

II. Insurance

I certify that I own no insurance* covering any items in section I except as described below. The following items are covered by insurance but the insurer has fully or partially denied their reimbursement. I have attached all relevant information, including copies of correspondence with the insurance company.

Description of Property	Purchase Price	Indicate Fully Denied or Partially Denied	Reimbursement Amount (if partially denied)

Insurance company name:

Policy number:

Address:

(street)

(city)

(state)

(zipcode)

* For the purposes of Peace Corps evacuation reimbursement, if your insurance policy states that your property will not be covered for losses related to evacuation or evacuation causes, these items will be considered by Peace Corps not to be insured (i.e., you own no insurance on the items).

III. Volunteer/Trainee Verification & Release

I verify that this claim is true and correct, to the best of my knowledge and belief, and, except as disclosed in section II above, that I have not received reimbursement or replacement from any other source for the items claimed.

I further certify that my acceptance of payment in settlement of the claim for the items listed above will constitute full satisfaction of said claim against the United States Government, its employees, or Peace Corps Volunteers/Trainees.

Volunteer/Trainee Signature

Date

IV. Regional Director's Action

The Regional Director reviews the entire form, strikes through any item in section I that is not reimbursable, and completes this section.

<input type="checkbox"/> Approved	Property amount: _____
	Cash amount: _____
<input type="checkbox"/> Denied	

I verify that approval or denial of this claim is in accordance with the policies and procedures in MS 235.

Regional Director Signature

Date

Note: Falsification of an item in this claim may result in a fine or imprisonment or both (18 USC 287; id 1001).