

CLAIM FORM INSTRUCTIONS

<i>Your Claim must be submitted online or mailed and postmarked by:</i> April 14, 2023	<i>Johnson v. Palms Associates, LLC, et al.</i> c/o Settlement Administrator 1650 Arch Street, Suite 2210 Philadelphia, PA 19103 www.ncpalmstenantsclass.com	PLM
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Instructions for Completing the Claim Form

You are eligible to submit a Claim Form if you are a member of the **Collection Letter Class** and want to obtain Monetary Relief – Cash benefits available to Collection Letter Class. **Eviction Fee Class Members** do **NOT** need to file a Claim Form to obtain Monetary Relief – Cash or Debt Relief benefits available to Eviction Fee Class.

For more information about all available benefits, including Monetary Relief – Cash or Monetary Relief – Debt Relief benefits available automatically to certain Eviction Fee Class members that do not require a filing of a Claim Form, please read the Notice available at www.ncpalmstenantsclass.com or contact the Settlement Administrator.

You are a ***Collection Letter Class Member*** if you are a natural person who:

- (1) At any point between October 7, 2016 and June 25, 2018, resided in any of the properties in North Carolina owned and/or managed by the Defendants, **and**
- (2) You received a Collection Letter, which is any letter sent by Defendants between October 7, 2016 and June 25, 2018 that asserts that the individual will either (a) be charged with Eviction Fees upon the filing of a summary ejectment action or (b) that Eviction Fees are owed.

If you are a ***Collection Letter Class Member*** and submit a valid and timely Claim Form, you will be eligible to receive \$20 for each Collection Letter sent by Defendants, up to a maximum of \$60 regardless of the number of letters received, which is subject to pro rata increase or reduction if under or over-subscribed. If you make a claim for benefits, you must swear, under penalty of perjury, to receiving a Collection Letter, and state the month and year of each Collection Letter received. You must provide specific information and dates about any Collection Letters you received to qualify for any award.

You are an ***Eviction Fee Class Member*** if you are a natural person who:

- (1) At any point between October 7, 2016, and June 25, 2018, resided in any of the properties in North Carolina owned and/or managed by the Defendants, **and**
- (2) You were charged and actually paid Eviction Fees.

Eviction Fee Class Members do **NOT** need to file a Claim Form to obtain Monetary Relief – Cash benefits for Eviction Fee Class. They are automatically eligible to receive approximately \$190, subject to pro rata increase or reduction if under or over-subscribed.

If you are a member of the ***Eviction Fee Class***, you **may** also be a member of the ***Collection Letter Class*** if you meet the requirements of both Classes and may claim Collection Letter benefits, as explained above. You **must** submit a Claim Form if you want to obtain Monetary Relief – Cash benefits available to Collection Letter Class in addition to Monetary Relief – Cash benefits available to Eviction Fee Class for which you are eligible automatically.

If you submit a valid and timely Claim Form, the amount you actually receive may be significantly reduced depending on how many valid claims are ultimately submitted by other Class Members. The available Monetary Relief—Cash will be distributed on a proportional basis once the Settlement becomes final. The exact amount of compensation will be determined after administrative expenses, service award(s), and attorneys' fees and costs are deducted.

Please note that none of these benefits will be distributed or available until the Settlement is finally approved by the Court.

Please submit only one (1) Claim Form per person.

Your completed Claim Form must be submitted online at www.ncpalmstenantsclass.com on or before **April 14, 2023** or postmarked no later than **April 14, 2023** and mailed to:

Johnson v. Palms Associates, LLC, et al.
c/o Settlement Administrator
1650 Arch Street, Suite 2210
Philadelphia, PA 19103

ALL CLAIMS ARE SUBJECT TO VERIFICATION.

PLEASE KEEP A COPY OF YOUR COMPLETED CLAIM FORM FOR YOUR RECORDS.

CLAIM FORM

*Your Claim must be submitted
online or mailed and
postmarked by:*

April 14, 2023

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c/o Settlement Administrator
1650 Arch Street, Suite 2210
Philadelphia, PA 19103
www.ncpalmstenantsclass.com

PLM

SECTION A: NAME AND CONTACT INFORMATION

Provide your name and contact information below. It is your responsibility to notify the Settlement Administrator of any changes to your contact information after the submission of your Claim Form.

First Name

Last Name

Street Address (Mailing Address)

City

State

Zip Code

Email Address

Phone Number

SECTION B: COLLECTION LETTER INFORMATION (applicable only for Collection Letter Class Members)

By submitting this Claim Form, I certify under penalty of perjury that I am a member of the Class and received one or more Collection Letters from the Defendants between October 7, 2016 and June 25, 2018.

- A. Please list the total number of Collection Letters received from Palms Associates, LLC and Durham Mews, LLC f/k/a Durham Section I Associates between October 7, 2016 and June 25, 2018:

- B. Please provide the months and years when you received Collection Letters from Palms Associates, LLC and Durham Mews, LLC f/k/a Durham Section I Associates:

SECTION C: SETTLEMENT COMPENSATION SELECTION

If your Claim is deemed eligible for payment, select the method by which you would like to receive your settlement benefit.

Select only one:

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Check via mail

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Direct credit to my PayPal account – *Provide the email address associated with your PayPal account below.*

Email Address for PayPal option. Please write clearly and legibly.

SECTION D: CLASS MEMBER VERIFICATION: (please check the box below)

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I certify under penalty of perjury pursuant to 28 U.S.C. § 1746 that the information provided in this Claim Form is true and correct to the best of my knowledge, information and belief. I understand the Settlement Administrator may contact me to request further verification of the information provided in this Claim Form.

Name: _____

Date: _____