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**Must be postmarked  
or submitted online  
NO LATER THAN  
March 20, 2023**

MORLEY CLAIMS ADMINISTRATOR  
PO BOX 6340  
PORTLAND, OR 97228-6340  
WWW.MORLEYSETTLEMENT.COM

**MORLEY**

## ***Morley Settlement Claim Form***

### SETTLEMENT BENEFITS – WHAT YOU MAY GET

If you were mailed a notice letter that your Private Information may have been compromised as a result of Morley's Data Incident occurring on or about August 1, 2021, then you are a Settlement Class Member.

**The easiest way to submit a claim is online at [www.MorleySettlement.com](http://www.MorleySettlement.com)**, or you can complete and mail this Claim Form to the mailing address above.

**You may submit a claim for one or more of these benefits:**

**Cash Reimbursement.** Use this Claim Form to request money for one or more of the following:

1. **Out-of-Pocket Expense Claims.** By submitting a valid and timely Claim Form, you are eligible to receive reimbursement of up to \$2,500 for your documented Out-of-Pocket Expenses that are reasonably traceable to the Data Incident.
2. **Lost Time Claims.** You can be reimbursed for up to 4 hours of time, calculated at \$20 per hour, by attesting to the time was spent as a result of the Data Incident.
3. **California Statutory Payment.** If you are able to confirm you were a resident of California at the time of the Data Incident, you are eligible to receive \$75 in statutory compensation.
4. **Credit Monitoring.** By submitting a valid and timely Claim Form, if you did not previously claim the IDX credit and identity monitoring services you can be provided 3-bureau credit monitoring for a period of three years.
5. **Password Managing Services.** By submitting a valid and timely Claim Form, class members can enroll in one-year of Kroll's "Dashlane" password managing services (or similar product).

**Claims must be submitted online or mailed by March 20, 2023. Use the address at the top of this form for mailed claims.**

*Please note: The Claims Administrator may contact you to request additional documents to process your claim.*

For more information on the Settlement benefits, what documents you need to attach, how the Claims Administrator will decide whether to approve your payments, and for complete instructions visit **[www.MorleySettlement.com](http://www.MorleySettlement.com)**.

**Settlement benefits will be distributed only after the Settlement is approved by the Court.**



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### Your Information

We will use this information to contact you and 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 calling 1-855-604-1803.

**1. NAME:**

First	Middle Initial	Last
<input type="text"/>	<input type="text"/>	<input type="text"/>

**2. MAILING ADDRESS:**

Street Address

Apt. No.

City  State  ZIP Code

**3. PHONE NUMBER:**

-  -

**4. EMAIL ADDRESS:**

**5. UNIQUE ID: (located on the notice mailed to you)**

### Cash Payment: Out-of-Pocket Expense Claims

You can receive reimbursement for up to \$2,500 for documented Out-of-Pocket Expenses incurred as a result of the Data Incident.

You must submit documentation supporting your Out-of-Pocket Expense Claim and the costs incurred. This may include receipts or other documentation and may not be "self-prepared." "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but may be considered to add clarity or support to other submitted documentation.



Expense Types and Examples of Documents	Approximate Amount of Expense and Date	Description of Expense or Money Spent and Supporting Documents (Identify what you are attaching, and why it's related to the Data Incident)
Unreimbursed losses relating to fraud or identity theft	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM          DD                  YYYY	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Professional fees including attorneys' and accountants' fees, and fees for credit repair services	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM          DD                  YYYY	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Costs associated with freezing or unfreezing credit with any credit reporting agency	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM          DD                  YYYY	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Credit monitoring costs that were incurred on or after August 1, 2021, through the date of claim submission	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM          DD                  YYYY	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Miscellaneous expenses such as notary, data charges (if charged based on the amount of data used), fax, postage, copying, mileage, cell phone charges (only if charged by the minute), and long-distance telephone charges	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> Date: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM          DD                  YYYY	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>



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### Cash Payment: Lost Time

You may receive reimbursement for up to 4 hours of lost time compensated at \$20 per hour by signing the attestation at the end of this Claim Form.

State the number of hours that were spent as a result of the Data Incident (up to four):

By checking this box, I certify that any claimed lost time was spent related to the Data Incident.

### California Claims

If you can confirm that you were a California resident at the time of the Data Incident, you are eligible to receive \$75 dollars in statutory compensation.

I swear and affirm that I had a California mailing address at the time of the Data Incident.

### Credit Monitoring Services

You may be eligible to receive three years of free credit monitoring at all three national credit reporting agencies if you did not previously claim credit and identity monitoring through IDX.

*If you wish to receive Credit Monitoring Services, please check the box below.*

Credit Monitoring: I want to receive free three-bureau credit monitoring for three years.

*If you select this option, you will be sent instructions and an activation code after the Settlement is final to your email address or home address. This benefit can be selected in addition to any other benefit to which the class member may be entitled on this form.*

### Password Managing Services

You may be eligible to receive one year of Kroll's "Dashlane" password managing services (or similar product).

*If you wish to receive Password Managing Services, please check the box below.*

Password Management: I want to receive free password management services for one year.

*If you select this option, you will be sent instructions and an activation code after the Settlement is final to your email address or home address. This benefit can be selected in addition to any other benefit to which the class member may be entitled on this form.*

### How You Would Like to Receive Your Cash Payment

If you made a claim for a cash payment in this Claim Form, you could elect to receive your payment either by check or as a digital payment (you could receive payment as an ACH direct deposit, prepaid debit card, or gift card using instructions which will be emailed to you). Checks must be cashed within 90 days.

Which do you prefer?

Check mailed to me

Digital payment instructions emailed to the email address I provided on page 2

Questions? Visit [www.MorleySettlement.com](http://www.MorleySettlement.com) or call 1-855-604-1803.

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### Signature

I affirm under the laws of the United States that the information supplied in this Claim Form is true and correct to the best of my knowledge and that any documents that I have submitted in support of my claim are true and correct copies of original documentation.

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

**Signature**

**Dated:**   -   -      
MM DD YYYY

**Print Name**