

CAUSE NO. D-1-GN-25-007344

THE TEXAS DEPARTMENT  
OF INSURANCE,  
Plaintiff

v.

NEW CENTURY INSURANCE COMPANY  
Defendant

IN THE DISTRICT COURT OF

TRAVIS COUNTY, TEXAS

126<sup>TH</sup> JUDICIAL DISTRICT

**NOTICE OF SUBMISSION OF THE APPLICATION SET CLAIM FILING DEADLINE  
AND APPROVE NOTICES**

In accordance with the Order of Reference to Master ("Order of Reference") entered in this cause, the Application to Set Claim Filing Deadline and Approve Notices is set for submission before the Special Master, Tom Collins, ("Master") on Monday, January 26, 2026. Pursuant to TEX. INS. CODE § 443.007 (e) and TEX. R. CIV. P. 171, the Order of Reference has established the following rules:

1. The Master may consider the Application by written submission or oral hearing.
2. If no objection is filed in compliance with the Order of Reference, the Master may consider the Application without a hearing, and the Court may enter the order recommended by the Master upon its submission to the Court. A party waives any right to object to the recommendation of the Master if the party does not file an objection in compliance with the Order of Reference.
3. Any objection must be filed with the Travis County District Clerk at least three (3) calendar days before the Submission Date in the above referenced case.
4. A copy of any objection must be sent by email to the following:
  - (a) The Master's Docket Clerk at [SpecialMasterClerk@tdi.texas.gov](mailto:SpecialMasterClerk@tdi.texas.gov).
  - (b) All parties listed on the Certificate of Service attached to the Application.
  - (c) The Applicant's counsel at [Robert@wnrlaw.com](mailto:Robert@wnrlaw.com).
5. Any objection must specifically set out the reasons for the objection, with supporting references to and discussion of statutory and case authorities. Reasons not stated in writing will not be considered orally by the Master.
6. An objecting party must expeditiously coordinate with the Applicant's counsel and with the Master's docket clerk at (512) 676-6915 to request a hearing, unless the Master determines that

a hearing is not necessary. If a hearing is granted, the objecting party must send a Notice of Oral Hearing to the Applicant's counsel and all parties listed on the Certificate of Service.

7. Any Acknowledgment of Notice and Waiver by a party in interest should be filed with the Court at least three (3) calendar days before the submission or hearing date.

Original Signed By

Counsel for Applicant

CAUSE NO. D-1-GN-25-007344

THE TEXAS DEPARTMENT OF INSURANCE, Plaintiff	§ § § § § § § §	IN THE DISTRICT COURT OF TRAVIS COUNTY, TEXAS
v.	§ § § § §	
NEW CENTURY INSURANCE COMPANY Defendant	§ §	126 <sup>TH</sup> JUDICIAL DISTRICT

**APPLICATION TO SET CLAIM FILING DEADLINE AND APPROVE NOTICES  
TO THE HONORABLE JUDGE OF THIS COURT:**

FitzGibbons & Company, Inc., Special Deputy Receiver of New Century Insurance Company (Special Deputy Receiver and New Century, respectively), files this Application to Set Claim Filing Deadline and Approve Notices (Application), and in support respectfully shows the Court the following:

**I. INTRODUCTION**

1.1 The Special Deputy Receiver requests the Court approve the deadline to file Claims, the notices to creditors, and the requirements for filing a proof of claim (POC)

**II. BACKGROUND AND AUTHORITY**

2.1 On September 3, 2025, this Court entered its Agreed *Order Appointing Liquidator, Permanent Injunction and Notice of Automatic Stay* (Liquidation Order) placing New Century into liquidation.

2.2 Pursuant to Tex. Ins. Code § 443.102(a) and Tex. Ins. Code § 443.154(a), the Special Deputy Receiver has all the powers of the Liquidator respectively, unless specifically limited by the Liquidator (the Texas Insurance Code shall be referred to as the Code). The Special

Deputy Receiver is authorized to file this Application pursuant to Sections 443.155, 443.251, and 443.252 of the Code.

2.3 The subject matter of this Application has been referred to the master appointed by this Court in this proceeding (Master) in accordance with Paragraph III (5) of the *Order of Reference to Master* (Order of Reference) entered on October 3, 2025.

### **III. CLAIMS FILING DEADLINE**

3.1 Section 443.251(a) of the Code provides requirements for filing of POCs. Except as otherwise permitted in that section, a POC must be filed on or before the deadline to file claims (Claim Filing Deadline), which may be no later than eighteen (18) months after the date of the Liquidation Order unless extended by this Court. The Special Deputy Receiver requests that this Court set a Claim Filing Deadline of 11:59 p.m. CST, on March 3, 2027.

### **IV. NOTICE OF LIQUIDATION**

4.1 Unless this Court directs otherwise, Section 443.155(a) of the Code requires that the notice of liquidation be given by first class mail or electronically to the following at the last known address shown by New Century's records:

- a. The guaranty associations obligated to pay claims under New Century's policies (Affected Guaranty Funds) (the Texas Property and Casualty Insurance Guaranty Association (TPCIGA) is the only Affected Guaranty Fund) and any national association of guaranty associations;
- b. New Century's agents, brokers, or producers of record with current appointments or licenses; and
- c. All persons or entities known or reasonably expected to have claims against New Century, and state and federal agencies with an interest in the proceeding.

4.2 Section 443.155(b) of the Code states that the notice must contain or provide directions for obtaining the information specified in that section, including the Claim Filing Deadline and the filing requirements. Notice must also be given in a newspaper of general circulation in the county of New Century's principal place of business, and other locations as the Liquidator deems appropriate.

4.3 The Special Deputy Receiver provided notice of the Liquidation Order to the Affected Guaranty Funds and the National Conference of Insurance Guaranty Funds (NCIGF). Notice of liquidation and the cancellation of policies was sent to New Century's existing policyholders and agents, which included directions on obtaining further information regarding the matters specified in Section 443.155(b) of the Code.

4.4 The Special Deputy Receiver has identified parties who have or are reasonably expected to have claims against New Century (Potential Claimants). The Special Deputy Receiver proposes to give notice to the Potential Claimants listed below as reflected by New Century's records:

- a. Persons with pending claims covered by a New Century policy (including unearned premium claims), and attorneys representing such persons.
- b. Policyholders insured by New Century at any time from January 1, 2021 until the cancellation of New Century's policies.
- c. Attorneys representing parties in the lawsuit in which New Century is a party, or is defending a person insured by New Century.
- d. Vendors and other service providers that have unpaid invoices.
- e. New Century's affiliated companies.
- f. All financial institutions that held New Century's accounts.

- g. All reinsurers of New Century.
- h. The U.S. Department of Justice, the U.S. Department of Treasury through the Internal Revenue Service, and the Department of Health and Human Services through the Centers for Medicare & Medicaid Services.
- i. Any state or local governmental entities that may have claims against New Century.

4.5 As provided by Section 443.155(a) of the Code, notice will be sent to the Potential Claimants by first class mail or by e-mail at the last known mailing or email address as shown by New Century's records, unless the claimant provides a different address in writing. Section 443.155(d) of the Code requires claimants to inform the Liquidator of any changes of address. The Special Deputy Receiver's certification that notice was deposited in the United States mail postage prepaid, or electronically transmitted, constitutes *prima facie* evidence of mailing and receipt.

4.6 Under Section 443.155(d) of the Code, the Liquidator has no duty to locate a claimant if no address is found in the insurer's records, or if mail sent to the last known address is returned. In these circumstances, the notice by publication described below is sufficient.

4.7 In accordance with Section 443.155(a), the Special Deputy Receiver will publish a notice of liquidation and the Claim Filing Deadline at least once in newspapers of general circulation in the county of New Century's principal place of business, and in Houston and San Antonio. The proposed publication notice is attached as Exhibit A-1. The Special Deputy Receiver requests that this Court approve the publication notice in a form substantially similar to Exhibit A-1.

4.8 The Special Deputy Receiver proposes to provide notice by mailing a postcard substantially similar to Exhibit A-2 (Postcard Notice) by first class mail as described above, or by sending Exhibit A-2 by email if an email address is available. The Postcard Notice provides

directions for obtaining the information required by Section 443.155(b) of the Code, including a POC form that may be downloaded. The Postcard Notice has instructions for requesting a POC form if a person does not have internet access. The Special Deputy Receiver requests the Court to approve the Postcard Notice in Exhibit A-2, or a form that is substantially similar.

4.9 The Special Deputy Receiver will post all notices, claim filing information, POC forms and other relevant information on its website at <https://www.newcenturyliquidation.com/>. The Special Deputy Receiver will also request that TPCIGA as the Affected Guaranty Fund post the POC filing information on their web sites.

## **V. PROOF OF CLAIM REQUIREMENTS**

5.1 Section 443.252 of the Code requires that a POC be in a form approved by the Liquidator. The proposed POC form is attached as Exhibit A-3. The Special Deputy Receiver requests that this Court find that Exhibit A-3 or a form that is substantially similar complies with Section 443.252.

5.2 Section 443.256(h) of the Code provides that a person who files a POC asserting a third party claim against a New Century policyholder is deemed to waive and release the claim against the policyholder up to the amount of the New Century policy. The POC form includes a statement informing the claimant of the waiver and release as required by Section 443.256(h)(4).

5.3 Section 443.253(k) of the Code provides that “the liquidator is not required to process claims for any class until it appears reasonably likely that property will be available for a distribution to that class. If there are insufficient assets to justify processing all claims for any class listed in Section 443.301, the liquidator shall report the facts to the receivership court and make such recommendations as may be appropriate for handling the remainder of the claims.” The Special Deputy Receiver anticipates a number of claims will be Class 5 claims. It appears to the

Special Deputy Receiver that there will not be assets available for a distribution to this class. Therefore, the Special Deputy Receiver shall send a classification letter to any Class 5 claimant, and then not process that claim further unless assets exist that may support a Class 5 distribution. This will be reflected in the POC instructions.

5.4 The proof of claim notice contains an exception as to certain post-receivership claims.

## **VI. NOTICE OF CLAIMS DETERMINATION**

6.1 Section 443.253(b) of the Code provides that the Special Deputy Receiver shall provide written notice of its claim determination to a claimant or the claimant's attorney by any means authorized by Section 443.007 of the Code. The notice may be sent by first class mail postage paid, electronic mail, or facsimile at the Liquidator's discretion. The POC form attached as Exhibit A-3 will request the claimant's email address, if available. The Special Deputy Receiver will send notice of the claim determination by email if the claimant provides an email address, or by first class mail postage paid otherwise.

6.2 Section 443.253(h) of the Code states that the Liquidator shall disallow claims for *de minimis* amounts as determined by this Court. The notice of the classification of the POC (and determination of the POC, if applicable) will advise the claimant that there will be no further notifications if the amount payable on the POC is *de minimis*. The Special Deputy Receiver proposes that the *de minimis* amount for distributions be set at or below \$25.00.

## **VII. NOTICE AND HEARING**

7.1 This Application will be set for submission on this Court's submission docket. The Special Deputy Receiver provided notice of the hearing on the Application to all persons entitled to notice in accordance with Section 443.007 of the Code and the Order of Reference. The Special

Deputy Receiver also noticed all known “parties in interest” as defined by Section 443.004(a)(17) of the Code as shown on the certificate of service, and to others the Special Deputy Receiver has determined should be noticed.

### **VIII. OFFER OF PROOF**

8.1 This Application is supported by the affidavit of Michael J. FitzGibbons attached as Exhibit A. The Special Deputy Receiver requests that Exhibit A be accepted into evidence in support of this Application.

### **IX. PRAYER**

WHEREFORE, PREMISES CONSIDERED, the Special Deputy Receiver respectfully requests that this Court enter an Order:

1. Accepting Exhibit A and the exhibits to Exhibit A into evidence;
2. Approving this Application;
3. Approving the forms of the notices described in the Application;
4. Requiring that POCs be postmarked or otherwise delivered to the address on the POC form by 11:59 p.m. CST, on March 3, 2027;
5. Authorizing the Special Deputy Receiver to provide the determination of POCs by email, when possible, or by first class mail postage paid;
6. Finding that the notice of the Application complies with Section 443.007 of the Code and the Order of Reference;
7. Authorizing the Special Deputy Receiver to execute any documents and incur any expenses as necessary to effectuate the purposes of this Application;
8. Setting a de minimus amount; and

9. Granting such other and further relief to which the Special Deputy Receiver is entitled, in law or in equity.

Respectfully submitted,

WISENER NUNNALLY HIGGINS, L.L.P

Original Signed By

By: \_\_\_\_\_  
Robert H. Nunnally, Jr.  
State Bar No. 15141600  
245 Cedar Sage Drive, Suite 240  
Garland, Texas 75040  
Email [Robert@wnrlaw.com](mailto:Robert@wnrlaw.com)  
Tel. (972)530-2200  
Fax. (972)530-7200  
Attorneys for the Special Deputy Receiver

**EXHIBIT A: AFFIDAVIT OF MICHAEL J. FITZGIBBONS**

STATE OF ARIZONA

COUNTY OF MARICOPA

Came before me, a notary public, Michael J. FitzGibbons, who, being duly identified to me and duly sworn, did upon his oath attest as follows:

1. I am Michael J. FitzGibbons. I am over the age of eighteen years. I am competent to be a witness. I have personal knowledge of the facts to which I attest. I acquired my personal knowledge in my role as President of FitzGibbons & Company, Inc. Special Deputy Receiver of New Century Insurance Company in receivership ("New Century").
2. I have read the Application to Set Claim Filing Deadline and Approve Notices ("Application"). I certify that the facts in the Application are true and correct based on my personal knowledge, my review of estate records, and my consultation with staff and subcontractors.
3. I believe that the proposed notices, proof of claim forms, and proof of claim process are in the best interests of the New Century estate, its policyholders, and creditors.
4. Attached as Exhibits A-1, A-2, and A-3, respectively, and incorporated herein by reference for all purposes are the publication notice, postcard notice, and proof of claim form

**Original Signed By**

---

Michael J. FitzGibbons

Subscribed and sworn to before me, a notary public, on this 23<sup>rd</sup> day of December, 2025, by  
Michael J. FitzGibbons

**Original Signed By**



**SARAH E. ALEXANDER**  
Notary Public - Arizona  
Maricopa Co. / #633463  
Expires 09/15/2026

Notary Public

Exhibit A-1:

**New Century Insurance Company, in Receivership**

**NOTICE OF LIQUIDATION AND  
CLAIMS FILING DEADLINE**

The 126th District Court of Travis County, Texas ordered the liquidation of New Century Insurance Company (New Century) on September 3, 2025. The court also ordered the cancelation of all in-force New Century insurance policies effective October 3, 2025. You can obtain information about New Century's liquidation, a proof of claim form and instructions for filing a proof of claim at <https://newcenturyliquidation.com>

All proofs of claim must be postmarked or received by the claims filing deadline of March 3, 2027, at 11:59 p.m. CST.

**Claims must be filed on an approved Proof of Claim form and be postmarked or received on or before March 3, 2027, at 11:59 p.m. CST.**

## Exhibit A-2

**New Century Insurance Company, in Receivership**  
**NOTICE OF LIQUIDATION AND CLAIMS FILING DEADLINE**

The 126th District Court of Travis County, Texas ordered the liquidation of New Century Insurance Company (New Century) on September 3, 2025. The court also ordered the cancellation of all in-force New Century insurance policies effective October 3, 2025. New Century's records indicate you may have been a New Century policyholder, claimant or creditor and may have a claim against New Century. You can obtain information about New Century's liquidation at <https://newcenturyliquidation.com>. The information available on this website explains your legal rights in New Century's liquidation, including answers to Frequently Asked Questions. The website also includes the proof of claim form and instructions explaining the process for filing a proof of claim. The court set a deadline of March 3, 2027 at 11:59 p.m. CST to file a proof of claim.

If you need a proof of claim form mailed to you, you may request one by mailing this postcard in an envelope to the return address on the front of this Notice with your request for the form. Please provide your correct mailing address with your request. Follow the instructions provided with the proof of claim form to properly file your claim. Claims must be filed on an approved Proof of Claim form and be postmarked or received on or before March 3, 2027, 11:59 p.m. CST.

Para revisar este aviso en español, visite [www.newcenturyliquidation.com/](http://www.newcenturyliquidation.com/)

# Exhibit A-3

## PROOF OF CLAIM

### NEW CENTURY INSURANCE COMPANY (NEW CENTURY) IN LIQUIDATION

ALL CLAIMS MUST BE POSTMARKED OR RECEIVED BY THE CLAIM FILING DEADLINE OF 11:59 p.m. CST, MARCH 3, 2027.

READ CAREFULLY BEFORE COMPLETING. SEE INSTRUCTIONS ON BACK.

<b>FOR OFFICE USE ONLY:</b>		
Date Postmarked:	Interested Party Name:	
Date Received:	Address:	
Proof of Claim No:	ID#:	Policy#:
Liquidator Allowed Amount:	Liquidator Denied Amount:	Court Allowed Amount:
<b>CLAIMANT INFORMATION</b>		<b>Claimant Please Complete – Print (black ink) or Type</b>
Claimant Name:	New Century policy #:	
Address: (Include City, State & Zip Code)	Policy Period dates from: _____ to: _____	
Are you a Medicare or Medicaid beneficiary? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Home Phone:	Name of Insured:	
Work Phone:	Existing Claim No. (if any):	
SSN or TIN:	Date Claim Incurred:	
<b>CLAIM INFORMATION</b>		All supporting documentation must be attached to Proof of Claim in order to be considered.
Claim is for: <b>Policyholder/Insured</b>		<b>Amount of Claim</b>
<input type="checkbox"/> Claim is made for a specific loss or occurrence arising from coverage under a Homeowner's Insurance Policy:		_____
<input type="checkbox"/> Other – Specify Type: _____		_____
<b>All Other Claimants:</b>		
<input type="checkbox"/> Claim is made against policyholder/insured for a specific loss or occurrence arising under coverage of the following type: <input type="checkbox"/> Homeowner's Insurance Policy <input type="checkbox"/> Other – Specify Type: _____		
<input type="checkbox"/> Claim is made by an attorney for unpaid legal fees and costs.		
<input type="checkbox"/> Claim is made by a general creditor for unpaid invoices.		
<input type="checkbox"/> Claim is made by an agent or broker.		
<input type="checkbox"/> All others: state particulars of claim, including consideration given for this claim and attach supporting documentation; including a copy of written instrument which is the foundation of the claim.		
Please provide the exact amount of your claim and each component. Attach supplemental documentation, if available to support your claim.		
<b>TOTAL AMOUNT OF CLAIM</b>		\$ _____
What payments have you received for this claim from New Century? _____		
What collateral or other securities do you hold? _____		
Do you assert any right of priority or other specific right with respect to your claim? _____		
<b>STATUS OF CLAIM</b>		
<input type="checkbox"/> Claim previously reported to New Century, date reported: _____ <input type="checkbox"/> Other Insurance is available to cover this claim.		Name and address of your attorney if any: Name: _____ Company: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Phone: _____ Email: _____
<b>AFFIRMATION OF CLAIMANT</b>		
Unless otherwise stated in this proof of claim: I alone am entitled to file this claim. No others have an interest in this claim. No payments have been made on the claim. No third party is liable on this debt. The sum claimed is justly owing, and there is no setoff, counterclaim or defense to the claim. I declare that all of the statements made in this Proof of Claim and all documents attached to this form are true, complete and correct. If I am making a claim against a person insured by New Century Insurance Company, I understand by filing this claim that I am waiving any right to pursue the personal assets of that person, to the extent of the coverage and limits provided by the policy issued by New Century Insurance Company.		
SIGNATURE: _____		DATE: _____
PRINTED NAME: _____		
<input type="checkbox"/> Check this box if signing as an attorney or personal representative		
See reverse side for mailing and other instructions		

## **PROOF OF CLAIM INSTRUCTIONS** **All Claims**

The Proof of Claim (“POC”) should be completed in its entirety and all questions answered. To be timely filed, the POC must be postmarked and mailed to the address below or received at the address below on or before 11:59 p.m. CST, March 3, 2027. Facsimile and electronic submissions do not satisfy the filing requirements.

Please note certain instructions and requirements are contained in the POC itself. A separate form should be completed for each claim asserted against New Century Insurance Company (New Century). Additional forms may be obtained from the website, [newcenturyliquidation.com](http://newcenturyliquidation.com), or may be requested by mail. For questions that do not apply to your situation, your response should be indicated with an “NA” or “not applicable.”

If your claim is for a loss or other policy benefits, please provide an explanation of the loss or incident. For other types of claims against New Century, provide a brief explanation of the claim, the amount claimed, and documentation supporting the claim. If you do not know the amount of the claim, write “unstated amount.” If you are filing a proof of claim to preserve the protection of your policy without knowing of a specific claim, please write “policyholder protection claim” as well as “unstated amount.”

You must sign the POC form and provide the documentation requested.

Please retain a copy of the completed POC for your records and mail the original completed POC to:

**Claimant Services**  
**New Century Insurance Company in Liquidation**  
8701 E. Vista Bonita Dr., Ste. 200  
Scottsdale, AZ 85255

**THE LAST DAY FOR FILING TIMELY CLAIMS AGAINST NEW CENTURY INSURANCE COMPANY IN LIQUIDATION IS 11:59 p.m. on March 3, 2027.** Claims must be postmarked, not postage meter stamped, or received at the address above no later than 11:59 p.m. CST, March 3, 2027.

Your POC will receive an individual POC number upon our receipt of your completed POC, and we will notify you of that POC number. You will be notified later of the Liquidator’s decision regarding your claim. If your claim is denied in whole or part by the Liquidator, and you dispute the Liquidator’s findings, you will have the opportunity to present your dispute to the Liquidation Court in Travis County, Texas, or a forum designated by the Court.

The Liquidator’s acceptance of the POC is not intended to constitute a waiver or relinquishment by the Liquidator of any defense, set-off or counterclaim which the Liquidator may have against any person, entity or governmental agency.

All claimants are required to keep the Liquidator advised of address changes. If you have a legal representative, all correspondence will be sent to that representative. Inquiries as to the status of your claim should be made in writing. Please include your POC number in all correspondence to permit ease of identification and an expedited response.

New Century’s website ([www.newcenturyliquidation.com](http://www.newcenturyliquidation.com)) is a source for news and information regarding the ongoing liquidation, including additional POC’s and other relevant documents.

## CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing document has been served on all interested parties in accordance with the Texas Rules of Civil Procedure and TEX. INS. CODE ANN. §443.007(d) this 23<sup>rd</sup> day of December, 2025.

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Ms. Sara Lang  
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Via Email: [rstroud@tpciga.org](mailto:rstroud@tpciga.org)  
Via Email: [slang@tpciga.org](mailto:slang@tpciga.org)  
Mr. Tom Collins, Special Master  
Texas Department of Insurance  
333 Guadalupe, Tower III, 5th Fl., MC-305-1D  
Austin, Texas 78701  
E-filing: [specialmasterclerk@tdi.texas.gov](mailto:specialmasterclerk@tdi.texas.gov)  
Via Email: [TomCollinsADR@gmail.com](mailto:TomCollinsADR@gmail.com)

### Original Signed By

By: \_\_\_\_\_  
Robert H. Nunnally, Jr.

## Automated Certificate of eService

This automated certificate of service was created by the efilng system. The filer served this document via email generated by the efilng system on the date and to the persons listed below. The rules governing certificates of service have not changed. Filers must still provide a certificate of service that complies with all applicable rules.

Robert Nunnally, Jr. on behalf of Robert Nunnally, Jr.

Bar No. 15141600

robert@wnrlaw.com

Envelope ID: 109501874

Filing Code Description: No Fee Documents

Filing Description: NOTICE OF SUBMISSION OF THE APPLICATION  
FOR APPROVAL OF FEES AND EXPENSES

Status as of 12/30/2025 7:29 AM CST

### Case Contacts

Name	BarNumber	Email	TimestampSubmitted	Status
Robert HNunnally, Jr.		robert@wnrlaw.com	12/29/2025 3:26:14 PM	SENT
Braedon Jones		Braedon@wnrlaw.com	12/29/2025 3:26:14 PM	SENT
Tom Collins, Special Master		specialmasterclerk@tdi.texas.gov	12/29/2025 3:26:14 PM	SENT

Associated Case Party: TEXAS DEPARTMENT OF INSURANCE

Name	BarNumber	Email	TimestampSubmitted	Status
Quennette Rose		Quennette.Rose@oag.texas.gov	12/29/2025 3:26:14 PM	SENT
Stephen DeVinney		stephen.devinney@oag.texas.gov	12/29/2025 3:26:14 PM	SENT

Associated Case Party: NEW CENTURY INSURANCE COMPANY

Name	BarNumber	Email	TimestampSubmitted	Status
Michael W.Jones		MJones@thompsoncoe.com	12/29/2025 3:26:14 PM	SENT