



P.O. Box 12338 - Reno, NV 89510-2338

TO: Tammy Santorii  
On behalf of Mark Santorii  
5016 Tropical Ridge Ct  
Las Vegas, NV 89130

RE: Claim No: 1018-1-2012-9/1103099  
Insurer: National Interstate  
Employer: True-line  
TPA: Nelson Davison Administrators, Inc  
Date of Injury 4/26/2012  
Date of Notice: 5/24/2012  
Body Part: Fatality

### NOTICE OF CLAIM ACCEPTANCE

(Pursuant to NRS 616C.065)

Dear Ms. Santorii;

Nelson Davison Administrators, Inc. is the Third Party Administrator of workers' compensation for your National interstate on behalf to True Line Corp. We, on behalf of your employer, sincerely regret to hear of your unfortunate loss. The claim for death benefits filed on your behalf has been reviewed and accepted.


Enclosed you will find the statutes concerning your benefits available to you under this claim.

We have recently received your receipts for payment of expenses related Mr. Santorri, please be advised these receipts have been reviewed and payment will be issued under separate cover.

If you disagree with the insurer determination you have the right to request a hearing by completing the enclosed "Request for Hearing" form and filing it with the Department of Administration within seventy (70) days from the date of this letter.

Should you have any questions please do not hesitate to contact our office.

Sincerely,

  
Amber Nelson  
Claims Adjuster

Cc: Natl Interstate, True-line  
Enc: Statutes, Request for hearing form