CLAIM FORM

Ferrill v. Village of Villa Park
Court No. 19-cv-6809 (N.D. Ill.)

Please fill out the information below completely and legibly. If the information you provide is incomplete, illegible, inaccurate, or not supported by the Village's records, your claim may be rejected in whole or in part.

NAME:																									
ADDRESS:																									
CITY, STATE, ZIP:																									
TELEPHONE NUMBER:																									

Signature: _____ **Signed on**: _____, 2020
(Insert Date)

LICENSE PLATE NUMBER:																

Mail this Claim Form to the following address:

First Class, Inc./ J14365-Ferrill,
5410 W. Roosevelt Rd., Ste. 222
Chicago, IL 60644-1490

YOUR CLAIM FORM MUST BE POSTMARKED OR OTHERWISE DELIVERED ON OR BEFORE AUGUST 2, 2020