

EXCLUSION REQUEST FORM

Must be postmarked by January 24, 2024



THIS IS NOT A CLAIM FORM. This form removes you from the settlement. If you submit this form, you will not be eligible for any benefits pursuant to the settlement, including a cash payment.

COMPLETE AND RETURN THIS FORM BY **January 24, 2024** only if you do **not** want to be part of the settlement of this case, or if you intend to file a separate lawsuit on your own for the claims alleged in this class action case. The attorneys who represent the class do not represent you with respect to any such claims if you exclude yourself.

BY COMPLETING THIS FORM, you are **excluding** yourself from participation in the settlement in this case, you will not receive any money if you are entitled. If you submit this form and want to obtain any money you will then have to file your own lawsuit. You may need to retain your own attorney. You must file your own lawsuit before time runs out to do so and you should consult your own attorney to make certain you file a complaint in the appropriate court within the time provided by the applicable statutes of limitations.

Section I: Exclusion

I request to be excluded from the Class Settlement in Blackburn et al. v. A.C. Israel Enterprises, Inc. et al., No. 3:22-cv-146 (E.D. Va.).

Section II: Contact Information

Full Name: _____

Current Address: _____

Phone Number: _____

Last Four Digits of SSN: _____

Section III: Signature

Signature: _____

Date: _____

Exclusion Request Forms must be mailed to:

Blackburn Settlement
c/o Settlement Administrator
P.O. Box 23309
Jacksonville, FL 32241

Administrator Use Only – Do Not Write Below This Line

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Docket Label

Received Date

Postmark Date