PRINT CONTROL PAGE **** BEGINNING ****

Print Date: 20181030

Job Name: CT9A_WC

Report: CT9A1

Cycle: 14937 - 1

Set: 1

Job Code: 0115

Forensic File: G34_1_14937-1-CT9A_WC[CT9A1]-PRINTER[UNKOWN]-JOBID[190098]-POSTSCRIPT_G34_TRIGGER.PDF

Mailing Envelope: G34

N/A

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00001]

JOHN DOE INC
1632 FIRST AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # M 823 899-0
Balance: $1,586.52

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 5/17/2018. We have tried to reach you to settle the current balance due on the policy of $1,586.52. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

We urge you to make payment immediately. You may do this by going to NYSIF.com or by mailing a check to the below address. If mailing your payment, please be sure to include your policy number on the check.

NYSIF Workers' Compensation
PO Box 5238
New York, NY 10008-5238

Additionally, you are ineligible to apply for new coverage with the State Insurance Fund while this or any past due balance remains outstanding.

If you have any questions, please contact the Credit & Collections Department at (212) 312-7500. Thank you for your cooperation.

New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00002]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # K 936 169-2
Balance: $480.45

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 4/18/2018. We have tried to reach you to settle the current balance due on the policy of $480.45. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00003]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # H 1472 015-5
Balance: $12,198.48

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 5/17/2018. We have tried to reach you to settle the current balance due on the policy of $12,198.48. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00004]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # W 2209 517-8
Balance: $149.84

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 6/16/2018. We have tried to reach you to settle the current balance due on the policy of $149.84. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151477][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00004]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00005]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # Q 2327 142-2
Balance: $696.99

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 6/16/2018. We have tried to reach you to settle the current balance due on the policy of $696.99. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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PO Box 5238
New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151478][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00005]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00006]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # Q 2375 130-8
Balance: $18,518.27

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 12/19/2017. We have tried to reach you to settle the current balance due on the policy of $18,518.27. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151479][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00006]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00007]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # R 2396 940-5
Balance: $1,391.91

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 4/18/2018. We have tried to reach you to settle the current balance due on the policy of $1,391.91. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151480][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00007]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00008]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # M 2401 201-5
Balance: $6,904.54

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 4/18/2018. We have tried to reach you to settle the current balance due on the policy of $6,904.54. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00009]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # S 2409 926-9
Balance: $521.81

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 3/21/2018. We have tried to reach you to settle the current balance due on the policy of $521.81. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

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NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00010]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # K 2412 062-8
Balance: $704.81

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 4/18/2018. We have tried to reach you to settle the current balance due on the policy of $704.81. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151483][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00010]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00011]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # I 2414 323-2
Balance: $2,574.51

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 5/17/2018. We have tried to reach you to settle the current balance due on the policy of $2,574.51. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00012]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # Q 2414 476-8
Balance: $171.69

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 4/18/2018. We have tried to reach you to settle the current balance due on the policy of $171.69. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151485][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00012]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00013]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # I 2425 068-0
Balance: $4,003.81

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 5/17/2018. We have tried to reach you to settle the current balance due on the policy of $4,003.81. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York, NY 10008-5238

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New York State Insurance Fund
Credit & Collections Department

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00014]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # A 2429 268-2
Balance: $715.07

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 3/26/2018. We have tried to reach you to settle the current balance due on the policy of $715.07. To date, you have not responded to our attempts to collect this debt.

If payment is not received within ten days of this letter we will forward your account to a collection agency. If this occurs, collection fees equal to 22% of your outstanding balance plus interest may be added to your balance. You will be responsible for these fees in addition to the current balance.

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New York State Insurance Fund
Credit & Collections Department

CT9AV1

[0000000000000611151487][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00014]

NYSIF ***New York State Insurance Fund***

[0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00015]

JOHN DOE INC
123 MAIN AVE #232
NEW YORK NY 10028

August 2, 2018

WC Pol # Q 2437 751-7
Balance: $2,048.68

Dear Policyholder,

Your Workers' Compensation policy with NYSIF was cancelled on 5/17/2018. We have tried to reach you to settle the current balance due on the policy of $2,048.68. To date, you have not responded to our attempts to collect this debt.

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New York State Insurance Fund
Credit & Collections Department

[0000000000000061151488][0001-##########][##M][14937-01][CT9A_WC#-CT9A1#][01-00015]

PRINT CONTROL PAGE **** ENDING ****

Print Date: 20181030

Job Name: CT9A_WC

Report: CT9A1

Cycle: 14937 - 1

Set: 1

Number of Envelopes: 15

Number of Images: 33

Page Count: 17

Job Code: 0115

Forensic File: G34_1_14937-1-CT9A_WC[CT9A1]-PRINTER[UNKOWN]-JOBID[190098]-POSTSCRIPT_G34_TRIGGER.PDF

Mailing Envelope: G34

CT9A QTY = 15