



STATE OF CALIFORNIA

Department of Financial Protection and Innovation

GOVERNOR Gavin Newsom • COMMISSIONER Clothilde V. Hewlett

GROW ESCROW, INC.
CLAIM FORM

**Return the claim form and supporting documents
to the Conservator on or before December 10, 2024**

Date: _____

Escrow Number, Check Number or
Other Reference Number (please specify): _____

Dollar Amount Claimed (Do not include interest): \$ _____

Name of person(s) or company making claim: _____

Mailing address and telephone number of the person(s) or company making the claim:

Basis for the claim (attach copies of all pertinent documents, such as escrow instructions, closing
statement, copy of check, etc.):

I hereby certify under penalty of perjury under the laws of the state of California that this
information is true and correct.

Date

Print Name Signature

Return this form and supporting documents on or before December 10, 2024, to:
ERVIN COHEN & JESSUP LLP
Blake C. Alsbrook, Conservator for Grow Escrow, Inc.
9401 Wilshire Boulevard, 12th Floor
Beverly Hills, CA 90212