### **CLAIM FORM**

Huffman et al. v. CommScope, Inc. of North Carolina et al, 5:23-cv-00132

The DEADLINE to submit or mail this Claim Form is: JULY 19, 2024

## **Instructions**

If you received notice from CommScope that your personally identifiable information or protected health information was potentially involved in a Data Incident discovered by CommScope in March 2023, then you are a "Settlement Class Member." If you received a notice about this class action Settlement addressed to you, then you are a Settlement Class Member.

As a Settlement Class Member, you are eligible to receive your choice of (1) three years of credit monitoring services, compensation for unreimbursed economic losses, and compensation for lost time, OR(2) a cash payment.

### **Provide Your Information**

The Settlement Administrator will use this information for all communications about this Claim Form and the Settlement. If this information changes before the Settlement benefits are issued, you must notify the Settlement Administrator.

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### **Choose Your Benefits**

You have two o	options.	You o	can ge	t either:
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(1) three years of credit monitoring services, compensation for unreimbursed economic losses (up to \$10,000), and compensation for lost time (up to 6 hours, at \$25 per hour, for a total of \$150).

#### OR

(2) an estimated \$100 cash payment.

Option #1: if you choose this option, you may get three years of credit monitoring services, compensation for unreimbursed economic losses (up to \$10,000), and compensation for lost time (up to 6 hours, at \$25 per hour, for a total of \$150).

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<u>Credit Monitoring</u> : If you wish to receive Credit Monitoring Services, check the box below, provide your email address in the space provided above, sign, and return this Claim Form. Submitting this Claim Form will not automatically enroll you in Credit Monitoring Services. To enroll, you must follow the instructions that will be sent to you using the email address you provided above after the Settlement is approved and becomes final (the "Effective Date").
Check this box if you want Credit Monitoring Services. You must provide your email address above.
<u>Compensation for Lost Time</u> : If you wish to receive Compensation for Lost Time, write the total number of hours spent remedying issues related to the Data Incident. Then, check the box below, sign, and return this Claim Form. You may claim up to up to 6 hours, at \$25 per hour, for a total of \$150.
Total # Hours (write how many hours you lost)
By checking this box, you swear and affirm that you spent the amount of time noted in response to the Data Incident.
<u>Unreimbursed Economic Losses</u> : If you wish to receive Compensation for Unreimbursed Economic Losses, indicate the total dollar amount of losses incurred as a result of the Data Incident, attach/include supporting documentation such as receipts, sign, and return this Claim Form. You may claim up to \$10,000. Unreimbursed Economic Losses include, but are not limited to, unreimbursed losses relating to fraud or identity theft; professional fees, including attorneys' fees, accountants' fees, and fees for credit repair services; costs associated with freezing or unfreezing credit with any credit reporting agency; credit monitoring costs that were incurred on or after the Data Incident through the date of claim submission; and miscellaneous expenses such as notary, fax, postage, copying, mileage, and long-distance telephone charges.
\$ Total Amount
NOTE: You must include documentation supporting your claim for Unreimbursed Economic Losses. This can include receipts or other documentation not "self-prepared." "Self-prepared" documents such as handwritten receipts are, by themselves, <u>not</u> sufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

Option #2 (Cash): If you wish to receive a cash payment (estimated to be \$100), check the box below, provide the email address associated with your PayPal, Venmo, or Zelle account below, sign, and return this Claim Form. A check will be mailed to the address above or will be deposited in the PayPal, Venmo, or Zelle account provided below.

	Check this box	if you want	a Cash Payment.
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# **Payment Options:**

Settling Class Members whose claim forms are determined to be to via an electronic payment method or by check. Please ensure you I of this claim form. If the email address you include with your s	provide a current, valid email address in Section
your responsibility to provide accurate contact information to the	
Please select from one of the following payment options:	
Electronic Payment - Once the Settlement is approved and is an email from Huntington Bank's vendor advising you that y from Paypal; Venmo; Zelle; or Bank Transfer.	
Physical Check - Payment will be mailed to the address prov	vided above.
SIGNATURE	
I swear and affirm that the foregoing is true and correct.	
Signature	Date
If you are not filing your claim through the claims filing portal (a	available on the website

If you are not filing your claim through the claims filing portal (available on the website www.commscopedataincident.com, you may mail your claim to the following address:

Huffman et al. v. CommScope, Inc. of North Carolina et al. c/o RG2 Claims Administration P.O. Box 59479 Philadelphia, PA 19102-9479

The completed claim form may also be emailed to <u>info@rg2claims.com</u> or faxed to 215-827-5551.