

**Claim Forms
must be submitted
online or
postmarked by:
September 28,
2026**

Matthew Lane and Zachary Knapp v. Albion College
Case No. 25-1301-NZ
Circuit Court for the County of Calhoun, State of Michigan
CLAIM FORM

ALB-CLAIM

GENERAL INSTRUCTIONS

Settlement Class Members can submit a Claim Form online at www.AlbionDataSettlement.com or by completing this Claim Form and mailing it to the Settlement Administrator, so it is postmarked no later than **September 28, 2026**. You are a Settlement Class Member if you meet the Settlement Class definition and have not opted out of this Settlement.

The **Settlement Class** includes all individuals who had Private Information impacted by the unauthorized access to or acquisition Private Information that occurred on Albion College's systems on or around December 17, 2024 (the "Data Incident"). This includes all individuals who were sent a notice of the Data Incident.

SETTLEMENT BENEFITS

Settlement Class Members are eligible to receive Credit Monitoring Services and one of two Cash Payment options. The aggregate cap on monetary benefits payable for Cash Payments is \$300,000. If the total value of Valid Claims for Cash Payments exceeds \$300,000, Cash Payments shall be reduced on a *pro rata* basis.

CREDIT MONITORING SERVICES

Includes three (3) years of one-bureau credit monitoring, \$1 million in identity theft protection insurance, CyberScan dark web monitoring, identity restoration services and lost wallet assistance.

CASH PAYMENT OPTION #1 (includes Cash Payment A and/or Cash Payment B benefits)

Cash Payment A - Ordinary Losses: Up to \$300.00 for ordinary documented losses for fraud and identity theft related to the Data Incident. Supporting documentation must be submitted. Losses that have previously been reimbursed are not eligible for payment under the Settlement.

Examples of ordinary documented losses include, but are not limited to:

- Unreimbursed costs, expenses, losses or charges incurred as a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of a Settlement Class Member's Private Information.
- Unreimbursed costs incurred on or after May 1, 2025, associated with accessing or freezing/unfreezing credit reports with any credit reporting agency.
- Other unreimbursed miscellaneous expenses incurred related to any ordinary documented loss such as notary, fax, postage, copying, mileage, and long-distance telephone charges.
- Other mitigative costs fairly traceable to the Data Incident that were incurred on or after December 17, 2024, through the present.

Cash Payment B - Extraordinary Losses: Up to \$3,000.00 upon presentment of extraordinary documented losses related to the Data Incident if: (1) the loss is an actual, documented and unreimbursed monetary loss stemming from fraud, identity theft, or misuse arising out of or relating to the Data Incident; (2) the loss is fairly traceable to the Data Incident; (3) the loss occurred between December 17, 2024 and September 28, 2026; (4) the loss is not already covered by Cash Payment A; and (5) the Settlement Class Member made reasonable efforts to avoid, or seek reimbursement for, the loss, including but not limited to exhaustion of all available credit monitoring insurance and identity theft insurance.

Documentation Requirement: Claims for **Extraordinary Losses** and **Ordinary Losses** must be submitted with documentation supporting the unreimbursed losses claimed. This can include receipts or other documentation that reflects the unreimbursed losses claimed and/or costs incurred. "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support other submitted documentation.

CASH PAYMENT OPTION #2 (includes the Alternative Cash Payment)

Cash Payment C - Alternative Cash Payment: Settlement Class Members may elect to receive a cash payment in the amount of \$50.00 per person in lieu of claims for Ordinary or Extraordinary Losses.

QUESTIONS? VISIT WWW.ALBIONDATASETTLEMENT.COM OR CALL TOLL-FREE 1-866-964-4299

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I. NAME AND CONTACT INFORMATION

Please provide your name and contact information below. It is your responsibility to notify the Settlement Administrator if you contact information changes after you submit your Claim Form.

First Name

Last Name

Street Address

City

State

Zip Code

Email Address

Phone Number

Notice ID

II. CREDIT MONITORING SERVICES

☐ Check this box to receive Credit Monitoring. Enrollment instructions will be sent to your email address (that you provide in Section I above) after the Settlement is approved and becomes final (the "Effective Date").

TO CLAIM ORDINARY AND/OR EXTRAORDINARY LOSSES, PROCEED TO SECTIONS III AND IV
TO CLAIM THE ALTERNATIVE CASH PAYMENT, PROCEED TO SECTION V

III. CASH PAYMENT A - ORDINARY LOSSES

☐ Check this box if you are seeking reimbursement for Ordinary Losses up to \$300.00.

You must submit reasonable documentation demonstrating the actual, unreimbursed expenses you are seeking reimbursement. Complete the chart below describing the supporting documentation you are submitting and the reimbursement amount that is supported by that documentation.

Examples of reasonable documentation include telephone records, fees for credit repair services, costs associated with freezing or unfreezing credit, and miscellaneous expenses such as notary, fax, postage, copying, mileage, and long-distance telephone charges.

Description of Documentation Provided	Amount
Total Documented Ordinary Losses Claimed:	

Mail your completed Claim Form & Documentation to:
ALBION COLLEGE DATA INCIDENT SETTLEMENT, 1650 ARCH STREET, SUITE 2210,
PHILADELPHIA, PA 19103

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IV. CASH PAYMENT B - EXTRAORDINARY LOSSES

☐ Check this box if you are seeking reimbursement for Extraordinary Losses up to \$3,000.00.

You must submit supporting documentation demonstrating the actual, unreimbursed expenses you are seeking reimbursement. Complete the chart below describing the supporting documentation you are submitting and the reimbursement amount that is supported by that documentation.

Description of Documentation Provided	Amount
Total Documented Extraordinary Losses Claimed:	

V. CASH PAYMENT C - ALTERNATIVE CASH PAYMENT

☐ Check this box to claim the Alternative Cash Payment in the amount of \$50.00 instead of claiming for Ordinary Losses and/or Extraordinary Losses. If you select this benefit, you can still claim Credit Monitoring Services.

VI. PAYMENT SELECTION

Please select a payment method: ☐ PayPal ☐ Venmo ☐ Zelle ☐ Check*

Please provide the email address or mobile number associated with your PayPal, Venmo or Zelle account:

*Payment via check will be mailed to the address provided in Section I above.

VII. AFFIRMATION & SIGNATURE

By signing below and submitting this Claim Form, I swear and affirm under penalty of perjury that: (a) I am a Settlement Class Member and that I have not opted out of the Settlement; (b) the information provided in this Claim Form and any documentation submitted* in support of my claim are true and correct to the best my knowledge; and (c) I understand that my claim is subject to verification and that I may be asked to provide supplemental information by the Settlement Administrator before my claim is considered complete and valid.

Signature

Printed Name

Date

*Do not submit your only copy of the supporting documents. Materials submitted will not be returned. Copies of documentation submitted in support of your Claim should be clear and legible.

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