

**CASA de Maryland, Inc. et al. v. Arbor Realty Trust, Inc., et al.**

Mail this completed Claim and Release Form, and required documentation, postmarked on or before **February 7, 2024**, to:  
**CASA v Arbor, c/o Settlement Administrator, PO Box 23680, Jacksonville, FL 32241-3680**

You may also complete this Claim and Release Form online at: [www.bedfordandvictoriastationsettlement.com](http://www.bedfordandvictoriastationsettlement.com)

**CLAIM AND RELEASE FORM**

**INSTRUCTIONS**

If you resided in an apartment at either Bedford Station or Victoria Station near University Blvd., in Langley Park, MD, during the period **July 19, 2018, through May 23, 2022** you may be eligible for a settlement payment in this lawsuit against Bedford United, LLC, Victoria United, LLC, Hyattsville United, LLC, Arbor Management Acquisition Company, LLC, Arbor Realty Trust, Inc., Arbor Realty SR, Inc., Arbor Realty Limited Partnership, and Realty Management Services, Inc. if the final settlement is approved by the Court. **YOU MUST COMPLETE THIS CLAIM AND RELEASE FORM IN ORDER TO RECEIVE A SETTLEMENT PAYMENT.** The exact amount of any final payment to Class Members will depend on the Court's award of attorneys' fees and expenses, costs of administration, and class representative incentive awards. The amount any individual tenant receives will be calculated by the Settlement Administrator and will be based on the duration of residency at Bedford Station or Victoria Station during the period of July 19, 2018, through May 23, 2022.

**This Claim and Release Form, the enclosed W-9, and any additional required documentation must be postmarked or submitted no later than February 7, 2024.**

Please go to [www.bedfordandvictoriastationsettlement.com](http://www.bedfordandvictoriastationsettlement.com) for more details on documentation that can support your claim and other information. If you still have questions, you can call 1-800-657-1193.

My name and mailing address are correct as printed above.  I have corrected my name and address below.

FIRST NAME

LAST NAME

MAILING ADDRESS

CITY

STATE

ZIP

EMAIL ADDRESS

CURRENT PHONE NUMBER

(    )    -   

SOCIAL SECURITY NO.

OR TAX ID NO.

**APARTMENT INFORMATION**

If you believe you resided in an eligible apartment during the relevant time period, please provide the following information and supply the required proof of residency documentation. If you resided in more than one apartment at Bedford Station or Victoria Station, please print additional Claims and Release Forms available at [www.bedfordandvictoriastationsettlement.com](http://www.bedfordandvictoriastationsettlement.com) or contact 1-800-657-1193 to request additional Claim and Release Forms. One Claim and Release Form must be submitted for each apartment you resided in during the relevant time period.

**Address of Eligible Apartment:** \_\_\_\_\_  
*(Street)* *(Unit/Apt #)*  
\_\_\_\_\_  
*(City)* *(State)* *(Zip Code)*

Please go to [www.bedfordandvictoriastationsettlement.com](http://www.bedfordandvictoriastationsettlement.com) for more details on documentation that can support your claim and other information. If you still have questions, you can call 1-800-657-1193.

**Period of Residency**

1. When did you begin your residency of the apartment: \_\_\_\_\_ / \_\_\_\_\_ (Month, Year)
2. When did you end your residency of the apartment: \_\_\_\_\_ / \_\_\_\_\_ (Month, Year)
3. Do you currently, or did you previously, reside in the apartment with anyone else (for example, a spouse or family member)?  
*Only list people over the age of eighteen who lived at or leased the apartment with you.*  
 Yes       No
4. If your answer to Question 4 is “Yes,” please list all other co-owners of the Property.

**Note: Each co-tenant must either complete his or her own Claim and Release Form or sign the Claim and Release Form below to receive his or her own compensation.**

(Co-tenant #1)

(Co-tenant #2)

(Co-tenant #3)

**PROOF OF RESIDENCY**

Please attach a copy of one of the following types of documents to establish proof of your residency:

- Lease Agreement listing your name and the address of your apartment, covering dates within the relevant period.
- Letter from a government body (e.g., Maryland Department of Human Services) listing your name and the address of your apartment, dated within the relevant period.
- Bank statement or utility bill listing your name and the address of your apartment, dated within the relevant period.
- Postmarked letter from a third party listing your name and the address of your apartment, dated within the relevant period.
- Any other similar document that shows your name, the address of your apartment, and that you were residing in the apartment during the relevant period.

Please note that proof of residency will be subject to verification.

**SIGN AND DATE THE CLAIM AND RELEASE FORM**

**You must sign the Claim and Release Form under penalty of perjury. Therefore, make sure it is truthful.**

**Certification:** I hereby certify under penalty of perjury that (1) the above and foregoing is true and correct; and (2) I believe, in good faith, that I resided in the Eligible Apartment, listed above, for some period during the period **July 19, 2018 through May 23, 2022.**

**Release of Claims:** In exchange for and upon receipt of the settlement payment for which I am submitting this Claim and Release Form, I hereby RELEASE and am forever barred from bringing against the Released Entities, as defined in the following paragraph, any and all actions, causes of actions, claims, demands that have been or could have been asserted in any form by Class Members, including but not limited to, claims based on statutory or regulatory violations, tort (excluding personal injury and wrongful death), contract, common law causes of action, and any claims for damages (including any compensatory damages, special damages, consequential damages, punitive damages, statutory fines or penalties, attorneys’ fees, costs and any equitable relief), direct or indirect, whether or not currently unknown, arising out of, based upon or related in any way to the allegations set forth in the First Amended Complaint (the “FAC,” ECF No. 43).

For purposes of this complete Release, the “Released Entities” means the Defendants Bedford United, LLC, Victoria United, LLC, Hyattsville United, LLC, Arbor Management Acquisition Company, LLC, Arbor Realty Trust, Inc., Arbor Realty SR, Inc., Arbor Realty Limited Partnership, Realty Management Services, Inc., and each of its past, present and future directors, officers (whether acting in such capacity or individually), shareholders, advisors, owners, partners, joint venturers, principals, trustees, creditors, law firms, attorneys, representatives, employees, managers, parents, direct or indirect subsidiaries, divisions, subdivisions, departments, entities in common control, affiliates, insurers, reinsurers, control persons, predecessors, and successors or any agent acting or purporting to act for them or on their behalf.

\_\_\_\_\_  
SIGNATURE

M	M	-	D	D	-	2	0	2	
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