Martinez v. Progressive Neutral Evaluation on Appeal

TO REQUEST A NEUTRAL EVALUATION ON APPEAL BY A REFEREE OF PROGRESSIVE'S NOTICE OF DETERMINATION OF YOUR CLAIM FOR SETTLEMENT BENEFITS, THIS FORM MUST BE POSTMARKED WITHIN 30 DAYS FROM THE DATE ON WHICH YOUR NOTICE OF DETERMINATION WAS POSTMARKED OR EMAILED TO YOU. PLEASE EMAIL THIS FORM TO Appeal@ProgressiveNMUMsettlement.com OR MAIL TO:
Martinez v. Progressive Settlement Administration P.O. Box 2350
Portland, OR 97208-2350 All information listed below is required. We will use this information to contact you and process your appeal. It will not be used for
any other purpose. If any of the following information changes, you must promptly notify the Settlement Administrator using the contact section of the Settlement Website or by writing to the address above.
1. NAME:
First Name: MI: Last Name:
2. MAILING ADDRESS:
Street Address:
Street Address 2:
City: State: ZIP Code:
3. PHONE NUMBER:
4. EMAIL ADDRESS:
5. Class Member ID (on the notice mailed to you)
(Example: A12BC4D56E)
*Contact the Settlement Administrator at 1-844-451-2728 if you cannot find or do not have a Class Member ID.
Signature
$Date: \square D D D = \square D D V Y Y Y$
Signature
Print Name