CLAIM FORM

In re Brady Martz Data Security Litigation; Case No. 3:23-cv-0176-PDW-ARS (United States District Court, District of North Dakota)

> SUBMIT BY JUNE 24, 2025 ONLINE AT WWW.BRADYMARTZDATASETTLEMENT.COM OR MAIL TO:

> > Brady Martz Settlement Administrator c/o Settlement Administrator PO Box 2009 Chanhassen, MN 55317-2009

GENERAL CLAIM FORM INFORMATION

This Claim Form should be filled out online or submitted by mail if you were sent a notification letter from Brady Martz in connection with the Data Incident discovered in November 2022 ("Settlement Class").

If you wish to submit a Claim by mail, please provide the information requested below. Please print clearly in blue or black ink. This Claim Form must be mailed and postmarked by **no later than JUNE 24, 2025**.

Claimant Information

Full Name of Class Member

Unique Identifier*

*(*Claim Number*) Can be found on the Postcard you received informing you about this Settlement. If you need additional help locating this ID or submitting a claim, please contact the Settlement Administrator.

Street Address

City

State

Zip Code

Phone Number

Email Address

Monetary Compensation

I. Cash Payment: Would you like to receive a \$75 cash payment under the Settlement? (circle one)**

Yes No

- ** the \$75 cash payments may be increased or decreased *pro rata* to the extent funds remaining in the Settlement Fund after all claims are submitted
- II. Lost Time: All Members of the Class may submit a Claim for Lost Time at a rate of \$25/hour if at least one hour of time was spent in response to the Data Incident, remedying fraud, identity theft, or other alleged misuse of personal information caused by the Data Incident or spent on preventative and remedial measures to protect personal information that were caused by the Data Incident. You may claim up to 4 hours of lost time at \$25 per hour (\$100 maximum) under this settlement benefit.

l attest that l spent (circle one if applicable): 1 2 3 4 hours

III. Verified Ordinary and/or Extraordinary Expenses: I am submitting a claim for either ordinary or extraordinary monetary losses in the amount of \$______ on account of out-of-pocket expenses and/or Extraordinary Losses I incurred as a result of the Data Breach Incident. <u>I understand that I am required to provide supporting third-party</u> <u>documentation and to support my claim for out-of-pocket losses</u>, such as providing copies of any receipts, bank statements, reports, or other documentation supporting my claim. This can include receipts or other documentation not "self-prepared" by you. "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support other submitted documentation. If you do not have information supporting your claim for ordinary or extraordinary expenses, you likely will not receive compensation for this settlement benefit.</u>

Any monetary compensation you may receive under the settlement is capped at \$250 (inclusive of any payment for Lost Time (II.)) for Ordinary Expenses (III.) and/or \$5,000.00 for Extraordinary Expenses (III.)

Please provide copies of any receipts, bank statements, reports, or other documentation supporting your claim. This can include receipts or other documentation not "self-prepared" by you. "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support other submitted documentation. You may mark out (also known as redact) any information that is not relevant to supporting your claim before sending in the documentation. The settlement administrator may contact you for additional information before processing your claim.

Description of the unreimbursed, out-of-pocket loss occurred, and the documents attached to support this claim:

Form of Payment

By mailing this form to the Settlement Administrator, you will receive payment for your losses under this Settlement in the form of a physical check. If you wish to receive an electronic payment, you must submit your Claim Form online at www.BradyMartzDataSettlement.com

Certification

Please sign below indicating that you are submitting this Claim for monetary losses and your representations of these losses are true and correct to the best of your knowledge and belief, and are being made under penalty of perjury

Signature