

Jay County Emergency Medical Service



902 N Creagor Ave
Portland IN 47371
Phone: 260-726-2311 Fax: 260-726-2371

Director: Pat Frazee *Assistant Director:* Marla Grady *Claims Coordinator:* April McElhaney

(Please print)

First Name _____ Middle Initial _____ Last Name _____

Birth Date _____ SSN# _____

Responsible
Party _____

Mailing
Address _____

City _____ State _____ Zip Code _____

Primary Insurance _____

Policy # _____ Group# _____

Card Holders Name _____

Date of Birth _____ SSN# _____

Secondary
Insurance _____

Policy # _____ Group # _____

Card Holders Name _____

Tertiary
Insurance _____

Policy # _____ Group # _____

Card Holders Name _____

If you have any other insurances please print another form and put them in order of how they should be filed. If you have any other questions please give us a call! 26-726-2311 Thank you!