1. Alexander Cordova

Updated at Aug 22, 2025

Submission Date Aug 22, 2025

Todays Date Aug 22, 2025 07:04 PM

Assumed Date of Loss Jul 31, 2025

Policyholder Signiture

Gor Con

Possible Cause of Loss? Water Damage

1st Named Insured Alexander Cordova

Definitions HELPWITHMYPO... DOT COM: The licensed entity represented by its Public Adjuster. A Public Adjuster in the State of New Mexico, dedicated to advocating for your rights and maximizing your claim benefits. You and Related Terms: Refers to the individual or entity holding the insurance policy issued by the Insurer. As the claimant, we retain ultimate control over the claim while you benefit from our professional assistance.Insurer: the company providing the insurance coverage. Understanding your relationship with the Insurer is crucial as it influences how your claims are processed. Public Adjuster: A licensed professional who specializes in managing insurance claims on behalf of policyholders. You are engaging HELPWITHMYPOLICY DOT COM to significantly enhance

your chances of a favorable outcome, as they possess the expertise to navigate complex insurance processes.Insured: You as the insured party under the Policy, entitled to claim benefits for covered losses.Claim: The formal request for payment or benefits under the insurance policy as a result of the damages incurred.Benefits: Any and all insurance proceeds, payouts, or claim settlements arising from

Yes, as the Policyholder, I agree with the definitions above!

the insurance policy related to the Property.Property: The real property located at the insured address which is the subject of the Claim.

Insured Address

Fee to Public Adjuster 10% (ten percent)

Insurance Company Address 2500 Central Ave SW Albuquerque, NM, 87104

Insured Address 1521 20th Ave SE Rio Rancho, NM, 87124

Insurance Company State Farm

This Policyholder Statement Agreement is made between you and HELPWITHMYPOLICY DOT COM LLC and It's Operation's Manager, Public Adjuster, Joseph Xavier Valverde (19552406 NM Residency) for the purpose of facilitating the claims process and ensuring that you receive the maximum benefits from your insurance policy. By signing this Agreement, you allow HELPWITHMYPOLICY DOT COM to act on your behalf, ensuring professional representation throughout the claims process.

I am entering in to an agreement with HELPWITHMYPOLICY DOT COM LLC, (helpwithmypolicy.com).

Claim Number 31-88K9-96B

Policy Number 31BRJ6447