

Your claim must be submitted online or postmarked by: May 22, 2025

*In re: Berry, Dunn, McNeil & Parker Data Security Incident
Litigation, Case No. 2:24-cv-00146-JAW
United States District Court, District of Maine*

BD Settlement
CLAIM

CLAIM FORM

GENERAL INSTRUCTIONS

You are eligible to submit a Claim Form if you are a member of the Settlement Class, which includes:

All persons in the United States whose Private Information was potentially accessible as a result of the incident that was discovered on September 14, 2023, in which an unauthorized third party potentially gained access to Settlement Class Members' Private Information (the "Data Security Incident"), including those who were sent notification of the Data Security Incident.

Excluded from the Settlement Class are (a) all persons who are governing board members of Defendants; (b) governmental entities; and (c) the Court, the Court's immediate family, and Court staff.

The Settlement Benefits

Cash Payment A – Documented Losses

Settlement Class Members may submit a claim for a Cash Payment under this section for **up to \$5,000.00** per Settlement Class Member upon presentment of **documented losses** related to the Data Security Incident. To receive a documented loss payment, a Settlement Class Member must elect the Cash Payment A on the Claim Form attesting under penalty of perjury to incurring documented losses. Settlement Class Members will be required to submit reasonable documentation supporting the losses. Settlement Class Members shall not be reimbursed for expenses if they have been reimbursed for the same expenses by another source, including compensation provided in connection with the credit monitoring and identity theft protection product offered as part of the notification letter provided by Defendant BerryDunn or otherwise.

If a Settlement Class Member does not submit reasonable documentation supporting a loss, or if their Claim is rejected by the Settlement Administrator for any reason, and the Settlement Class Member fails to cure his or her Claim, the Claim will be rejected and the Settlement Class Member's Claim will be as if he or she elected Cash Payment B.

Cash Payment B – Flat Payment

As an alternative to Cash Payment A above, a Settlement Class Member may elect to receive Cash Payment B, which is a flat cash payment in the amount of \$100.00, subject to an upward or downward adjustment depending on the number and amounts of claims submitted.

Credit Monitoring

In addition to electing a Cash Payment, Settlement Class Members may elect three (3) bureau Credit Monitoring for up to three (3) years. This Credit Monitoring has an estimated value of \$90.00 per year per Settlement Class Member.

This Claim Form may be submitted electronically *via* the Settlement Website at www.BDSettlement.com or completed and mailed, including any supporting documentation, to: BD Settlement, Attn: Claim Forms, 1650 Arch Street, Suite 2210, Philadelphia, PA 19103.

Remember: Claim Forms must be submitted online no later than **May 22, 2025** or submitted by mail postmarked no later than **May 22, 2025**.

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BD Settlement CLAIM

CLAIM FORM

I. SETTLEMENT CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

First Name

Last Name

Street Address

City

State

Zip Code

Email Address

Telephone Number

Notice ID, if known

II. CASH PAYMENT A – DOCUMENTED LOSSES

- Check this box if you are requesting compensation for Documented Losses up to a total of \$5,000.00. You must submit supporting documentation demonstrating actual, unreimbursed documented losses related to the Data Security Incident.

Complete the chart below describing the supporting documentation you are submitting.

Table with 2 columns: Description of Documentation Provided, Amount. Includes example row: Receipt for credit repair services, \$100. Total Amount Claimed row at the bottom.

- You must check this box to attest under penalty of perjury that the Documented Losses you listed above actually occurred, were related to the Data Security Incident, and that you have not been reimbursed for these Documented Losses.

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III. CASH PAYMENT B – FLAT PAYMENT

- Check this box if you wish to receive a \$100.00 Flat Payment in lieu of a payment for Documented Losses. You do not have to provide supporting documentation to receive the Flat Payment.

IV. CREDIT MONITORING SERVICES

- Check this box if you wish to enroll in three (3) bureau Credit Monitoring Services for up to three (3) years.

A unique activation code, allowing Settlement Class Members to enroll in these services will be sent to each Settlement Class Member who submits a valid claim for such services after the Court approves the Settlement as final and after any appeals are resolved.

V. PAYMENT SELECTION

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

- 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 Zelle account:

Mobile Number: ____ - ____ - ____ or Email Address: _____

- Virtual Prepaid Card** - Enter your email address: _____

- Physical Check** - Payment will be mailed to the address provided in Section I above.

VI. AFFIRMATION & SIGNATURE

I swear and affirm under penalty of perjury pursuant to laws of the United States of America that the information provided in this Claim Form, and any supporting documentation provided is true and correct to the best of my knowledge. I understand that my claim is subject to verification and that I may be asked to provide additional information by the Settlement Administrator before my claim is considered complete and valid.

Signature

Printed Name

____ / ____ / ____
Date