




Supporting Documents For Group Healthcare Claim

Checklist 	Tick here
1. Original completed claim form	<input type="checkbox"/>
2. Original final detailed hospital bills or receipts	<input type="checkbox"/>
3. Original final clinic bills or receipts	<input type="checkbox"/>
4. Medical Report/Discharge Summary	<input type="checkbox"/>
5. Copy of work permit, if applicable	<input type="checkbox"/>

We will contact you for any additional documents that may be required.