



CLAIM FORM
21st CENTURY INSURANCE COMPANY
CLASS ACTION SETTLEMENT

FOR OFFICE USE ONLY

If you were insured by 21st Century Insurance Company for personal automobile insurance at any time during the Class Period (October 1, 1997 to October 31, 2005), you may be eligible for a payment in this settlement.

Please print (or type) clearly in blue or black ink. This Claim Form must be mailed and postmarked by **March 31, 2011**. Remember to include all requested information that you have available. If you have any questions, please call the class administrator Rust Consulting, Inc. at 1-877-315-1047, or visit the MacKay Class Action website at www.mackayclassactionsettlement.com.

1. CLASS MEMBER INFORMATION.



<<NAME1>>
 <<NAME2>>
 <<NAME3>>
 <<ADDR1>>
 <<ADDR2>>
 <<CITY STATE ZIP>>

If the pre-printed information to the left is not correct or if there is no pre-printed information, please check the box and complete the information below:

Name 1: _____

Name 2: _____

Address: _____

City: _____

State: ____ Zip Code: _____

Policy Number: (if known) _____ Daytime Phone Number: (____) _____ - _____

Name of first person listed on the policy, if not you: (if known) _____

Relationship to first person listed on the policy, if not you: (if known) _____

Are you currently insured by 21st Century Insurance Company for personal automobile insurance? Yes No

2. SIGN AND DATE YOUR CLAIM FORM.

I certify that I was insured by 21st Century Insurance Company for personal automobile insurance at some point during the period October 1, 1997 to October 31, 2005, and that all of the information on this Claim Form is true and correct to the best of my knowledge.

___/___/_____
 Month/Day/Year

 Signature

 Print Name

3. MAIL YOUR CLAIM FORM.

Claim Forms must be postmarked by **March 31, 2011** and mailed to:

MacKay Class Action Settlement
 Rust Consulting, Inc.
 P.O. Box 2403
 Faribault, MN 55021-9103

