

INSTRUCTIONS FOR FILING A CLAIM WITH THE J T THORPE COMPANY SUCCESSOR TRUST

The **CLAIM FORM & DECLARATION FOR THE J T THORPE COMPANY SUCCESSOR TRUST** (the "Claim Form"), is required of all Injured Parties filing a claim under the documentation requirements of the *J T THORPE COMPANY ASBESTOS CLAIMS RESOLUTION PROCEDURES, as amended (the "CRP")*.

How to Qualify for a Settlement Offer:

To submit a valid personal injury claim, an Injured Party must provide:

- A completed Claim Form; and
- A medical diagnosis of a compensable disease; and
- Evidence of exposure with the dates of commencement and termination of such exposure.

A copy of the Claim Form is attached. If additional copies are needed, the Claim Form may be copied. An Injured Party must submit a fully completed Claim Form and provide all supporting documentation referenced in the form.

Claim Form—Part 1: INJURED PARTY INFORMATION

1.1: Provide the full name, social security number, date of birth, mailing address and daytime phone of the Injured Party for whom the claim is being filed.

1.2: Check the appropriate box indicating whether the Injured Party is living. If the Injured Party is deceased, provide the Date of Death.

1.3: If the Injured Party or the Injured Party's Estate or Heirs has a representative, you must attach the Certificate of Official Capacity (if the personal representative is filing this claim) or other applicable document authorizing the Official Representative to act on behalf of the Injured Party. Additionally, complete the following information for the Injured Party's Official Representative:

- Provide the Official Representative's full name, mailing address and daytime phone; and
- Check the appropriate box indicating the capacity in which the Official Representative is authorized to act on behalf of the Injured Party.

1.4: If you believe your claim qualifies as an Extraordinary Claim and/or Exigent Claim, as defined below, check the appropriate box indicating this and provide an explanation and/or supporting documentation.

Pursuant to the CRP, an "Extraordinary Claim" means an Unsecured Asbestos Claim (as that term is defined in the Glossary of Terms for the Plan Documents, a copy of which is attached as Exhibit A to the Disclosure Statement of J T Thorpe Company) that otherwise satisfies the Medical Criteria for Disease Levels I – VII (provided below) that is (i) held by an Injured Party whose exposure to asbestos was at least 75% the result of exposure to an asbestos-containing product sold, fabricated, installed, maintained, repaired, removed and/or handled by J T Thorpe Company and there is little likelihood of a substantial recovery elsewhere and (ii) evaluated and liquidated by the Trust taking into consideration factors that affect the severity of damages and values within the tort system, including, but not limited to: (a) the degree to which the characteristics of a claim differ from the Medical/Exposure Criteria (provided below) for the Disease Level in question; (b) factors such as the claimant's age, disability, employment status, disruption of household, family or recreational activities, dependencies, special damages, and pain and suffering; (c) evidence that the claimant's damages were (or were not) caused by asbestos exposure, including exposure to asbestos-containing products sold, fabricated, installed, maintained, repaired,

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removed and/or handled by J T Thorpe Company; and (d) the industry and occupation of the Injured Party's exposure.

An "Exigent Hardship Claim" is an Unsecured Asbestos Claim that meets the Medical/Exposure Criteria for Severe Asbestosis (Disease Level III), or an asbestos-related malignancy (Disease Levels IV – VII), and the Trust, in its sole discretion, determines (i) that the Injured Party needs financial assistance on an immediate basis based on the Injured Party's expenses and all sources of available income, and (ii) that there is a causal connection between the Injured Party's dire financial condition and the Injured Party's asbestos-related disease.

Claim Form—Part 2: DIAGNOSED DISEASES

Check only the box identifying the highest Disease Level claimed by the Injured Party and provide the date of diagnosis beside the disease claimed. Documentation, as set forth below, must be submitted that supports the claimed disease.

Pursuant to the CRP, all claims filed with the Trust shall be deemed to be a claim for the highest Disease Level for which the claim qualifies at the time of filing, with all lower Disease Levels for which the claim then qualifies or may qualify in the future subsumed into the higher Disease Level for both processing and payment purposes. Notwithstanding the foregoing, the holder of a claim involving a non-malignant asbestos-related disease (Disease Levels I – III) may file a new claim for a malignant disease (Disease Levels IV – VII) that is subsequently diagnosed. Any additional payments to which such a claimant may be entitled with respect to such malignant asbestos-related disease shall not be reduced by the amount paid for the non-malignant asbestos-related disease.

Medical Evidence

All diagnoses of a Disease Level shall be accompanied by **either** (i) a statement by the physician providing the diagnosis that at least ten (10) years have elapsed between the date of first exposure to asbestos or asbestos-containing products and the diagnosis, **or** (ii) a history of the Injured Party's exposure sufficient to establish a 10-year latency period. A finding by the diagnosing physician that a claimant's disease is "consistent with" or "compatible with" asbestosis will not alone be treated by the Trust as a diagnosis. Subpart (ii) of this section may be satisfied by documentation such as a verified work history or annotated Social Security records or the affidavit or declaration of the Injured Party or the Claim Form used as a declaration by completing Part 7: DECLARATION.

The Trust shall determine whether a claim satisfies the medical criteria for the relevant Disease Level based on the following:

Disease Levels I – III: Non-Malignant Diseases

All diagnoses of a non-malignant asbestos-related disease (Disease Levels I – III) shall be based (i) in the case of an Injured Party who was living at the time the claim was filed, upon (A) a physical examination of the Injured Party by the physician providing the diagnosis of the asbestos-related disease, (B) an X-ray reading by a certified B-reader, and (C) pulmonary function testing¹ if the claim involves Asbestosis/Pleural Disease (Level II) or Severe Asbestosis (Level III); and (ii) in the case of a claimant who was deceased at the time the claim was filed, upon (A) a physical examination of the claimant by the physician providing the diagnosis of the asbestos-related disease, (B) pathological evidence of the non-malignant asbestos-related disease, or (C) an X-ray reading by a certified B reader.

¹ "Pulmonary Function Testing" shall mean spirometry testing that is in material compliance with the quality criteria established by the American Thoracic Society ("ATS") and that is performed on equipment which is in material compliance with ATS standards for technical quality and calibration.

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Level I: Asbestosis/Pleural Disease:

The injured party must document the diagnosis of Asbestosis or Pleural Disease (Level I) in accordance with Section 5.2(a)(3) of the CRP which states that the following requirements shall apply to all Asbestos Claims filed with the Trust:

Asbestosis/Pleural Disease (Level I): Diagnosis of a Bilateral Asbestos-Related Nonmalignant Disease.² The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the pulmonary condition in question.

Level II: Asbestosis/Pleural Disease:

The injured party must document the diagnosis of Asbestosis or Pleural Disease (Level II) in accordance with Section 5.2(a)(3) of the CRP which states that the following requirements shall apply to all Asbestos Claims filed with the Trust:

Asbestosis/Pleural Disease (Level II): Diagnosis of asbestosis with ILO of 1/0 or greater or asbestosis determined by pathology, or bilateral pleural disease of B2 or greater, plus (a) TLC less than 80% or (b) FVC less than 80% and FEV1/FVC ratio greater than or equal to 65%. The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the pulmonary condition in question.

Level III Severe Asbestosis:

The Injured Party must document the diagnosis of Severe Asbestosis in accordance with Section 5.2(a)(3) of the CRP which states that the following requirements shall apply to all Asbestos Claims filed with the Trust:

Severe Asbestosis (Level III): Diagnosis of asbestosis with ILO of 2/1 or greater, or asbestosis determined by pathological evidence of asbestosis,³ plus (a) TLC less than 65% or (b) FVC less than 65% and FEV1/FVC ratio greater than 65%. The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the pulmonary condition in question.

² Evidence of “Bilateral Asbestos-Related Nonmalignant Disease” for purposes of meeting the criteria for establishing the applicable Disease Levels, means a report submitted by a qualified physician stating that the Injured Party has or had an X-ray reading of 1/0 or higher on the ILO scale, or bilateral pleural plaques or pleural thickening (or, solely for claims filed against J T Thorpe Company or another asbestos defendant in the tort system prior to October 1, 2002 (the “Petition Date”), if an ILO reading is not available, a chest X-ray reading that indicates bilateral interstitial fibrosis, bilateral interstitial markings, bilateral pleural plaques or bilateral pleural thickening consistent with, or compatible with, a diagnosis of asbestos-related disease).

³ Proof of asbestosis may be based on the pathological grading system for asbestosis described in the Special Issue of the Archives of Pathology and Laboratory Medicine, “Asbestos-associated Diseases,” Vol. 106, No. 11, App. 3 (October 8, 1982).

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Disease Levels IV – VII: Malignant Diseases

Diagnoses of an asbestos-related malignancy (Disease Levels IV – VII) shall be based on either (i) a physical examination of the Injured Party by the physician providing the diagnosis of the malignant asbestos-related disease, or (ii) a diagnosis of such a malignant asbestos-related disease by a board-certified pathologist.

The Injured Party must document the diagnosis of **Colorectal, Esophageal, Laryngeal, Pharyngeal, Stomach or Lung Cancer, or Mesothelioma**, in accordance with Section 5.2 (a)(3) of the CRP which states that the following requirements shall apply:

Other Cancer (Level IV): Colorectal, Esophageal, Laryngeal, Pharyngeal, or Stomach Cancer:

Diagnosis of a primary colorectal, laryngeal, esophageal, pharyngeal, or stomach cancer, plus evidence of an underlying Bilateral Asbestos-Related Nonmalignant Disease. The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the other cancer in question.

Lung Cancer 2 (Level V): Diagnosis of a primary lung cancer. The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: OCCUPATIONAL EXPOSURE, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the lung cancer in question. Lung Cancer 2 (Level V) claims are claims that do not meet the more stringent medical and/or exposure requirements of Lung Cancer 1 (Level VI) claims.

Lung Cancer 1 (Level VI): Diagnosis of a primary lung cancer plus evidence of an underlying Bilateral Asbestos-Related Nonmalignant Disease, or in the absence of an underlying Bilateral Asbestos-Related Nonmalignant Disease, a Non-Smoker.⁴ The Injured Party is required to demonstrate (x) Qualifying Thorpe Exposure (defined in Part 4: **OCCUPATIONAL EXPOSURE**, below), (y) Five (5) Year Cumulative Occupational Exposure (defined in Part 4: **OCCUPATIONAL EXPOSURE**, below) to asbestos, and (z) that asbestos exposure was a contributing factor in causing the lung cancer in question.

If the Injured Party does not submit medical evidence of an underlying Bilateral Asbestos-Related Nonmalignant Disease, then the Injured Party must check all applicable statements on the Claim Form relating to the smoking history of the Injured Party.

Mesothelioma (Level VII): Diagnosis of mesothelioma. The Injured Party is required to demonstrate Qualifying Thorpe Exposure.

Claim Form—Part 3: STATUTE OF LIMITATIONS

Complete this section **only** if an asbestos-related personal injury lawsuit has been filed against J T Thorpe Company on behalf of the Injured Party.

3.1: Provide the Injured Party's current state of residence or, if deceased, the state of residence at the time of the decedent's death.

3.2: Provide the City, County, and State where the lawsuit was filed.

3.3: Provide the date on which the lawsuit was originally filed.

⁴ "Non-Smoker" means an Injured Party who either (a) never smoked or (b) has not smoked during any portion of the 12 years immediately prior to the diagnosis of the lung cancer.

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3.4: Provide the Docket or Cause Number of the lawsuit.

3.5: Check the appropriate box identifying the status of the case. If the status “Dismissed without Prejudice” is checked, the date the suit was dismissed **must be provided**.

3.6: Check the box indicating whether a tolling agreement applies. Provide a copy of the tolling agreement, if applicable.

3.7: Check the box indicating whether a prior Proof of Claim was filed in the J T Thorpe Chapter 11 Bankruptcy Case. Provide a copy of the prior Proof of Claim, if applicable.

Claim Form—Part 4: OCCUPATIONAL EXPOSURE

Part 4 must be completed if the Injured Party is claiming that his/her asbestos-related disease is a direct result of his/her occupational asbestos exposure, as opposed to Derivative Exposure (exposure through some other person). If the Injured Party claims Derivative Exposure, that is, the Injured Party claims his/her asbestos-related disease is a direct result of his/her exposure through another person, complete Part 5: DERIVATIVE EXPOSURE: EXPOSURE THROUGH AN OCCUPATIONALLY EXPOSED PERSON.

Exposure Evidence

Section 5.6(b) of the CRP **Exposure Evidence** states:

To qualify for any Disease Level, the Injured Party must demonstrate exposure to an asbestos-containing product sold, fabricated, installed, maintained, repaired, removed and/or handled by J T Thorpe Company (“Qualifying Thorpe Exposure”).

To meet the presumptive exposure requirements for Disease Level VII, the Injured Party must show Qualifying Thorpe Exposure. For Disease Levels I - VI, the Injured Party must show six (6) months of Qualifying Thorpe Exposure plus five (5) years cumulative occupational asbestos exposure in an industry and in an occupation in which the Injured Party (a) handled raw asbestos fibers on a regular basis; (b) fabricated asbestos-containing products so that the Injured Party in the fabrication process was exposed on a regular basis to raw asbestos fibers; (c) altered, repaired or otherwise worked with an asbestos-containing product such that the Injured Party was exposed on a regular basis to asbestos fibers; or (d) was employed in an industry and occupation such that the Injured Party worked on a regular basis in close proximity to workers engaged in the activities described in (a), (b), and/or (c) (“Five (5) Year Cumulative Occupational Exposure”).

4.1: J T Thorpe Asbestos Exposure

If the Injured Party has at least six (6) months of Qualifying Thorpe Exposure, complete the following:

- Provide the date the J T Thorpe exposure began and the date the J T Thorpe exposure ended.
- Provide the name of the Injured Party’s Employer, along with the City and State of the Employer.
- Provide the name of the Jobsite, the City or Location, and State.
- Provide the Injured Party’s Occupation in which he or she was employed while exposed to the asbestos-containing product sold, fabricated, installed, maintained, repaired, removed and/or handled by J T Thorpe Company.

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4.2: Five (5) Year Cumulative Occupational Exposure

Check the box(es) for all applicable statements demonstrating the Injured Party's Five (5) Year Cumulative Occupational Exposure.

4.3: Other Asbestos Exposure

Complete the following information for the Injured Party's first exposure to **any** asbestos product, not just J T Thorpe asbestos exposure:

- Provide the date the asbestos exposure began and the date the asbestos exposure ended.
- Provide the name of the Injured Party's Employer, along with the City and State of the Employer.
- Provide the name of the Jobsite, the City or Location, and State.
- Provide the Injured Party's Occupation in which he or she (a) handled raw asbestos fibers on a regular basis; (b) fabricated asbestos-containing products so that the Injured Party in the fabrication process was exposed on a regular basis to raw asbestos fibers; (c) altered, repaired or otherwise worked with an asbestos-containing product such that the Injured Party was exposed on a regular basis to asbestos fibers; or (d) was employed such that the Injured Party worked on a regular basis in close proximity to workers engaged in the activities described in (a), (b), and/or (c).

Claim Form – Part 5: DERIVATIVE EXPOSURE: EXPOSURE THROUGH AN OCCUPATIONALLY EXPOSED PERSON

If an Injured Party claims to have an asbestos-related disease resulting solely from his/her direct exposure to an Occupationally Exposed Person ("OEP"), such as a family member, the Injured Party claims Derivative Exposure. An Injured Party claiming Derivative Exposure must establish that the OEP would have met the exposure requirements under the CRP that would have been applicable had that person filed a direct claim against the Trust. Accordingly, Part 5 of the Claim Form **must be completed** if the Injured Party is claiming that his/her asbestos-related disease is a result of Derivative Exposure. If the Injured Party claims to have been exposed to more than one OEP, copy and complete Part 5 of the Claim Form for each OEP from whom the Injured Party claims Derivative Exposure. If the Injured Party is also claiming that his/her asbestos-related disease is a direct result of his/her own occupational exposure, then complete Part 4: OCCUPATIONAL EXPOSURE as well as Part 5: DERIVATIVE EXPOSURE: EXPOSURE THROUGH AN OCCUPATIONALLY EXPOSED PERSON of the Claim Form.

In Part 5, complete the following:

5.1 Injured Party's Exposure Through OEP:

- Provide the total number of years that the Injured Party was regularly exposed to asbestos through the OEP identified in 5.2.
- Provide the date when the Injured Party's asbestos exposure through the OEP first began.
- Provide the date of the Injured Party's last such asbestos exposure through the OEP.
- Describe the Injured Party's asbestos exposure through the OEP that is alleged to be the cause of the Injured Party's asbestos-related disease.

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5.2 OEP's J T Thorpe Asbestos Exposure: *[For each additional exposure period, copy and attach the additional completed information in 5.2, 5.3 and 5.4.]*

If the OEP has at least six (6) months of Qualifying Thorpe Exposure, complete the following:

- Provide the full name of the OEP.
- Provide the date the OEP's J T Thorpe exposure began and the date the OEP's J T Thorpe exposure ended.
- Provide the Employer name, City and State for the OEP.
- Provide the name of the Jobsite, the City or Location, and State for the OEP.
- Provide the OEP's Occupation in which he or she was employed while exposed to the asbestos-containing product(s) sold, fabricated, installed, maintained, repaired, removed and/or handled by J T Thorpe Company.

5.3 OEP's Five (5) Year Cumulative Occupational Exposure

Check the box(es) for all applicable statements demonstrating the OEP's Five (5) Year Cumulative Occupational Exposure.

5.4 OEP's Other Asbestos Exposure

Complete the following information for the OEP's first exposure to ***any*** asbestos product, not just J T Thorpe asbestos exposure:

- Provide the date the other asbestos exposure began and the date the other asbestos exposure ended.
- Provide the Employer name, City and State.
- Provide the name of the Jobsite, the City or Location, and State.
- Provide the OEP's Occupation in which he or she (a) handled raw asbestos fibers on a regular basis; (b) fabricated asbestos-containing products so that the Injured Party in the fabrication process was exposed on a regular basis to raw asbestos fibers; (c) altered, repaired or otherwise worked with an asbestos-containing product such that the Injured Party was exposed on a regular basis to asbestos fibers; or (d) was employed such that the Injured Party worked on a regular basis in close proximity to workers engaged in the activities described in (a), (b), and/or (c).

Claim Form – Part 6: PROOF OF EXPOSURE

The Injured Party or the Injured Party's Representative may demonstrate Proof of Exposure by checking the box marked "Claim Form as Declaration" and by completing Part 7: DECLARATION. **This allows the Claim Form to serve as a declaration.**

OR

The Injured Party or the Injured Party's Representative may check the appropriate box and submit one or more of the following documents as Proof of Exposure: (i) separate Injured Party or Official Representative affidavit, (ii) co-worker affidavit, (iii) invoices, employment, construction or similar records, (iv) verified listing of employer/jobsites, (v) verified work history, (vi) answers to interrogatories with verification page (specifying the pertinent page number(s)), or (vii) deposition transcript with cover

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page(s) (specifying the pertinent page number(s)). The documents must be submitted as an attachment to the Claim Form and Part 8 of the Claim Form must be completed.

Claim Form—Part 7: DECLARATION

The Claim Form may be used by the Injured Party as a first-party declaration to satisfy the exposure evidence requirements. To do so, the Injured Party (or the Injured Party Representative on behalf of the Injured Party) must complete and properly execute the Declaration. **If this section is completed, indicating that the Claim Form is serving as the exposure declaration, then every part of the Claim Form, with the exception of Part 5, if not applicable, must be complete.**

Claim Form—Part 8: CERTIFICATION

If Part 7: DECLARATION is not completed, indicating that the Claim Form is not serving as the exposure declaration, then Part 8 **must be completed** with separate documentation attached to the Claim Form demonstrating proof of exposure. Check the appropriate box identifying the person who is certifying the Claim Form.

Statutes of Limitations for Filing a Claim:

To be eligible, a claim must meet either (i) for claims first filed in the tort system against J T Thorpe Company prior to October 1, 2002 (the "Petition Date"), the applicable federal, state and foreign statutes of limitations and repose that were in effect at the time of the filing of the claim in the tort system, or (ii) for claims that were not filed against J T Thorpe Company in the tort system prior to the Petition Date, the applicable statute of limitation that was in effect at the time of the filing of the claim with the Trust. However, the running of the relevant statute of limitation shall be tolled as of the earliest of (A) the actual filing of the claim against J T Thorpe Company prior to the Petition Date, whether in the tort system or by submission of the claim to J T Thorpe Company pursuant to a settlement agreement; (B) the filing of the claim against another defendant in the tort system prior to the Petition Date if the claim was tolled against J T Thorpe Company at the time by an agreement or otherwise; (C) the filing of a claim against another defendant in the tort system after the Petition Date but prior to the date that is six (6) months after claim forms are first made available on the Trust website; (D) the filing of the requisite proof of claim for voting purposes in this Chapter 11 proceeding prior to the Effective Date (as that term is defined in the CRP); or (E) the filing of a proof of claim with the requisite supporting documentation with the Trust on or before May 1, 2006, so long as the applicable statute of limitation had not expired as of the Petition Date.

If a claim meets any of the tolling provisions described in the preceding sentence and the claim was not barred by the applicable statute of limitation at the time of the tolling event, it shall be treated as timely filed if it is actually filed with the Trust on or before May 1, 2006. Additionally, any claims that were first diagnosed after the Petition Date, irrespective of the application of any relevant statute of limitation or repose, may be filed with the Trust on or before May 1, 2006 or within three (3) years after the date of diagnosis, whichever occurs later.

Settlement Offers Based on Scheduled Values:

If the Injured Party submits a valid Asbestos Claim, the Trust will offer to liquidate the value of each Asbestos Claim based on the Scheduled Values established by the CRP for each Disease Level. These Scheduled Values represent equitable settlement values for most asbestos claims that meet the criteria of a

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corresponding Disease Level. The Injured Party will ultimately receive a percentage of the Scheduled Value based on the applicable Payment Sum Percentage (as that term is defined in the CRP).

Level	Disease	Scheduled Value
I.	Asbestosis/Pleural Disease	\$4,000.00
II.	Asbestosis/Pleural Disease	\$9,000.00
III.	Severe Asbestosis	\$25,000.00
IV.	Other Cancer	\$10,000.00
V.	Lung Cancer 2	\$10,000.00
VI.	Lung Cancer 1	\$25,000.00
VII.	Mesothelioma	\$100,000.00

Payments

All payments made by the Trust on account of Asbestos Claims shall be subject to the applicable Payment Sum Percentage.

Releases:

An Injured Party accepting payment from the Trust to resolve a malignant disease claim must execute a full release of the Trust and all Protected Parties (as that term is defined in the Glossary of Defined Terms attached as Exhibit A to the Disclosure Statement of J T Thorpe Company). An Injured Party accepting payment to resolve a non-malignant disease claim must execute a full release of all Protected Parties with the exception of the Trust and must execute a limited release (preserving only claims for an asbestos-related malignancy that is subsequently diagnosed) of the Trust.

Where to Submit Claim Forms:

Claim Form submissions for J T Thorpe Company should be sent to the following address:

J T Thorpe Company Successor Trust
c/o MFR Claims Processing, Inc.
115 Pheasant Run, Suite 212
Newtown, Pa, 18940

Requesting Information:

You may contact MFR Claims Processing, Inc. at the address and phone number listed on the first page of the Claim Form if you have questions. Questions may also be submitted via email to the following address: thorpeinquiries@mfrclaims.com.