

(Your Name)
(Your Address)
(Your City, State Zip)

Contents Project Review Office
P.O. Box 106169
Atlanta, GA 30348-6169

Re: Doan v. State Farm, Request for Reconsideration
Claim Number: (Insert **State Farm** Claim number here)

To Whom It May Concern:

I have opted into the class action lawsuit (PICK ONE: by returning my postcard. OR by filling out the online submission form.) However, to date, I have received no further correspondence from State Farm.

Therefore, I would like to be contacted regarding the status of my claim noted above. I further request that any potential denial of my claim state the basis for the denial in writing, and mailed to me at the address above.

Sincerely,

(Insert Name Here)