

Your claim must
be submitted
online or
postmarked by:
October 8, 2025

Donald Vickery, et al. v. Family Health Center, Inc.

Case No. 2024-0404-NO

and

Janet Walker v. Family Health Center, Inc.

Case No. 2024-0407-CZ

DATA INCIDENT SETTLEMENT CLAIM FORM

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GENERAL INSTRUCTIONS

You are **included** in the Settlement Class and eligible to submit a claim if your private information was potentially accessible in the January 25, 2024 Data Incident experienced by Family Health Center, Inc. ("FHC").

Excluded from the Settlement Class are: (1) the Judge in the litigation, and the Judge's family and staff, (2) the governing board members of FHC, and (3) anyone who validly excludes themselves from the Settlement.

COMPLETE THIS CLAIM FORM IF YOU ARE A CLASS MEMBER AND WISH TO RECEIVE ONE OR BOTH OF THE FOLLOWING SETTLEMENT BENEFITS

AVAILABLE BENEFITS

You are not limited to one benefit. You may file a claim for Credit Monitoring Services and **one** of the cash payment options.

Credit Monitoring Services. All Class Members are eligible to receive two (2) years of Credit Monitoring Services from a credit bureau. These services include credit monitoring, dark web monitoring, identity theft insurance coverage for up to \$1,000,000, and fully managed identity recovery services. You may claim Credit Monitoring Services together with either of the Cash Payment options.

Cash Payment A – Documented Losses. If you incurred actual, documented out-of-pocket losses due to the Data Incident, you may file a claim for reimbursement. The maximum amount of this reimbursement is \$5,000.00.

1. This benefit covers expenses like:
2. bank, credit card, and debit card fees;
3. overdraft, declined payment, and returned check fees;
4. cost to replace your driver's license, Social Security number, or other types of identification;
5. fees for credit reports or credit monitoring; and
6. losses from identity theft.

You must submit documentation, such as receipts, to verify the costs you incurred. You may submit "self-prepared" documents to clarify or support other submitted documentation, but self-prepared documents by themselves are not sufficient to file a valid claim.

You may claim Cash Payment A together with Credit Monitoring Services.

Questions? Call 1-(833) 360-6849 Toll-Free or Visit www.FHCDataSettlement.com

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Cash Payment B – Flat Cash Payment. As an alternative to Cash Payment A, you can instead claim a \$50.00 flat cash payment. You do not need to provide documentation.

You may claim Cash Payment B together with Credit Monitoring Services.

If you have questions about these benefits, you can ask for free help any time by contacting the Settlement Administrator at:

- Email: **info@FHCDataSettlement.com**
- Call toll free, 24/7: **1-833-360-6849**
- By mail: FHC Data Incident Settlement, c/o Settlement Administrator, PO Box 25226, Santa Ana, CA 92799

**THE EASIEST WAY TO SUBMIT YOUR CLAIMS IS ONLINE AT
[www. FHCDataSettlement.com](http://www.FHCDataSettlement.com)**

You may also print out and complete this Claim Form, and submit it by U.S. mail to:

FHC Data Incident Settlement
c/o Settlement Administrator
PO Box 25226
Santa Ana, CA 92799

An electronic image of the completed Claim Form can also be submitted by email to **info@FHCDataSettlement.com**

The deadline to submit a Claim Form online is **October 8th, 2025**. If you are mailing your Claim Form, it must be mailed with a postmark date no later than **October 8th, 2025**.

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DATA INCIDENT SETTLEMENT CLAIM FORM

I. CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this claim form. All fields are required.

First Name

Last Name

Street Address

City

State

Zip Code

Email Address (required for Credit Monitoring)

Phone Number

Notice ID (if known)

II. CREDIT MONITORING SERVICES (AVAILABLE TO ALL CLASS MEMBERS)

☐ Check this box if you would like to receive two (2) years of credit monitoring by a credit bureau.

III. CASH PAYMENT A – DOCUMENTED LOSSES

☐ Check this box if you are claiming reimbursement for **documented** out-of-pocket losses that were incurred as a result of the Data Incident. **You must submit supporting documentation.** You may submit “self-prepared” documents to add clarity or support other submitted documentation, but self-prepared documents by themselves are **not sufficient** to file a valid claim.

The maximum amount for this reimbursement is \$5,000.00 per Class Member.

You may not claim Documented Losses if you are filing a claim for Flat Cash Payment.

Complete the table on the following page, describing the supporting documentation you are submitting.

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Description of Documentation Provided	Amount
Example: Overdraft fees	\$40
TOTAL OUT-OF-POCKET LOSSES:	

If you have more expenses than rows, you may attach additional sheets of paper to account for them. Please print your name and sign the bottom of each additional sheet of paper.

IV. CASH PAYMENT B – FLAT CASH PAYMENT

☐ Check this box if you would like to receive a \$50.00 Flat Cash Payment.

You may not claim a Flat Cash Payment if you are filing a claim for Documented Losses.

Questions? Call 1-(833) 360-6849 Toll-Free or Visit www.FHCDDataSettlement.com

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V. ATTESTATION & SIGNATURE

I swear and affirm that the information provided in this Claim Form, and any supporting documentation provided is true and correct to the best of my knowledge. I understand that my claim is subject to verification and that I may be asked to provide supplemental information by the Settlement Administrator before my claim is considered complete and valid.

Signature

Printed Name

Date