



# STATEMENT OF LOSS

**Insured:** City of Palm Bay  
**Claim Number:** 417822  
**Policy Number:** PX FL1 0052502 22-08  
**Date of Loss:** Friday, July 28, 2023  
**Nature of Loss:** Lightning  
**Location of Loss:** 621 Hurley Blvd. SW, Palm Bay, FL 32908  
**EM Number:** 1000417143

<u>Coverage &amp; Detail</u>	<u>Itemization</u>	<u>Value</u>	<u>Loss</u>	<u>Claim</u>
<b><u>Real Property:</u></b>		N/A		
Action Target Quote	\$ 121,344.82			
Amplifier Receipt (Amazon)	\$ 379.00			
Johnstone Supply Invoice	\$ 290.13			
HP Quote (Printer)	\$ 643.08			
<b>Replacement Cost Loss</b>	<b>\$ 122,657.03</b>		<b>\$ 122,657.03</b>	
Deductible	\$ (2,500.00)			
Recoverable Depreciation	\$ (36,797.11)			
<b>Actual Cash Value Claim</b>	<b>\$ 83,359.92</b>			<b>\$ 83,359.92</b>