

Glover
Payment Distribution to Individual Claimants and Mailing Tracker

Count = 0

Exhibit 4

CLAIM #	EMPLOYMENT STATUS	LAST NAME	FIRST NAME	MI	SSN	MAILING ADDRESS	CITY	STATE
		CLAIMANT A						

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ZIP	ADDRESS CHANGE	WORK AREA	WORK DISTRICT	SETTLEMENT SHARE	WAGE AMOUNT	NON-WAGE AMOUNT	DATE NOTICE OF RESOLUTION AND RELEASE MAILED	REMAILED	UNDELIVERABLE
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DATE RELEASE FORM RECEIVED FROM CLAIMANT	RELEASE FORM RECEIVED WITHIN 60 DAYS OF SECOND NOTICE?	RECEIVED UNTIMELY	DATE OBJECTION RECEIVED FROM CLAIMANT	DATE OBJECTION MAILED TO AGENCY AND CLASS COUNSEL
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DATE RELEASE FORMS MAILED TO AGENCY AND CLASS COUNSEL	DUE DATE FOR SETTLEMENT SHARE DISBURSEMENT	DATE SETTLEMENT SHARE CHECK MAILED	DATE NOTICE OF FINAL APPROVAL AND NOTICE OF FINAL ACTION MAILED	START DATE FOR MAILING OF SETTLEMENT SHARE CHECK
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DATE SETTLEMENT SHARE CHECK MAILED	REMAILED	UNDELIVERABLE
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