

**EXHIBIT G**



June 29, 2010

DAVID H MARTIN  
NATIONAL PASTIME SPORTS LLC  
150 ELIZABETH  
ROCHESTER MI 48307

Claimant: JOHNSON, DOUG  
Insured: NATIONAL PASTIME SPORTS LLC  
Policy Number: 34271019  
Effective Dates: 05/07/2010 to 09/15/2010  
Claim Number: LXSE-0284A1  
Date of Loss: 6/12/2010

Dear Sir:

York Risk Services Group, Inc ("York") is the claims administrator for New Hampshire Insurance Company with respect to the above referenced policy(s) issued to National Pastime Sports LLC. We acknowledge receipt of notice of the above-referenced claim on June 24, 2010.

Based on our preliminary review of the materials forwarded to us, there is a question concerning whether coverage under the referenced policy(s) exists for the claim. Accordingly, we are going to conduct an investigation of these issues. Our investigation is being undertaken under a reservation of New Hampshire Insurance Company's rights, including the right to decline coverage with respect to the claim.

In accordance with the terms of the policy(s), you are required to cooperate with us during our investigation and handling of this claim. Additionally, according to the policy(s), if you make any payments to the claimant without our consent, those voluntary payments are not covered under the policy(s).

If you have any other insurance policies that you believe may respond to this claim we urge you to immediately notify those insurance carriers of this claim. Please advise us of any other insurance policies and carriers that you place on notice for our files.

York's investigation of this matter should not be construed as a waiver of any rights New Hampshire Insurance Company may have under the policy(s), the law, and in equity, including the right to disclaim coverage in whole or in part for this claim.

We will provide a detailed coverage position upon completion of our investigation and evaluation with regard to this matter.

I will be contacting you shortly relative to our investigation. Please feel free to contact me if you have any questions.

Very truly yours,  
York Risk Services Group, Inc.

*Jeanette Cucolo*

Jeanette Cucolo

Claims Examiner

516-214-9365

E-Mail: [jeanette.cucolo@yorkrsg.com](mailto:jeanette.cucolo@yorkrsg.com)

JC/jc

CC: Lori Nelson  
CSI Insurance Group  
2920 Taylor Street  
Dallas, TX 75226

U.S. Postal Service

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LXSE-0284A1  
 DAVID H MARTIN  
 150 ELIZABETH  
 ROCHESTER MI 48307

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

LXSE-0284A1  
 DAVID H MARTIN  
 150 ELIZABETH  
 ROCHESTER MI 48307

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 Addressee

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 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes  No

LXSE0284A1

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PS Form 3811, February 2004

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- Certified Mail is not insurable.

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- For an additional fee, you may obtain Restricted Delivery (PS Form 3811).

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PS Form 3800, August 2004