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**Must be postmarked
or submitted online
NO LATER THAN
November 21, 2022**

MEDIANT SETTLEMENT ADMINISTRATOR
PO BOX 5290
PORTLAND, OR 97208 – 5290

Mediant Settlement Claim Form

SETTLEMENT BENEFITS – WHAT YOU MAY GET

If you received Notice from Mediant that your personal information may have been compromised as a result of a Data Security Incident that occurred in April 2019 (the “Data Security Incident”), you may submit a Claim.

The easiest way to submit a Claim is online at www.MediantSettlement.com, or you can complete and mail this Claim Form to the mailing address above. To receive any of the below benefits, you must submit the Claim Form below by mail or file a Claim online by **November 21, 2022**.

You may submit a Claim for one or more of these benefits:

Cash Reimbursement. Use the Claim Form to request money for one or more of the following:

1. **Reimbursement for Money You Spent.** If you spent money trying to avoid or recover from fraud or identity theft because of the Data Security Incident, you can be reimbursed up to \$10,000. You must submit documents supporting your Claim.
2. **Reimbursement for Lost Time.** If you spent time trying to avoid or recover from fraud or identity theft because of the Data Security Incident, you can get \$20 per hour for up to 3 total hours by describing what actions you took. You may claim up to an additional 5 hours of lost time at \$20 per hour if you submit reasonable supporting documentation of the time spent.

Credit monitoring. Settlement Class Members are automatically eligible for two years of free Credit Monitoring Services without the need to submit a Claim. You can access this benefit by providing your email address and Unique ID at www.MediantSettlement.com/CreditMonitor no later than **November 21, 2022**, and you will be sent enrollment instructions after the Settlement is finalized.

Your Unique ID is located on the front of the postcard notice that was sent to Settlement Class Members via U.S. Mail. If you received a postcard notice, you can also write your email address on the credit monitoring form included with the notice and return the prepaid postcard via the U.S. Postal Service. If you lost or do not know your Unique ID, you may contact the Settlement Administrator at Info@MediantSettlement.com. You do not need to submit a Claim Form to receive this benefit.

* * *

Claims must be submitted online or mailed by November 21, 2022. Use the address at the top of this form for mailed Claims.

Please note: the Settlement Administrator may contact you to request additional documents to process your Claim.

For more information and complete instructions visit
www.MediantSettlement.com

Settlement benefits will be distributed only after the Settlement is approved by the Court.

Questions? Visit www.MediantSettlement.com or call 1-888-490-0774



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Your Information

We will use this information to contact you and process your Claim. It will not be used for any other purpose. If any of the following information changes, you must promptly notify us by emailing info@MediantSettlement.com.

1. NAME:

First

MI

Last

2. MAILING ADDRESS:

Street Address

City

State

ZIP

3. PHONE NUMBER:

 - -

4. EMAIL ADDRESS:

5. UNIQUE ID provided on mailed notice (if known):



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Cash Payment: Money You Lost or Spent

If you lost or spent money trying to prevent or recover from fraud or identity theft caused by the Data Security Incident and have not been reimbursed for that money, you can receive reimbursement for up to \$10,000.

It is important for you to send documents that show what happened and how much you lost or spent, so that you can be repaid.

To look up more details about how cash payments work, visit www.MediantSettlement.com or call toll-free 1-888-490-0774. You will find more information about the types of costs and losses that can be paid back to you, what documents you need to attach, and how the Settlement Administrator decides whether to approve your payment.

Loss Type and Examples of Documents	Approximate Amount of Expense and Date	Description of Loss or Money Spent and Supporting Documents (Identify what you are attaching, and why it's related to the Mediant security incident)
<p>Costs, expenses, losses, or other charges incurred as a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of your personal information on or after 4/1/2019.</p> <p><i>Examples: Receipts for hiring service to assist you in addressing identity theft; accountant bill for refiling tax return or a letter from the IRS or state taxing authority about tax fraud in your name; account statement with unauthorized charges highlighted; police reports; FTC Identity Theft Reports; letters refusing to refund fraudulent charges.</i></p>	<p>\$ <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/> • <input type="text"/><input type="text"/></p> <p>Date: <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>
<p>Credit monitoring and identity theft protection purchased on or after 4/1/2019, through the date of your Claim submission.</p> <p><i>Examples: Receipts or statements for credit monitoring services.</i></p>	<p>\$ <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/> • <input type="text"/><input type="text"/></p> <p>Date: <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>
<p>Costs, expenses, and losses due to identity theft, fraud, or misuse of your personal information on or after 4/1/2019.</p> <p><i>Examples: Account statement with unauthorized charges highlighted; police reports; IRS documents; FTC Identity Theft Reports; letters refusing to refund fraudulent charges</i></p>	<p>\$ <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/> • <input type="text"/><input type="text"/></p> <p>Date: <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> - <input type="text"/><input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>

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<p>Professional fees paid to address identity theft on or after 4/1/2019. <i>Examples: Receipts, bills, and invoices from accountants, lawyers, or others.</i></p>	<p>\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/></p> <p>Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>
<p>Other expenses such as notary, fax, postage, copying, mileage, and long-distance telephone charges related to the Data Security Incident. <i>Examples: Phone bills, receipts, detailed list of places you traveled (i.e. police station, IRS office), reason why you traveled there (i.e. police report or letter from IRS re: falsified tax return) and number of miles you traveled.</i></p>	<p>\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/></p> <p>Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>
<p>Documented time taken off work to address issues related to the Data Security Incident to be compensated at your regular and documented hourly rate up to \$250 per hour. <i>Examples: documentation showing time spent dealing with the Data Security Incident and a pay stub showing your hourly pay rate.</i></p>	<p>\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/></p> <p>Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> MM DD YY</p>	<hr/> <hr/> <hr/> <hr/>

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Cash Payment: Lost Time

If you do not have documentation, you may receive reimbursement for up to 3 hours of lost time compensated at \$20 per hour by providing a brief description of the actions you took.

- I do not have documentation and spent _____ hours relating to the Data Security Incident (up to 3 hours). By checking this box I certify that any claimed lost time was spent related to the Data Security Incident.

Explanation of Time Spent (Identify what you did and why)

If you have documentation, you may receive reimbursement for an additional 5 hours of lost time compensated at \$20 per hour by providing the documentation and including a brief description of the documentation describing the nature of the loss, if the nature of the loss is not apparent from the documentation alone. If you already submitted documentation above to show out-of-pocket losses above, you do not need to submit the same documents again.

- I have documentation and spent an additional _____ hours relating to the Data Security Incident (up to 5 hours).

Note: Required documentation to support your Claim can include receipts or other documentation that is not “self-prepared.” “Self-prepared” documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

Explanation of Time Spent and Description of Supporting Documentation (If not apparent from the documents on their own)

How You Would Like to Receive Your Cash Payment

If you made a Claim for a cash payment on this Claim Form, you can elect to receive your payment either by check or by electronic payment (e.g. PayPal or similar service). If you choose an electronic payment, instructions for receiving your cash payment will be sent to the email address you provided on this Claim Form. Checks must be cashed within 120 days.

Which do you prefer?

- Electronic payment
- Check

Questions? Visit www.MediantSettlement.com or call 1-888-490-0774



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Signature

I affirm under the laws of the United States that the information supplied in this Claim Form is true and correct to the best of my knowledge and that any documents that I have submitted in support of my Claim are true and correct copies of original documentation.

I understand that I may be asked to provide more information by the Settlement Administrator before my Claim is complete.

Signature

Date: - -
MM DD YYYY

Print Name

REMINDER: You can submit your Claim online at www.MediantSettlement.com. If you choose to submit your Claim by mail, this form must be completed, signed, and sent to the Settlement Administrator, postmarked no later than **November 21, 2022**, and addressed to: Mediant Settlement Administrator, PO Box 5290, Portland, OR 97208 – 5290

Questions? Visit www.MediantSettlement.com or call 1-888-490-0774