




ALABAMA MUNICIPAL INSURANCE CORPORATION

110 NORTH RIPLEY STREET • MONTGOMERY, AL 36104
PHONE: 334-386-3863 • FAX: 334-386-3873 • TOLL FREE: 1-866-239-AMIC (2642)
WWW.AMICENTRAL.ORG

MEMORANDUM

DATE: April 25, 2024
TO: City of Madison
FROM: Kelly Jackson
Accountant 
RE: Recovery of Deductible

Enclosed is check #90773 for \$500.00 representing the deductible that was recovered for claim #061433. If you have any questions, please contact us.

Insuring the Future of Local Government

Description	From Date	To Date	Invoice #	Invoice Amt	Amount
Recover 1st Party Ded.				\$0.00	\$500.00

Claim Number: 061433 Claimant: City of Madison Payee: City of Madison, ETAL
Check Number: 90773 Total Check Amt: \$500.00 Event Date: 2/10/2024 Department: MAD City of Madison, ETAL
Adjuster Name: Monica Thompson Adjuster Phone #: (334)386-4252 Control Number: 0170736
Payee Tax ID: