Fitton v. Pinnacle Propane, LLC, Case No. 3:23cv1559, United States District Court for the Northern District of Texas, Dallas Division

Pinnacle Propane Data Settlement c/o Analytics Consulting LLC P.O. Box 2009 Chanhassen, MN 55317-2009

USE THIS CLAIM FORM TO MAKE A CLAIM FOR UNREIMBURSED OUT-OF-POCKET LOSSES, CREDIT MONITORING SERVICES OR ALTERNATIVE CASH PAYMENT

SETTLEMENT CLAIM FORM

IN ORDER TO BE VALID, THIS CLAIM FORM MUST BE POSTMARKED OR SUBMITTED ONLINE AT WWW.PINNACLEPROPANEDATASETTLEMENT.COM NO LATER THAN DECEMBER 13, 2024.

ATTENTION: This Claim Form is to be used to apply for benefits related to the Data Incident that occurred on approximately December 4, 2022, and potentially affected individuals to whom Pinnacle Propane, LLC ("Defendant") sent notice. There are four (4) types of benefits for which Settlement Class Members may be eligible: (1) compensation for Unreimbursed Out-of-Pocket losses incurred as a result of the Data Incident, up to a total of \$2,000 per person upon submission of a valid claim and supporting documentation,; (2) compensation for up to six (6) hours of Lost Time, at \$40.00/hour (\$240 cap), for time spent mitigating the effects of the Data Incident-Claims for Lost Time can be combined with claims for Unreimbursed Economic Loss but are subject to the \$2,000.00 cap; and (3) three (3) years of three-bureau Credit Monitoring Services provided by Experian, Equifax, and Transunion - these services include identity restoration services and \$1 million in identity theft insurance. (4) In the alternative to compensation for Unreimbursed Out-of-Pocket Losses, Lost Time, and/or Credit Monitoring, Class Members can elect to make a claim for up to a \$100 Alternative Cash Payment. To receive this benefit, Settlement Class Members must submit a signed, valid claim form, but no additional documentation is required to make a claim. In the event that the total amount of Approved Claims exceeds the amount of the Net Settlement Fund, then the cash Settlement Payments to be paid for Approved Claims for Unreimbursed Out-of-Pocket Losses, Lost Time, or the Alternative Cash Payment shall be proportionately reduced on a pro rata basis and paid in accordance with the terms and conditions of the Settlement Agreement.

To submit a claim, you must be a Settlement Class Member whose Private Information was potentially compromised in the Data Incident and/or received Notice of this settlement with a **Unique ID and PIN**.

Please be advised that any supporting documentation that you would like to provide must be submitted with this Claim Form.

CLAIM VERIFICATION: All claims are subject to verification. You will be notified if additional information is needed to verify your claim.

ASSISTANCE: If you have questions about this Claim Form, please visit the Settlement Website at www.PinnaclePropaneDataSettlement.com for additional information.

PLEASE KEEP A COPY OF YOUR CLAIM FORM, SUPPORTING DOCUMENTATION, AND PROOF OF MAILING FOR YOUR RECORDS.

Failure to submit required documentation, or to complete all parts of the Claim Form, may result in denial of the claim, delay its processing, or otherwise adversely affect the claim.

REGISTRATION															
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Please provide the Unique ID identified on the Notice that was sent to you:															
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Instructions. Please follow the instructions below and answer the questions as instructed.															
instructions. I lease follow the instructions below and answer the questions as instructed.															
CLAIM INFORMATION															
Section A. Confirm Your Eligibility															
Was your Personally Identifiable Information ("PII") compromised or potentially compromised in the Data Incident disclosed by Pinnacle Propane LLC, beginning in June 2023 or did you receive a Notice with a Unique ID indicating that you may be a member of the Class?															
☐ YES ☐ NO															
If yes, continue to the next question. If no, you are not a member of the Class and do not qualify to file a claim.															
Did you incur financial expenses, suffer any other financial losses, or spend time remedying issues as a result of the Data Incident disclosed by Propane LLC beginning in June 2023? For example, did you sign up and pay for a credit monitoring service, hire and pay for a professional service to remedy identity theft, etc., or did you spend time monitoring credit, resolving disputes for unauthorized transactions, freezing or unfreezing your credit, remedying a falsified tax return, etc. as a result of the Data Incident?															
☐ YES ☐ NO															
If yes, you may be eligible to fill out Section B of this form and provide corroborating documentation. If no, you are still eligible to fill out Section C or Section D of this form.															
Section B. Reimbursement for Out-of-Pocket L	.osses														

If you suffered verifiable financial losses as a result of the Data Incident, you may be eligible to receive a payment to compensate you for these financial losses and lost time spent.

If it is verified that you meet all the criteria described in the Settlement Agreement, and you **submit** documentation that proves your losses and the dollar amount of those losses, you are eligible to receive a payment compensating you for your documented Out-of-Pocket Losses of up to **\$2,000 per person**. Out-of-Pocket Losses includes costs incurred on or after December 4, 2022, including: (1) costs associated with accessing or freezing/unfreezing credit reports with any credit reporting agency; (2) other miscellaneous expenses incurred related to any Unreimbursed Economic Losses such as notary, fax, postage, copying, mileage, and long-distance telephone charges; (3) credit monitoring or other mitigative costs.

Class Members who elect to submit a claim for compensation of Out-of-Pocket Losses must provide the Settlement Administrator with information required to evaluate the claim, including:(1) the Class Member's name and current address; (2) documentation

supporting their claim; (3) a brief description of the documentation describing the nature of the loss, if the nature of the loss is not apparent from the documentation alone; and (4) a verification, stating that the claim is true and correct, to the best of the Class Member's knowledge and belief, and is being made under penalty of perjury. Documentation supporting Out-of-Pocket Losses can include receipts or other documentation not "self-prepared" by the Class Member that documents the costs incurred. "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

Providing adequate proof of your losses does not guarantee that you will be entitled to receive the full amount claimed. All claims will also be subject to an aggregate maximum payment amount, as explained in the Settlement Agreement. If the amount of losses claimed exceeds the maximum amount of money available under the Settlement Agreement, then the payment for your claim will be reduced on a pro rata basis. If you would like to learn more, please review the Settlement Agreement for further details.

For each loss that you believe was incurred as a result of the Data Incident, please provide a description of the loss, the date of the loss, the dollar amount of the loss, and all documentation that supports the loss. **You must provide ALL required information for this claim to be processed.** Supporting documents must be submitted with this Claim Form.

If you fail to provide sufficient supporting documents, the Settlement Administrator will deny your claim. Please provide only copies of your supporting documents and keep all originals for your personal files. The Settlement Administrator will have no obligation to return any supporting documentation to you. A copy of the Settlement Administrator's privacy policy is available at https://www.analyticsllc.com/privacy-statement/. Please do not directly communicate with Defendant regarding this matter. All inquiries are to be sent to the Settlement Administrator.

Description of the Loss	Date of Loss	Amount	Description of Supporting Documentation
Example: Identity Theft Protection Service	0 7 - 1 7 - 2 0 M M D D Y Y	\$ 5000	Copy of identity theft protection service bill
Example: Fees paid to a professional to remedy a falsified tax return	0 2 3 0 2 1 M M D D Y Y	\$ 25.00	Copy of the professional services bill
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Description of the Loss	Date of Loss	Amount	Description of Supporting Documentation
		\$	
		\$	
Reimbursement for Lost Time:			
Class Members may submit a clair hours of lost time may be reimburse issues related to the Data Incident. spent remedying identity theft, fraud	ed at \$40 per hour (\$240 cap) if Examples of lost time spent rel	you provide an attestation as t medying issues related to the	to the time you spent remedying Data Incident may include time
If you spent time remedying issues	related to the Data Incident, ple	ase list the number of hours y	ou spent here:
By checking this box, I declar Time is true and correct.	e that the information provide	ed in this Claim Form to sup	oort my seeking relief for Los
Section C. Credit Monitoring Se	ervices		
Class Members are eligible to en Equifax, and Transunion - these s			
By checking the below box, I cho	ose to enroll in Credit Monitor	ing Services.	
Yes, I choose to enroll in Cre	dit Monitoring Services.		
Section D. \$100 Cash Compens	sation - Alternative Cash Pay	ment	
Class Members may, in lieu of maki to receive an alternative cash paym			
By checking the below box, I cho of-Pocket Losses, Lost Time, and		t of up to \$100 in the alterna	tive to compensation for Out
NOTE: YOU MAY NOT SEEK BENI IF YOU ARE FILING FOR THE ALT	EFITS FOR OUT-OF-POCKET L		EDIT MONITORING SERVICES
Yes, I choose a cash paymen and Credit Monitoring Service		ve to compensation for Out	-of-Pocket Losses, Lost Time
Section E. Class Member Affirm	nation		
By submitting this Claim Form, provided in this Claim Form and of the United States of America audit, verification, and Court revor additional information from m funds and may be reduced in par Administrator.	any attachments are true and that the foregoing is true and riew and that the Settlement A e. I also understand that all cl	correct. I declare under pen I correct. I understand that Administrator may require s aim payments are subject to	alty of perjury under the laws this claim may be subject to upplementation of this Claim the availability of settlemen
		M M	- - -
Signature		Date	
Printed Name			

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