

2. PAYMENT ELIGIBILITY INFORMATION AND IDENTITY-THEFT PROTECTION (REQUIRED)

For more information about this Section of the Claim Form and the types of awards available and rules for receiving an award, please review the Notice and Sections 2.1 through 2.4 of the Settlement Agreement (available at www.DavacoDataBreachSettlement.com) .

- A. Settlement Class Members may receive **either** a: (1) **\$185.00** Basic Award (subject to proration); **or** (2) 36 months of Identity-Theft Protection services. Which award are you claiming? (Check only one):

☐ **\$185** Basic Award (complete Sections 5 and 6)

OR

Settlement Class Members may receive 36 months of free identity-theft protection, called “Financial Shield” by Pango (a.k.a. Aura), instead of the Basic Award. If you opted to receive the one year of credit monitoring initially offered by Defendants, “Financial Shield” shall be in addition to that year. If you are claiming the identity-theft protection, check this box:

☐ Identity-Theft Protection (complete Section 7)

- B. Additionally, all Settlement Class Members who incurred Out-of-Pocket expenses fairly traceable to the Security Incident may claim a Reimbursement Award:

☐ Reimbursement Award (complete Sections 3, 4, 6 and 7)

- C. All Settlement Class Members who spent time remedying issues related to the Security Incident may also claim a Time Spent Award up to five (5) hours of time at \$20.00 per hour. Settlement Class Members making such a claim must attest on the Claim Form how much time they spent (up to 5 hours), in half hour increments, and that the time was actually spent remedying issues relating to the Security Incident:

☐ Time Spent Award (complete Sections 5, 6, and 7)

- D. California Subclass Members may **also** receive a **\$175.00** California Subclass Award. If you are a Settlement Class Member, you resided in California on June 11, 2021, and are claiming this award, check this box:

☐ **\$175** California Subclass Award (complete Section 5 and 6)

3. ADDITIONAL INFORMATION REQUIRED ONLY FROM SETTLEMENT CLASS MEMBERS SEEKING A REIMBURSEMENT AWARD.

You must complete this Section 3 if you are seeking a Reimbursement Award. Please provide as much information as possible.

☐ **Required:** I attest under penalty of perjury that I experienced one or more fraudulent charges and/or identified losses from June 11, 2021 through January 12, 2023.

☐ **Required:** Such charges or losses have not been reimbursed.

☐ **Required:** I believe in good faith such charges were more likely than not the result of the Security Incident that affected the DAVACO computer network described in the Class Notice.

The total amount of unreimbursed fraudulent charges that I am claiming is \$_____

Examples: Fraudulent charges that were made on your credit or debit card account and that were not reversed or repaid even though you reported them to your bank or credit card company.

Required: Attach a copy of statements that show the fraudulent charges and any correspondence showing that you reported them as unauthorized. (Please redact all unrelated transactions). If you do not have any written correspondence reporting the charges, describe when and how you reported them and to whom you reported them (attached pages as necessary):

☐ (**Required**). I have made good faith efforts to have these unauthorized charges reversed or repaid, including through my bank or credit card company, and have exhausted all available credit monitoring, identity theft insurance, or other applicable insurance policies, but have not been successful at having the charges reversed, have not received payment, and have no insurance coverage for these unauthorized charges.

If you are seeking reimbursement for Out-of-Pocket Expenses as part of your claim for a Reimbursement Award, complete Section 4. Otherwise, go to Section 6.

4. ADDITIONAL INFORMATION REQUIRED ONLY FROM SETTLEMENT CLASS MEMBERS SEEKING REIMBURSEMENT FOR OUT-OF-POCKET EXPENSES IN CONNECTION WITH A REIMBURSEMENT AWARD.

☐ I attest under penalty of perjury that I am making a claim for a Reimbursement Award, and that I incurred between June 11, 2021 and January 12, 2023 the following Out-of-Pocket Expenses fairly traceable to the Security Incident that affected the DAVACO computer network described in the Notice.

Check all that apply, stating the total amount you are claiming for each category and attaching documentation of the charges as described below. Round total amounts to the nearest dollar.

☐ Unreimbursed payment card fees or bank fees:

Total amount claimed for this category: \$_____

Examples: Unreimbursed card reissuance fees, unreimbursed overdraft fees, unreimbursed charges related to unavailability of funds, unreimbursed late fees, unreimbursed over-limit fees and unreimbursed fees relating to an account being frozen or otherwise unavailable due to the Security Incident.

Required: A copy of a bank or credit card statement or other proof of claimed fees or charges (please redact unrelated transactions).

☐ Cell, internet or text charges:

Total amount claimed for this category: \$_____

Examples: Long distance or cell phone charges (if charged by the minute), or data charges (if charged based on the amount of data used).

Required: A copy of the bill from your telephone company, cell phone company, or internet service provider showing the claimed charges.

☐ Unreimbursed costs or charges for obtaining credit reports, credit freezes, or credit monitoring or identity theft protection services (up to two years of coverage):

Total amount claimed for this category: \$_____

Examples: The cost of purchasing a credit report or placing a credit freeze.

Required: A copy of a receipt of other proof of purchase for each credit report, credit freeze, or credit monitoring or identity theft protection services (up to two years of coverage) purchased or placed.

☐ Postage costs:

Total amount claimed for this category: \$_____

Examples: Postage for correspondence with your bank or credit card company about unauthorized charges. The cost of submitting this form is not included.

Required: A copy of any receipt or proof of purchase for all postage costs claimed showing date, amount and vendor.

5. ADDITIONAL INFORMATION REQUIRED FROM SETTLEMENT CLASS MEMBERS SEEKING A TIME SPENT AWARD

You must complete this Section 5 if you are seeking a Time Spent Award.

☐ **Required:** I attest that I spent _____ hours (up to five (5) in half-hour increments) remedying issues related to the Security Incident.

6. PAYMENT METHOD

Please select the manner in which payment will be issued for your valid Claims.

☐ Check

☐ PayPal (If checked) PayPal e-mail address:_____.

☐ Zelle (If checked) Zelle e-mail address:_____.

☐ Venmo (If checked) Venmo username:_____.

Phone Number/ E-mail associated to Venmo account: _____.

*If you select payment via PayPal, Venmo or Zelle, the email address entered on this form will be used to process the payment to your account linked to that email address. If you do not have a PayPal, Venmo or Zelle account, you will be prompted to open one using the email address entered on this form.

7. CERTIFICATION

The information I have supplied in this Claim Form is true and correct to the best of my recollection and this form was executed on the date set forth below.

I understand that all information provided on this Claim Form is subject to verification and that I may be asked to provide supplemental information by the Claims Administrator before my claim will be considered complete and valid.

Signature: _____

Print Name: _____

Date: _____

Once you've completed all applicable sections, please mail this Claim Form and all required supporting documentation to the address provided below, postmarked by **January 12, 2023**:

Davaco Data Breach Settlement Administrator
1650 Arch Street, Suite 2210
Philadelphia, PA 19103

Alternatively, you can alternatively submit a Claim Form Online at www.DavacoDataBreachSettlement.com by following instructions on the "Submit a Claim" page.