

Your claim must be submitted online or postmarked by: **JULY 29, 2024**

**CLAIM FORM FOR ALOHA NURSING REHAB CENTRE
CYBERATTACK SETTLEMENT**

**Aloha Nursing
Rehab Centre**

Spencer, et al. v. Aloha Nursing Rehab Centre
Case No. 1CCV-23-0000486

USE THIS FORM IF YOUR PRIVATE INFORMATION WAS MAINTAINED BY ALOHA NURSING REHAB CENTRE TO MAKE A CLAIM FOR IDENTITY THEFT PROTECTION AND CREDIT MONITORING SERVICES AND/OR COMPENSATION FOR UNREIMBURSED LOSSES

**SAVE TIME BY SUBMITTING YOUR CLAIM ONLINE AT
WWW.ALOHADATASETTLEMENT.COM**

GENERAL INSTRUCTIONS

If your private information was maintained on Aloha Nursing Rehab Centre's ("Aloha") computer systems and/or network that was compromised in a cyberattack against Aloha in July of 2022 (the "Cyberattack"), you are eligible to request compensation for lost time and unreimbursed, documented, out-of-pocket expenses up to \$500.00 ("Ordinary Losses"), and compensation for unreimbursed monetary losses up to \$2,000 ("Extraordinary Losses"). You are also eligible for 30 months of identity protection and credit monitoring service free of charge.

Please read the claim form carefully and answer all questions. Failure to provide required information could result in a denial of your claim.

This Claim Form may be submitted electronically *via* the Settlement Website at www.AlohaDataSettlement.com or completed and mailed to the address below. Please type or legibly print all requested information, in blue or black ink. Mail your completed Claim Form, including any supporting documentation, by U.S. mail to:

Aloha Claims Administrator
C/o RG/2 Claims Administration
P.O. Box 59479
Philadelphia, PA 19102-9479

I. CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Claims Administrator if your contact information changes after you submit this form.

First Name

Last Name

Street Address

City

State

Zip Code

Email Address

Telephone Number

