

BUSINESS CLASS CLAIM FORM

Smith et al. v. Kaye-Smith Enterprises, Inc.
United States District Court for the District of Oregon
Cause No. 3:22-cv-01499-AR

Statement of Business Losses Arising from May-June 2022 Data Security Incident

The claims filing deadline is December 26, 2024.
Please provide complete responses to ALL of the following, and attach supporting documents.

1. Business Name:

Grid for Business Name input

Address:

Grid for Address input

City:

Grid for City input

State:

Grid for State input

ZIP Code:

Grid for ZIP Code input

Telephone:

Grid for Telephone input

Email:

Grid for Email input

2. Individual authorized to act on behalf of the Business:

First Name:

Grid for First Name input

Last Name:

Grid for Last Name input

Address:

Grid for Address input

City:

Grid for City input

State:

Grid for State input

ZIP Code:

Grid for ZIP Code input

Telephone:

Grid for Telephone input

Email:

Grid for Email input

Unique ID from Notice you received:

Grid for Unique ID input

3. Business Loss:

For each out-of-pocket cost or expenditure¹ the business incurred between May 22, 2022 and October 11, 2024 that arose out of the Data Security Incident,² and for which you are asserting a claim, please provide the information requested below. Do not include claims that you resolved with Kaye-Smith prior to October 19, 2023.

Please attach a photocopy of this page for each additional out-of-pocket costs or expenditures claimed.

a) Amount of loss or expenditure:

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b) Description of loss or expenditure:

c) Date(s) incurred:

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MM DD YYYY

[] [] - [] [] - [] [] [] []
MM DD YYYY

[] [] - [] [] - [] [] [] []
MM DD YYYY

d) Itemize and attach all documents evidencing loss or expenditure.

e) Legal basis for claim that Kaye-Smith is required to reimburse you for loss or expenditure (e.g. contract or specific correspondence). Attach all supporting documents.

f) Have you ever asserted a claim to Kaye-Smith for reimbursement arising from the Data Security Incident?

Yes No

If yes, please attach all supporting documents and state:

i) Date claim made:

[] [] - [] [] - [] [] [] []
MM DD YYYY

ii) Person to whom claim was communicated

¹ Such costs or expenditures may include: unreimbursed costs associated with fraud or identity theft, losses due to business interruption, reputational damage, costs incurred in securing alternative services, professional fees (e.g., attorneys, accountants), miscellaneous expenses (e.g., notary, fax, postage, copying, mileage, telephone charges), costs of notices sent to customers, costs of credit monitoring paid, call center costs, third party cyber consultant costs, and amounts paid to claims for reimbursement and/or indemnity.

² "Data Security Incident" means the incident that occurred between May 18, 2022, and June 2, 2022 in which a malicious actor gained access to certain Kaye-Smith computer files.

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g) Have you made efforts to mitigate the loss or expenditure?

Yes No

i) If yes, please describe the efforts taken and attach all supporting documents.

ATTESTATION

I affirm under the laws of the United States that the information supplied in this Claim Form is true and correct to the best of my knowledge, and any documents I submitted in support of my claim are true and correct copies of original documentation.

I understand that I may be asked to provide more information by the Claims Administrator before my claim is complete.

Signature

Date:

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MM DD YYYY

Print Name