

# REQUEST FOR EXCLUSION (OPT-OUT) FORM

STATE OF MICHIGAN  
22ND CIRCUIT COURT FOR THE COUNTY OF WASHTENAW

*Ubillus v. Progressive Marathon Ins. Co.*  
Case No. 2019-741-CK

IF YOU WANT TO BE INCLUDED IN THIS CLASS ACTION LAWSUIT,  
DO NOT FILL OUT THIS FORM.

IF YOU DO NOT WANT TO BE INCLUDED IN THE CLASS ACTION LAWSUIT,  
YOU MUST PROVIDE A DOCUMENT REQUESTING EXCLUSION WITH  
THE CASE NAME, DATE, YOUR SIGNATURE, YOUR PRINTED NAME, AND  
COMPLETE ADDRESS AND MAIL IT TO THE ADDRESS BELOW,  
POSTMARKED NOT LATER THAN MAY 15, 2023. IT MUST BE MAILED TO:

Ubillus Perry Total Loss Class Action  
A.B. DATA, LTD.  
P.O. BOX 173001  
MILWAUKEE, WI 53217

You are not required to use this form as long as you provide a document with the Case Name, Date, Your Signature, Printed Name, Mailing Address, and Statement Requesting to be Excluded from the Class Action.

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I declare as follows:

I was insured by Progressive Marathon Insurance Co. and I have received and reviewed the Notice of Class Action in *Ubillus v. Progressive Marathon Ins. Co.* and I wish to be **excluded** from the Class and **not** participate in the class action lawsuit.

Date (REQUIRED): \_\_\_\_\_

\_\_\_\_\_  
Signature (REQUIRED)

\_\_\_\_\_  
Typed or Printed Name (REQUIRED)

\_\_\_\_\_  
Address (REQUIRED)

\_\_\_\_\_  
City, State, Zip Code (REQUIRED)