

Ramos v. Hopele of Fort Lauderdale, LLC
S.D. Fla. Case No. 17-cv-62100

CLAIM FORM

TO RECEIVE A PAYMENT, YOU MUST COMPLETE AND SIGN THIS CLAIM FORM AND SUBMIT IT TO THE SETTLEMENT ADMINISTRATOR (SEE SUBMISSION INFORMATION BELOW) BY DECEMBER 4, 2019.

Please read this form carefully and follow the instructions below. **Step 1:** provide the requested information. **Step 2:** sign the certification. **Step 3:** submit the Claim Form using one of the identified methods. You may submit this Claim Form online by **December 4, 2019** or you may print out and mail this form, postmarked on or before **December 4, 2019**, to:

Ramos TCPA Settlement
c/o JND Legal Administration
PO Box 91203
Seattle, WA 98111

YOU ARE ONLY ENTITLED TO SUBMIT A CLAIM FORM IF YOU ARE A MEMBER OF THE SETTLEMENT CLASS. See the Long Form Notice online at www.RamosTCPAClassAction.com or call 1-844-961-0315 if you have questions as to whether you are a member of the Settlement Class.

Each Settlement Class Member is entitled to submit only one claim. Your claim may be rejected if you do not provide the information requested below. Your claim will also be rejected if you do not sign the Claim Form.

STEP 1: CLAIMANT INFORMATION

Name: _____
First Middle Last

Current Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Current Phone Number: _____ - _____ - _____

Class Member ID*: _____

*This number is the 9-digit alphanumeric number located in the Notice you received. If you do not provide this number, your claim form may be rejected.

Please provide the 10-digit cellular telephone number at which you were sent a text message relating to offers available at certain Pandora stores.

Telephone Number: _____

Please identify from which Pandora store you believe you were sent a text message.

Please identify the date(s) on which you believe you were sent a text message relating to offers available at certain Pandora stores.

STEP 2: CERTIFICATION

I hereby certify under penalty of perjury that I have received notice of the class action Settlement in this case and I am a member of the class of persons as described in the Notice. I certify under penalty of perjury that the above information is true to the best of my knowledge. I understand that the Settlement Administrator, Class Counsel, and Defense Counsel have the right to verify my responses or otherwise dispute any claims that are based on inaccurate responses.

Signature

Date - -
MM DD YY

STEP 3: METHODS OF SUBMISSION

Please complete the Claim Form above and return it by one of the following methods:

[1] By completing this online Claim Form and clicking “submit” below by **December 4, 2019**.

[2] By mailing, at your own expense, a completed and signed Claim Form to the Settlement Administrator, postmarked no later than **December 4, 2019**, to:

Ramos TCPA Settlement
c/o JND Legal Administration
PO Box 91203
Seattle, WA 98111
