

HOW TO FILL IN THE CLAIMS FORM

The Insurer needs certain information in order to determine whether your medical treatment is covered by your policy. You **must** therefore indicate the nature of the illness and the date of first diagnosis on the claim form.

Please find below an example of how to complete the form:

| Surname/First Name | Description of Medical Expenses/Treatment | Type of illness and date of diagnosis |
|--------------------|---|--|
| SMITH John | Consultation with GP & medication of 15.01.2020 | Flu - 15.01.2020 |
| SMITH Ann | Osteopathy of 30.01.2020 | Backache sínce 01.10.2019 |

We regret that any incomplete claim will be returned to you.

Thank you for your cooperation.

AMARIZ LIMITED