

理赔申请书 Application for Claim

平安养老保险股份有限公司北京分公司:

兹有: 学校(School name): _____, 国籍(Nationality): _____,

护照号码(Passport number): _____, 留学生/外教, 中文名 (Chinese name) : _____,

英文名 (护照全名) English name (Full name on passport) : _____,

CSC号 (公费生) CSC number (Chinese government scholarship students) : _____,

因病 (意外伤害) 在医院治疗, 现已治疗完毕, 特向贵公司提出理赔申请。Treated in hospital for illness (accidental injury). Now that the treatment was been completed, we hereby request for reimbursement from your company.

院校 School (盖章 seal):

日期 Date:

委托书 letter of attorney

请将理赔款汇至如下指定账户

please remit the claim to the account specified below:

户名 Account name:

账号 Account number:

开户行 Bank branch name:

被保险人 The insured (签字 signature):

日期 Date:

注:请提供收款人身份证正反面复印件 (Please provide a copy of the trustee's ID card)

本人联系方式 Contact number: _____