

**Your claim must
be submitted
online or
postmarked by:
July 7, 2026**

Griffin, et al. v. Team Group, Inc.
Case No. 2:24-cv-03681
United States District Court, Central District of California
**DDR-3, DDR-4, & DDR-5 DRAM COMPUTER MEMORY PRODUCT
SETTLEMENT CLAIM FORM**

TGG-CLAIM

INSTRUCTIONS

You are eligible to submit a Claim Form in the DDR-3, DDR-4, & DDR-5 DRAM Computer Memory Product Settlement if you are a Settlement Class Member.

The **Settlement Class** includes all individuals in the United States who purchased one or more **Products** from May 3, 2020 to April 8, 2026.

Excluded from the Settlement Class are (1) any Judge or Magistrate presiding over this action and members of their families, (2) the defendant, defendant's subsidiaries, parent companies, successors, predecessors, and any entity in which the defendant or its parents have a controlling interest and their current or former officers, directors, and employees, (3) counsel of record (and their respective law firms) for the Parties; (4) persons who properly execute and file a timely request for exclusion from the Class, and (5) the legal representatives, successors or assigns of any such excluded persons.

Products include any Team Group, Inc. DDR-3, DDR-4, or DDR-5 dynamic random-access memory (DRAM) product.

Completing the Claim Form

Fill out each section of this Claim Form, check the boxes that apply, and sign where indicated. Settlement Payments will be paid on a per-product basis, with a maximum of five (5) qualifying purchases paid per household, without proof of purchase. Households that purchased more than five (5) products must provide proof of purchase.

The Settlement Administrator will review your Claim Form, and if accepted, you will be sent a physical check or digital payment for a pro rata share depending on the number of valid claim forms received. This process takes time, please be patient.

The information you provide on this Claim Form will be used solely by the Court-approved Settlement Administrator for the purposes of administering the Settlement and will not be provided to any third party or sold for marketing purposes.

Submitting the Claim Form

THIS CLAIM FORM MUST BE SUBMITTED ONLINE OR POSTMARKED BY JULY 7, 2026 AND MUST BE FULLY COMPLETED, BE SIGNED, AND MEET ALL CONDITIONS OF THE SETTLEMENT AGREEMENT.

Online: www.TeamgroupDRAMSettlement.com

By Mail:

Griffin et al. v. Team Group, Inc.
c/o TGG Settlement Administrator
1650 Arch St, Suite 2210
Philadelphia, PA 19103

Questions about the Claim Form?

Contact the Settlement Administrator by emailing info@TeamgroupDRAMSettlement.com or writing to the address above.

**PLEASE DO NOT TELEPHONE THE COURT OR THE COURT CLERK'S OFFICE TO INQUIRE
ABOUT THIS SETTLEMENT OR THE CLAIMS PROCESS.**

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I. CLAIMANT INFORMATION

Provide your contact information and Notice ID, if you received one, below. It is your responsibility to notify the Settlement Administrator of any changes to your contact information after you submit this Claim Form.

--	--	--

First Name

M.I.

Last Name

--

Street Address

--

City

--

State

--

Zip Code

--

Email Address

--

Phone Number

--

Notice ID Number

II. CLASS MEMBER VERIFICATION

Check the following boxes to confirm the statements that are true and enter the number of products purchased. Indicate whether you are providing proof of purchase.

- I purchased Team Group DDR-3, DDR-4, and/or DDR-5 DRAM computer memory product(s).
- I am including a proof of purchase with this Claim Form.
- At the time I purchased the Team Group DRAM product(s), I was living in the United States.
- The purchase(s) occurred between May 3, 2020 and April 8, 2026.

III. PAYMENT SELECTION

Please select **one** of the following payment options:

- Virtual Prepaid Card** - Enter your email address: _____
- PayPal** - Enter your PayPal email address: _____
- Venmo** - Enter the mobile number associated with your Venmo account: ____ - ____ - ____
- Zelle** - Enter the mobile number or email address associated with your account: _____
- Physical Check** - Payment will be mailed to the address provided in Section I above.

IV. DECLARATION & SIGNATURE

By signing below and submitting this claim form, I declare that I believe I am a member of the Settlement Class and that all the information provided in this claim form is true.

Signature: _____ Printed Name: _____ Date: _____