Kaitlin Lamarr v. Goshen Health System, Inc. d/b/a Goshen Health Elkhart County Superior Court, State of Indiana Case No. 20D02-2404-PL-000090

Settlement Claim Form

If you are a Settlement Class Member and wish to receive a payment, your completed Claim Form must be postmarked on or before November 29, 2025, or submitted online on or before 11:59 p.m. EST on November 18, 2025.

The full Notice of this settlement is available at www.GoshenHealthPrivacySettlement.com.

To be eligible to receive cash benefits from the settlement obtained in this class action lawsuit, you must submit this completed and signed Claim Form online at www.GoshenHealthPrivacySettlement.com or by mail to P.O. Box 25226, Santa Ana, CA 92799.

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Please keep a copy of your Claim Form for your records.