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**Your Claim must
be submitted
online or
postmarked by:
September 8, 2025**

**CLAIM FORM FOR SYSCO CYBERSECURITY EVENT
LITIGATION**

Trottier, et al. v. Sysco Corporation

Case No. 4:23-cv-01818

United States District Court for the Southern District of Texas

SYSCO-C

GENERAL INSTRUCTIONS

You have been identified by the Claims Administrator as a Settlement Class Member who resides in the United States and to whom Sysco sent notice of the Cybersecurity Event in or around May 2023. You may submit a claim for a Settlement Class Member Benefit, outlined below.

Please refer to the Long Form Notice posted on the Settlement Website www.SyscoCybersecuritySettlement.com, for more information on submitting a Claim Form and if you are part of the Settlement Class.

To receive a settlement benefit from this settlement via an electronic payment, you must submit the Claim Form below electronically at www.SyscoCybersecuritySettlement.com by September 8, 2025.

This Claim Form may also be 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:

Sysco Cybersecurity Event Litigation
c/o Kroll Settlement Administration LLC
P.O. Box 5324
New York, NY 10150-5324

Settlement Class Members under the Settlement Agreement will be eligible to receive:

- ❖ **Reimbursement for Documented Out-of-Pocket Losses:** All Settlement Class Members may submit a claim for reimbursement of Documented Out-of-Pocket Losses **up to \$5,000** per individual. Documented Out-of-Pocket Losses are unreimbursed costs, losses, or expenditures incurred by a Settlement Class Member in responding to notice of the Cybersecurity Event or as a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of the Settlement Class Member's personal information that were incurred between May 12, 2023, and the Claims Deadline of **September 8, 2025; AND**
- ❖ **Residual Cash Payment:** All Settlement Class Members may claim a cash payment of **up to \$599**. While the amount of this payment depends upon the number of valid claims made, the amount of the cash payment is currently estimated to be between \$100 and \$200 per valid claim. The residual cash payment may be claimed in addition to a claim for Documented Out-of-Pocket Losses.

If the aggregate amount of Approved Claims for Documented Out-of-Pocket Losses exceeds the remaining amount of the Settlement Fund after payment for costs of Credit Monitoring Services, Costs of Claims Administration, service award payments approved by the Court, and attorneys' fees and expenses awarded by the Court, Approved Claims for Documented Out-of-Pocket Losses will be decreased *pro rata* to consume the remaining amount of the Settlement Fund. The Parties do not anticipate any *pro rata* decrease.

In addition to the above benefits, the settlement provides the following:

- ❖ **Credit Monitoring Services** – All Settlement Class Members may claim two (2) years of three-bureau identity theft protection and Credit Monitoring Services.



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I. PAYMENT SELECTION

If you would like to elect to receive your settlement benefit through electronic transfer, please visit the Settlement Website and timely file your Claim Form. The Settlement Website includes a step-by-step guide for you to complete the electronic payment option.

II. SETTLEMENT 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 Claim Form.

First Name

Last Name

Address 1

Address 2

City

State

Zip Code

Email Address: _____ @ _____

Telephone Number (optional): (_____) _____ - _____

III. PROOF OF CYBERSECURITY EVENT SETTLEMENT CLASS MEMBERSHIP

☐

Check this box to certify if you are an individual who resides in the United States and to whom Sysco sent notice of the Cybersecurity Event in or around May 2023.

Enter the Class Member ID Number provided on your Postcard Notice:

Class Member ID: 83196 _____

IV. REIMBURSEMENT FOR DOCUMENTED OUT-OF-POCKET LOSSES

All Settlement Class Members may submit a claim for reimbursement of Documented Out-of-Pocket Losses up to \$5,000 per individual. Documented Out-of-Pocket Losses are unreimbursed costs, losses, or expenditures incurred by a Settlement Class Member in responding to notice of the Cybersecurity Event that were incurred between May 12, 2023, and the Claims Deadline of **September 8, 2025**.

- Documented Out-of-Pocket Losses may include, without limitation, the following:
 - costs associated with accessing or freezing/unfreezing credit reports with any credit-reporting agency;
 - other miscellaneous expenses incurred related to any Documented Out-of-Pocket Loss such as notary, fax, postage, copying, mileage, and long-distance telephone charges;

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3. credit monitoring or other mitigative costs; and
 4. unreimbursed costs, losses, or expenditures incurred as a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of the Settlement Class Member's Personal Identifiable Information.
- Settlement Class Members who elect to submit a claim for reimbursement of Documented Out-of-Pocket Losses must provide the Claims Administrator the information required to evaluate the claim, including:
 1. the Settlement Class Member's name and current address;
 2. documentation supporting the unreimbursed cost, loss, or expenditure; and
 3. a brief description of the documentation describing the nature of the cost, loss, or expenditure, if the nature of the cost, loss, or expenditure is not apparent from the documentation alone.

Documentation supporting Documented Out-of-Pocket Losses can include receipts or other documentation not "self-prepared" by the Settlement 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 or support to other submitted documentation.

You must have documented Out-of-Pocket Losses incurred as a result of the Cybersecurity Event and submit documentation to obtain this benefit.

☐ I hereby attest under penalty of perjury that the unreimbursed costs, losses, or expenditures I am claiming were incurred as a result of the Cybersecurity Event.

Cost Type (Fill all that apply)	Approximate Date of Documented Out-of-Pocket Loss	Amount of Documented Out-of-Pocket Loss	Description of Supporting Reasonable Documentation (Identify what you are attaching and why)
Example: Identity Theft Protection Service	<u>07/17/20</u> (mm/dd/yy)	\$50.00	Copy of identity theft protection service bill
	<u> </u> / <u> </u> / <u> </u> (mm/dd/yy)	\$ <u> </u> . <u> </u>	
	<u> </u> / <u> </u> / <u> </u> (mm/dd/yy)	\$ <u> </u> . <u> </u>	
	<u> </u> / <u> </u> / <u> </u> (mm/dd/yy)	\$ <u> </u> . <u> </u>	

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V. RESIDUAL CASH PAYMENT

In addition to claiming Documented Out-of-Pocket Losses, you may also claim a Residual Cash Payment of up to \$599. While the amount of this payment depends upon the number of valid claims made, the amount of the Cash Payment is currently estimated to be between \$100 and \$200 per valid claim.

By checking the box below, I choose a Residual Cash Payment. **You may also submit a claim for reimbursement of Documented Out-of-Pocket Losses above.**

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Yes, I choose a Residual Cash Payment.

IN ADDITION TO THE PAYMENTS, YOU MAY ALSO SELECT THE SETTLEMENT BENEFIT BELOW

VI. CREDIT MONITORING SERVICES

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Two (2) years of Credit Monitoring Services

In addition to claims for Documented Out-of-Pocket Losses and a Residual Cash Payment, all Settlement Class Members may claim two (2) years of three-bureau identity theft protection and Credit Monitoring Services that will include the following features: (1) dark web scanning with user notification if potentially unauthorized use of a Settlement Class Member's personal information is detected; (2) identity theft insurance; (3) real-time credit monitoring with Equifax, Experian, and TransUnion; and (4) access to fraud resolution agents. **You may also select the cash payment benefits above.**

VII. ATTESTATION & SIGNATURE

I declare under penalty of perjury that the foregoing information I have supplied in this Claim Form is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

Signature

____/____/_____
Date

Print Name

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