**

5071 West H Avenue  
Kalamazoo, MI 49009-8501  
(269) 381-6630 Telephone  
(269) 381-3055 Fax

COLLEGE CLAIM NO: \_\_\_\_\_

NAME OF COLLEGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City

State

Zip

## CLAIM SHEET FOR INTERCOLLEGIATE CLAIMS

**IMPORTANT: THIS INFORMATION MUST BE GIVEN OR CLAIM WILL BE RETURNED.**

### COLLEGE OFFICIAL TO COMPLETE

STUDENT'S **FULL NAME** (PRINT): \_\_\_\_\_

STUDENT'S HOME ADDRESS: \_\_\_\_\_

Street

City

State

Zip

STUDENT'S COLLEGE ADDRESS: \_\_\_\_\_

Street

City

State

Zip

STUDENT'S SOCIAL SECURITY NUMBER OR PASSPORT IDENTIFICATION NUMBER: \_\_\_\_\_

**Please note that the Injured Person's Social Security Number MUST be provided as required by the Center for Medicare Services**

**pursuant to Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007.**

STUDENT'S DATE OF BIRTH: \_\_\_\_\_ SEX \_\_\_\_\_ GRADE \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

DATE OF ACCIDENT: MONTH \_\_\_\_\_ DAY \_\_\_\_\_ YEAR 20 \_\_\_\_\_ HOUR \_\_\_\_\_ A.M. or P.M.

**DETAILED DESCRIPTION OF ACCIDENT: HOW DID IT OCCUR?** \_\_\_\_\_

**WHERE DID IT OCCUR?** \_\_\_\_\_

PART OF BODY INJURED: RIGHT \_\_\_\_\_ LEFT \_\_\_\_\_ PART \_\_\_\_\_

ACTIVITY: SPORT \_\_\_\_\_ INTERCOLLEGIATE \_\_\_\_\_ INTRAMURAL \_\_\_\_\_

OTHER (DESCRIBE): \_\_\_\_\_

NAME OF COLLEGE AUTHORITY SUPERVISING ACTIVITY: \_\_\_\_\_

WAS SUPERVISOR A WITNESS TO THE ACCIDENT? YES \_\_\_\_\_ NO \_\_\_\_\_

IF NOT, WHEN WAS THE ACCIDENT FIRST REPORTED TO A COLLEGE AUTHORITY? DATE \_\_\_\_\_

DATE OF THIS REPORT: \_\_\_\_\_

SIGNATURE OF COLLEGE OFFICIAL: \_\_\_\_\_

TITLE: \_\_\_\_\_

A COPY OF THE PARENT INFORMATION FORM, SIGNED BY THE STUDENT AND PARENTS, MUST BE ATTACHED

**GUARANTEE TRUST LIFE INSURANCE COMPANY FRAUD LANGUAGE**

Dear Insured: Below is a listing of the fraud language that your State Department of Insurance requires us to give to you. Please first locate your state of residence and then read the fraud language that pertains to your state. Thank you.

Alabama Arkansas California Connecticut Georgia Iowa Illinois	Kansas Louisiana Massachusetts Michigan Missouri Mississippi Montana	South Dakota Texas Utah Vermont Wisconsin West Virginia Wyoming
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**Generic Fraud Warning (to be used for above states only)**

Any person who knowingly presents a fraudulent claim containing any false or misleading information is guilty of insurance fraud and may be subject to fines and confinement in prison.

**Alaska, Delaware, Idaho, Indiana, Oklahoma** - Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.

**Colorado, Washington D.C., Hawaii, Maine, Tennessee, Virginia** - It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance coverage.

**Arizona, Minnesota, New Jersey, New Mexico** - Any person who knowingly and with intent to defraud an insurer presents a false or fraudulent claim for payment of a loss or benefit is guilty of a crime and may be subject to civil fines and criminal penalties.

Kentucky, Ohio, Oregon - **Any person who intends to defraud or knowingly assists in committing a fraud against an insurer by submitting an application or claim containing a false or deceptive statement is guilty of insurance fraud.**

**Florida** - Any person who, knowingly and with intent to injure, defraud, or deceive any insurance company files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in Section 817.234 F.S.

**Maryland** - Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**New Hampshire** - Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.

**Pennsylvania** - Any person who knowingly and with intent to defraud any insurance company or other person files statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**Rhode Island** - Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**Washington State** - It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

### ***BERKLEY ACCIDENT AND HEALTH FRAUD LANGUAGE***

#### **FOR RESIDENTS OF ALL STATES OTHER THAN THOSE LISTED BELOW:**

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**ARIZONA:** For your protection Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

**ALASKA and KENTUCKY:** Any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim containing any materially false, incomplete or misleading information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and may be prosecuted under state law.

**CALIFORNIA :** For your protection California law requires the following to appear on this form: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

**COLORADO:** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

**FLORIDA: WARNING :**Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

**GEORGIA:** Any natural person who knowingly or willfully

- 1) Makes or aids in the making of any false or fraudulent statement or representation of any material fact or thing:
  - a) In any written statement;
  - b) In the filing of a claim; or
  - c) In the receiving of money for an application for a policy of insurance for the purpose of procuring or attempting to procure the payment of any false or fraudulent claim or other benefit by an insurer;
- 2) Receives money for the purpose of purchasing insurance and converts such money to such persons own benefit;
- 3) Issues fake or counterfeit insurance policies, certificates of insurance, insurance identification cards, or insurance binders; or
- 4) Makes any false or fraudulent representation as to the death or disability of a policy or certificate holder in any written statement for the purpose of fraudulently obtaining money or benefit from an insurer commits the crime of insurance fraud.

**NEW HAMPSHIRE:** Any person who, with a purpose to injure, defraud, or deceive any insurance company, files a statement of claim containing any false, incomplete, or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.

**NEW JERSEY:** Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

**NEW MEXICO and PENNSYLVANIA:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**VIRGINIA:** Any person who, with the intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may have violated state law.

**NEW YORK\* :** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.