FRIEND OF THE COURT Renae Topolewski



ASSISTANT FRIEND OF THE COURT Ronald J. Kaski

## ST. CLAIR COUNTY FRIEND OF THE COURT

31<sup>st</sup> Judicial Circuit 201 McMorran Blvd., Room 1600 Port Huron, Michigan 48060 Phone (810) 985-2285

## HEALTH INSURANCE INFORMATION

## Please verify current health insurance information for <u>children</u> on this case. Submit a copy of the Front and Back of the Insurance ID card.

- Court Docket No:
- Client Name:
- □ Name of Children Insured:
- Policy Holder if other than client:
- □ Name of Employer:

Medical Insurance: Claim Address: City, State, Zip: Phone No.:	Date Effective:	Policy No.: Group No.: Contract No.:
Optical Insurance:	Date Effective:	Policy No.: Group No.: Contract No.:
Dental Insurance: Claim Address: City, State, Zip: Phone No.:	Date Effective:	Policy No.: Group No.: Contract No.:
Prescription Insurance: Claim Address: City, State, Zip: Phone No.:	Date Effective:	Policy No.: Group No.: Contract No.:
Other Insurance: Claim Address: City, State, Zip: Phone No.:	Date Effective:	Policy No.: Group No.: Contract No

Completed by:	Phone:
Date:	_