

## Affidavit — Lightning loss Claim #\_\_\_\_ This report should be completed by a repairman or licensed electrician. The completed document should then be returned to your claim handler for processing. The name and address of the claim handler is available through Customer Claim

Cer	nter on the Horace Mann website: horacem	nann.com
Naı	me of claimant	Address
1.	Date of loss	Time of loss
2.	Were fuses blown?	Amperage of fuses
3.	List all damages by bolt of lightning	
4.	Manufacturer's name	
5.	Item grounded or lightning arrestor?	
6.	State reasons why loss appeared to be a res	sult of lightning
7	Litmus paper test made?	Smell acidity?
		Sinon detaily.
	s my firm conviction that this loss was a result and or because of a defect in the appliant to the appliant of	ult of lightning and was not occasioned by low voltage, mechanical nce.
		(signed)Repairman/Licensed electrician
		Address
Wit	ness	
On	this day of y	ear, before me personally came
exe	, to me cuted the foregoing instrument, and he there	ear, before me personally came known, and known to me to be the individual described in and who eupon duly acknowledged to me that he executed the same.
		Notary Public
My	commission expires	, year

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## **State fraud warnings options for claim forms**

AK, DE, ID, IN, KY, MN, NH, OK

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 and may be prosecuted under state law.

AR, AZ, HI, LA, MD, NJ, NM, OH, RI, WV

For your protection state law requires the following statement to appear on this form.

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

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.

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.

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.

Any person who knowingly and with intent to injure, defraud, but if not acceptable use this: 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.

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.

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."

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.

CA

CO

DC

FL

ME, TN, VA, WA

NY – other than auto

PA

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