

**Claim Report Form - Wynward Insurance Group
Fifth Avenue Collection Jewellers Insurance Program**

Certificate #:	Certificate Effective Date:	Certificate Expiry Date: Jan. 1, _____
Insured Name and Address:	Home Phone:	Business Phone:
	Person to Contact:	Contact Phone:
Date & Time of Loss:	Description of Loss and Damage:	
Kind of Loss (Fire, Theft, Etc.):		
Police/Fire Department & Official Reported to:	Probable Amount of Entire Loss: \$	
McCauley Agencies 453 Main Street North Moose Jaw, Saskatchewan S6H 0W5 Phone: (306) 694-4848	Fax to: <p align="center">(306) 692-2772</p>	