

Truluck's Data Breach Settlement Administrator
P.O. Box 43434
Providence, RI 02940-3434



FEA

«Barcode»

Postal Service: Please do not mark barcode

Claim#: FEA-«Claim8»-«CkDig»
«FirstNAME» «LastNAME»
«Addr1» «Addr2»
«City», «State»«FProv» «Zip»«FZip»
«FCountry»

RAMSEY V. 41 E. CHESTNUT
CRAB PARTNERS, LLC
CIRCUIT COURT OF COOK
COUNTY, ILLINOIS
Case No. 2019 CH 2759

**Must Be Postmarked
No Later Than
August 12, 2020**

Claim Form

CHANGE OF ADDRESS (ONLY IF DIFFERENT FROM ABOVE)

Primary Address		
Primary Address Continued		
City	State	ZIP Code
Foreign Province	Foreign Postal Code	Foreign Country Name/Abbreviation

YOUR CLAIM FORM MUST BE POSTMARKED (IF BY U.S. MAIL) OR SUBMITTED (IF USING THE ONLINE CLAIMS SUBMISSION PROCESS) NO LATER THAN AUGUST 12, 2020.

By submitting this Claim Form, you will be included as a member of the Settlement Class identified in the notice. If you also submit a request for exclusion from the class and Settlement, the request for exclusion will be deemed invalid.

SETTLEMENT OVERVIEW. A Settlement has been reached with the Truluck's Defendants in a class action lawsuit about a data breach that occurred at certain Truluck's Restaurants from November 21, 2018 through December 8, 2018 ("Data Breach"). For a list of the Impacted Truluck's Restaurants, go to www.TrulucksDataBreachSettlement.com. The amount of any settlement payment for a Verified Claim will depend upon whether you qualify as a Category 1 Class Member or a Category 2 Class Member, and may be adjusted up or down depending on the number of total claimants:

- CATEGORY 1 CLASS MEMBERS:** A one-time payment of approximately \$20 to any person who made a purchase using a credit or debit card at one of the Impacted Truluck's Restaurants during the period of time from November 21, 2018 through December 8, 2018. The amount of the Category 1 payment may be adjusted up (to a maximum of \$30) or down depending on the number of claimants.
- CATEGORY 2 CLASS MEMBERS:** A one-time payment of approximately \$20 to any person who made a purchase using a credit or debit card at one of the Impacted Truluck's Restaurants during the period of time from November 21, 2018 through December 8, 2018, **and** if the person also experienced a fraudulent or unauthorized charge on the credit or debit card account used at the Impacted Truluck's Restaurant any time from November 21, 2018 through May 14, 2020, that person shall also be eligible to obtain reimbursement up to a maximum amount of \$2,500 for such charges provided that they submit documentary proof to establish such charges and that such charges were not credited or otherwise reimbursed. The \$20 portion of the Category 2 payment may be adjusted up (to a maximum of \$30) or down depending on the number of claimants. The reimbursement of documented unreimbursed fraudulent or unauthorized charges up to \$2,500 will not be subject to an adjustment.



FOR CLAIMS PROCESSING ONLY	OB <input type="checkbox"/>	CB <input type="checkbox"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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Please answer the following questions to determine your eligibility for a payment of \$20:

- Did you use a credit or debit card at one of the Impacted Truluck's Restaurants during the period of time from November 21, 2018 through December 8, 2018?
 - Yes (Category 1 Class – You are eligible for a payment of \$20) (Proceed to Question 2)**
 - No (You are not eligible to submit a claim)**

- List the city and state of any one of the Impacted Truluck's Restaurants where you made your purchase.

City	State

- After your purchase, did you experience any fraudulent or unauthorized charges on the credit or debit card account that you used at the Impacted Truluck's Restaurant you listed in response to Question 2 above? If yes, provide the last four digits of the credit or debit card(s) used which experienced the fraudulent or unauthorized charges.

- Yes (Proceed to Question 4)**
Last four digits of the credit or debit card(s) used:

- No (Category 1 Class – You are still eligible for a payment of \$20)**

- Did the fraudulent or unauthorized charges on your payment card occur on or before May 14, 2020?

- Yes (Category 2 Class – Proceed to Question 5)**
- No (Category 1 Class – You are still eligible for a payment of \$20)**

- To obtain reimbursement up to a maximum amount of \$2,500 for such fraudulent or unauthorized charges, you must submit documentary proof to establish such charges and that such charges were not credited or otherwise reimbursed. The proof could be, for example, in the form of a credit or debit card statement or other communications or correspondence regarding the fraudulent or unauthorized charges. The Settlement Administrator will review the documentary proof and may request additional proof of such fraudulent or unauthorized charges and that such charges were not credited or otherwise reimbursed. Identify below the documentary proof you are submitting with this Claim Form.

List the Documentary Proof you are submitting:

THIS FORM MUST BE COMPLETED AND POSTMARKED (IF BY U.S. MAIL) OR SUBMITTED (IF COMPLETED THROUGH THE ONLINE CLAIM PROCESS) ON OR BEFORE AUGUST 12, 2020.

MAIL FORM TO: *Truluck's Data Breach* Settlement Administrator, P.O. Box 43434, Providence, RI 02940-3434

ATTESTATION

I understand that the Settlement Administrator, Truluck's Defendants, or Class Counsel may require me to provide support for my claim and that I should retain in my possession any receipts, credit card statements, bank statements, or other documents that support my purchase(s) at an Impacted Truluck's Restaurant from November 21, 2018 to December 8, 2018 and, if applicable, any documents supporting my claim that there was a fraudulent or unauthorized charge on or before May 14, 2020 on the credit or debit card account used at the Impacted Truluck's Restaurant.

I do hereby attest that the information provided above is true and accurate to the best of my knowledge and belief.

Signature: _____

Dated (mm/dd/yyyy): _____

Print Name: _____

Email Address			
Area Code	Telephone Number (home)	Area Code	Telephone Number (work)

