

Guardian

Allianz Insurance plc | Claims



Client Details (Please insert)

I of
the and Guardian of aged
hereby acknowledge to have received from Allianz Insurance plc the sum of £ which amount is paid in
full and final settlement and discharge of all claims (past, present and future) against
and all other persons in respect of the personal injuries sustained by my said
On the day of at

I agree in consideration of the payment of the said sum to indemnify the said
and all other persons against any further or other claim by or on behalf of my said
in connection with the said injuries, and I the said
I confirm the said full and final settlement and payment of the said sum

In addition to the above payment we are aware that a payment of £ has been made to our Solicitors/Assessors
in respect of their costs.

Date
Signature
Signature
Witness
Address