



On Your Side

- Nationwide Insurance
- Allied Insurance
- Nationwide Agribusiness
- Titan Insurance
- Victoria Insurance

Satisfaction of Repair

I _____ the undersigned, an insured with
 Nationwide Insurance Company or an affiliate or subsidiary, of Nationwide, hereby state and agree that
 repairs completed by Managed Repair Contractor, _____, with regard to
 Claim # _____ as related to damage which occurred on or about
 ____/____/____ are satisfactory.

 Insured's Signature

 Date



Nationwide Insurance
 Allied Insurance
 Nationwide Agribusiness
 Titan Insurance
 Victoria Insurance

On Your Side

Authorization to Pay

I _____ the undersigned, an insured under
 Policy # _____ with Nationwide Insurance
 Company or an affiliate or subsidiary, of Nationwide Insurance Company have reviewed the following
 invoices from Nationwide Managed Repair Contractor, _____, agree with
 the invoiced amounts presented with this authorization and accept the work completed to the date as
 stated below. Payment may be issued directly to Contractor.

List Invoice #/Amounts

| | |
|---------|----------|
| # _____ | \$ _____ |
| # _____ | \$ _____ |
| # _____ | \$ _____ |
| # _____ | \$ _____ |
| # _____ | \$ _____ |

 Insured's Signature

____/____/____
 Date