

1-800-456-5974 / 512-478-8753 / 512-615-8942 fax

PUBLIC OFFICIALS LIABILITY CLAIM LOSS REPORT

Please indicate type of claim:

Incident Report Only Making a Claim Requesting Pre-Claim Assistance

Entity No.:	Date of Incident:
	Date Reported:
MEMBER:	Reported by:
Address:	Contact Name:
City/State/Zip:	Contact Phone No.:
	E-MAIL:
Incident Description and/or Allegations:	
PLAINTIFF / CLAIMANT	CONTACT INFO:
Represented by Attorney? No Yes-List below	v Contact Info:
Notice of Claim?	or Lawsuit Filed and Served?
Member Officials / Employees Named and/or Involved (please include contact information)	

Rev.4-15/AFB