IN THE SUPERIOR COURT OF WASHINGTON FOR KING COUNTY

Fitch, et al. v. Seattle Public Schools, et al.
Case No. 25-2-04060-7 SEA

Fitch, et al. v. Seattle Public Schools, et al.
CLAIM FORM

This Claim Form should be filled out online or submitted by mail if you were notified by mail of the Data Security Incident by Seattle Public Schools ("SPS") or Federal Way Public Schools ("FWPS"). All Settlement Class Members are eligible to receive unreimbursed out-of-pocket expenses up to $5,000 and a *pro rata* cash fund payment up to $599. If the Settlement is approved, you may receive payment if you submit a timely and valid Claim Form and if you are found to be eligible for compensation.

The Notice describes your legal rights and options. To obtain the Notice and find more information regarding your legal rights and options, please visit the official Settlement Website, www.CarruthSettlement.com, or call toll-free 1-844-938-4308.

If you wish to submit a claim for a Settlement Class Member benefit electronically, you may go online to the Settlement Website, www.CarruthSettlement.com, and follow the instructions on the "Submit a Claim" page.

If you wish to submit a claim for a Settlement Class Member benefit via standard mail, you need to provide the information requested below and mail this Claim Form to Fitch, et al. v. Seattle Public Schools, et al. Data Security Incident, c/o Settlement Administrator, 1650 Arch Street, Suite 2210 Philadelphia, PA 19103, postmarked by **December 2, 2026**. Please print legibly in blue or black ink.

1. SETTLEMENT CLASS MEMBER INFORMATION

Required Information:

First: _____ M: _____ Last: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ ZIP: _____

Country: _____

Phone: _____

E-mail: _____

2. BENEFIT ELIGIBILITY INFORMATION

To prepare for this section of the Claim Form, please review the Notice and the Settlement Agreement (available for download at www.CarruthSettlement.com) for more information on who is eligible for a benefit and the nature of the expenses or losses that can be claimed.

To help us determine if you are entitled to a Settlement Class Member benefit, please provide as much information as possible.

A. Verification of Settlement Class Membership

In order to allow the Claims Administrator to confirm your membership in the Settlement Class, you must provide either:

(1) The unique identifier provided in the Notice you received by mail;

or

(2) name and physical address the January 2025 notice letter was issued to.

Thus, please **EITHER**:

(1) Provide the unique identifier provided in the Notice you received: _____

OR

(2) Provide your name: _____ and physical address the January 2025 notice letter was issued to: _____.

B. Out of Pocket Losses

Please be sure to fill in the total amount you are claiming for out-of-pocket losses and attach the required third-party documentation as described in **bold type** (if you are asked to provide account statements as part of required proof for any part of your claim, you may redact unrelated transactions and all but the first four and last four digits of any account number). The type of losses claimed may have different documentation and attestation requirements as outlined below. Please round total amounts down or up to the nearest dollar.

All Settlement Class Members who submit a valid claim are eligible to receive up to $5,000 in compensation for unreimbursed losses, including postage, copying, scanning, faxing, mileage and other travel-related charges, parking, notary charges, research charges, cell phone charges (only if charged by the minute), long distance phone charges, data charges (only if charged based on the amount of data used), text message charges (only if charged by the message), bank fees, accountant fees, attorneys' fees, and identity theft insurance product (incurred on or after December 19, 2024, and fairly traceable to the Data Security Incident), upon submission of a claim and supporting third-party documentation.

If you would like to make a claim for reimbursement for Out-of-Pocket Losses, describe the unreimbursed losses claimed, sign the attestation at the end of this Claim Form, and attach supporting third-party documentation.

To receive compensation for unreimbursed losses related to **fraud or identity theft** the loss must: (i) be an actual, documented monetary loss; (ii) be more likely than not caused by the Data Security Incident; (iii) have been incurred after the date of the Data Security Incident; and (iv) must not have been previously reimbursed by a third party.

□ Unreimbursed fees or other charges from your bank or credit card company incurred on or after December 19, 2024, and before December 2, 2026 (the "Claims Deadline") due to the Data Security Incident.

DATE	DESCRIPTION	AMOUNT

Examples: Unreimbursed overdraft fees, over-the-limit fees, late fees, or charges due to insufficient funds or interest.

[UPLOAD/ATTACH DOCUMENT] Required: You must submit reasonable third-party documentation supporting the above losses such as a copy of a bank or credit card statement or other proof of claimed fees or charges (you may redact unrelated transactions and all but the first four and last four digits of any account number). You may submit self-prepared documentation, but only to explain other documentation you submit; self-prepared documentation is not sufficient by itself.

□ Unreimbursed fees relating to your account being frozen or unavailable incurred on or after December 19, 2024, and before the Claims Deadline due to the Data Security Incident.

DATE	DESCRIPTION	AMOUNT

Examples: You were charged interest by a payday lender due to card cancellation or due to an over-limit situation, or you had to pay a fee for a money order or other form of alternative payment because you could not use your debit or credit card, and these charges and payments were not reimbursed.

[UPLOAD/ATTACH DOCUMENT] Required: You must submit reasonable

third-party documentation supporting the above losses such as a copy of receipts, bank statements, credit card statements, or other proof that you had to pay these fees (you may redact unrelated transactions and all but the first four and last four digits of any account number). You may submit self-prepared documentation, but only to explain other documentation you submit; self-prepared documentation is not sufficient by itself.

□ Unreimbursed fees or other charges relating to the reissuance of your credit or debit card incurred on or after December 19, 2024, and before the Claims Deadline due to the Data Security Incident.

DATE	DESCRIPTION	AMOUNT

Examples: Unreimbursed fees that your bank charged you because you requested a new credit or debit card.

[UPLOAD/ATTACH DOCUMENT] Required: You must submit reasonable third-party documentation supporting the above losses such as a copy of a bank or credit card statement or other receipt showing these fees (you may redact unrelated transactions and all but the first four and last four digits of any account number). You may submit self-prepared documentation, but only to explain other documentation you submit; self-prepared documentation is not sufficient by itself.

□ Other unreimbursed incidental telephone, internet, mileage or postage expenses directly related to the Data Security Incident incurred on or after December 19, 2024, and before the Claims Deadline due to the Data Security Incident.

DATE	DESCRIPTION	AMOUNT

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

[UPLOAD/ATTACH DOCUMENT] Required: You must submit reasonable third-party documentation supporting the above losses such as a copy of the bill from your telephone company, mobile phone company, or internet service provider that shows the charges (you may redact unrelated transactions and

all but the first four and last four digits of any account number). You may submit self-prepared documentation, but only to explain other documentation you submit; self-prepared documentation is not sufficient by itself.

□ Credit Reports or credit monitoring charges purchased on or after December 19, 2024, and before the Claims Deadline due to the Data Security Incident, but not previously covered by SPS or FWPS. This category is limited to services purchased primarily as a result of the Data Security Incident and if purchased on or after December 19, 2024, and before the Claims Deadline, but not previously covered by SPS or FWPS.

To obtain reimbursement under this category, you must attest to the following:

□ I purchased credit reports on or after December 19, 2024, and before the Claims Deadline, primarily due to the Data Security Incident and not for other purposes, but not previously covered by Defendants.

DATE	COST

Examples: The cost of a credit report(s) that you purchased after hearing about the Data Security Incident.

[UPLOAD/ATTACH DOCUMENT] Required: You must submit reasonable third-party documentation supporting the above losses such as a copy of a receipt or other proof of purchase for each product or service purchased (you may redact unrelated transactions). To recover costs of credit monitoring services activated between December 19, 2024, and the Claims Deadline incurred as a result of the Data Security Incident, you must submit either: (1) a receipt showing a one-year subscription to a credit monitoring service between December 19, 2024 and the Claims Deadline incurred as a result of the Data Security Incident; or (2) at least three receipts showing consecutive monthly payments to a credit monitoring service during the same period of time and an attestation that you intend to continue subscribing to such service through at least one year after the Claims Deadline.

If you would like to make a claim for reimbursement for unreimbursed losses resulting from fraud or identity theft, describe the unreimbursed losses claimed, sign the attestation at the end of this Claim Form, and attach supporting third-party documentation.

DATE	DESCRIPTION	AMOUNT

☐ **I have uploaded/attached third-party documentation showing that the claimed losses were more likely than not caused by the Data Security Incident.**

☐ **Check this box to confirm that you have not been reimbursed for these fraudulent charges.**

C. *Pro Rata* Cash Payment

All Settlement Class Members may elect to receive a *Pro Rata* Cash Fund Payment up to $599, regardless of whether they make a claim for Out-of-Pocket Losses. Depending on the number of Valid Claims submitted, the ultimate *Pro Rata* Cash Payment may be less than $599. The *Pro Rata* Cash Payment will evenly distribute the net amount of the Settlement Fund, after payment of all approved claims for Out-of-Pocket Losses, Notice and Administration Expenses, any Attorney's Fees and Expenses, and any Class Representative Service Awards the Court may award.

Do you wish to participate in the *Pro Rata* Cash Payment?

☐ Yes, I elect to receive the *Pro Rata* Cash Payment.

I attest that the information supplied in this Claim Form by the undersigned is true and correct, and that this form was executed at _____ [City], _____ [State] on the date set forth below.

I understand that I may be asked to provide supplemental information by the Claims Administrator before my claim will be considered complete and valid.

Print Name:_____

Signature:_____

Date:_____

D. Submission Instructions

Once you have completed all applicable sections, please mail this Claim Form and all required supporting documentation to the address provided below, postmarked by **December 2, 2026**.

Fitch, et al v. Seattle Public Schools, et al.
c/o Settlement Administrator
1650 Arch Street, Suite 2210
Philadelphia, PA 19103