Must be postmarked or submitted online
NO LATER THAN DECEMBER 14, 2026

Linneman v. United Food and Commercial Workers
Union Local No. 7
PO Box 19504
Irvine, CA 92623
www.UFCW7DataSettlement.com

Claim Form

SETTLEMENT BENEFITS - WHAT YOU MAY GET

If you received notice that your Private Information may have been impacted in the *Linneman, et al. v. United Food and Commercial Workers Union Local No. 7* Data Incident that took place on or around December 11, 2024, and if you did not opt out of the Settlement, you may submit a Claim.

The easiest way to submit a Claim is online at www.UFCW7DataSettlement.com, but you can also complete and mail this Claim Form to the address above.

You may submit a Claim for one or more of the following Settlement Benefits.

Cash Payment for Documented Losses. You are eligible to submit a Claim for up to $3,000.00 upon presentment of reasonable documentation of losses related to fraud and/or identity theft as a result of the Data Incident. To receive payment for Documented Losses, you must complete and submit a Claim Form and include documentation in support of the Claim. Except as expressly provided herein, personal certifications, declarations, or affidavits from the Settlement Class Member do not constitute proper documentation, but may be included to provide clarification, context, or support for other submitted reasonable documentation. You will not be reimbursed for expenses if you have been reimbursed for the same expenses by another source, including compensation provided in connection with any credit monitoring and identity theft protection product or through a financial institution's consumer fraud policies. If you do not submit documentation supporting a loss, or if the Settlement Administrator rejects your Claim for any reason and you fail to cure the Claim, the Claim for Documented Losses will be rejected and treated as a Claim for an Alternative Cash Payment.

Cash Payment for Lost Time. You may submit a Claim for reimbursement for time spent remedying issues related to the Data Incident at a rate of $25.00 per hour, for up to three (3) hours. To receive payment for Lost Time, you must describe the time spent on the Claim Form and attest that the time claimed was actually spent as a result of the Data Incident.

Alternative Cash Payment. As an alternative to claiming a Cash Payment for Lost Time and/or Documented Losses, you may elect to receive an Alternative Cash Payment of $50.00, which does not require the submission of any supporting documentation.

Credit Monitoring: In addition to claiming any form of Cash Payment, you may elect two years of one-bureau credit monitoring. The Credit Monitoring will provide benefits, including, but not limited to credit monitoring, dark web monitoring, real-time authentication alerts, high-risk transaction monitoring, lost wallet protection, and insurance coverage for up to $1,000,000 for identity theft. Enrollment instructions will be provided after the Settlement receives final approval.

Claims must be submitted online or mailed by December 14, 2026. Use the address at the top of this form for mailed claims.

For more information and complete instructions, visit www.UFCW7DataSettlement.com.

Settlement Benefits will be distributed after the Settlement is approved by the Court and final.

Your Information

This information will be used solely to contact you and to 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 UFCW7DataSettlement@cptgroup.com.

First Name | MI | Last Name

Mailing Address

City | State | ZIP Code

Phone Number

– –

Email Address

CPT ID (Referenced on the notice mailed to you)

☐ Check this box to receive two (2) years of one-bureau credit monitoring.

You may elect to receive one or more of the following Cash Payments.

1. Cash Payment for Documented Losses: You can receive reimbursement for up to $3,000.00 per Settlement Class Member upon presentment of documented losses related to the Data Incident.

Examples of losses may include, but are not limited to: reasonable documented losses related to fraud and/or identity theft as a result of the Data Incident.

Examples of supporting documentation include (but are not limited to): (i) credit card statements; (ii) bank statements; (iii) invoices; (iv) telephone records; and (v) receipts. "Self-prepared" documents such as handwritten receipts, personal certifications, declarations, or affidavits alone do not constitute proper documentation, but may be included to provide clarification, context, or support for other submitted reasonable documentation. You will not be reimbursed for expenses if you have been reimbursed for the same expenses by another source.

To receive reimbursement for Documented Losses, provide the details below and attach supporting documentation. Attach copies of credit card statements, bank statements, invoices, telephone records, and receipts for each expense (you may redact unrelated transactions).

Date	Description of Expense and Supporting Documents	Amount

2. Cash Payment for Lost Time: If you spent time remedying issues related to the Data Incident, you may claim reimbursement at $25.00 per hour for up to three (3) hours, for a maximum payment of $75.00. To claim Lost Time, you must attest that the time claimed was actually spent as a result of the Data Incident and briefly describe the time spent.

To claim reimbursement for Lost Time, round up to the nearest hour and check only one box. By checking a box, you attest that the hours claimed are true and correct.

☐ 1 Hour

☐ 2 Hours

☐ 3 Hours

Date	Description of Lost Time spent dealing with issues related to the Data Incident

3. Alternative Cash Payment: As an alternative to claiming a Cash Payment for Lost Time and/or Documented Losses, you may elect to receive an Alternative Cash Payment up to $50.00. No documentation is required to claim this benefit other than submission of a Valid Claim.

☐ Check this box to receive an Alternative Cash Payment.

If you make a Claim for a cash payment using this Claim Form, you will receive your payment by check. To receive an electronic payment, submit your claim online at www.UFCW7DataSettlement.com.

I declare under penalty of perjury under the laws of the United States that the information provided in this Claim Form is true and correct, that I am eligible to submit a Claim in this Settlement, and that I have completed this Claim Form to the best of my knowledge.

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

_____ Date: _____ - _____ - _____

Signature MM DD YYYY

_____

Print Name