

***IF THE NTN POSTCARD CONCERNING YOU WAS SENT ON OR AFTER
JUNE 30, 2021, PLEASE USE THIS FORM.***

Clermont v. National Tenant Network, Inc. & LCIJ, Inc.; Case No: 2:23-cv-03545-MCA-LDW; United States District Court for the District of New Jersey

If you wish to participate in the Settlement and recover money from the Settlement Fund, please complete, sign, and return this Settlement Claim Form.

You must complete and submit a Claim Form by **September 22, 2026**. You must complete and submit this Claim Form for a share of the Settlement Fund. The final amount per Class Member will depend on, among other things, the total number of valid Claim Forms received and the Court's award of Attorney's Fees and Costs and an Incentive Award. To complete this form, provide the information below and execute the certification. All information is required.

Unique ID provided on mailed Postcard Notice:

[illegible]

First Name:

[illegible]

MI:

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Last Name:

[illegible]

Mailing Address, Line 1 (Street Address/P.O. Box):

[illegible]

Mailing Address, Line 2:

[illegible]

City:

[illegible]

State:

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ZIP Code:

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Email Address:

[illegible]

Certification

By signing and submitting this Claim Form, I certify and affirm that the information I am providing is true and correct to the best of my knowledge and belief, I am over the age of 18, and I wish to claim my share of the Settlement Fund.

$$\begin{array}{|c|c|} \hline & \\ \hline \end{array} - \begin{array}{|c|c|} \hline & \\ \hline \end{array} - \begin{array}{|c|c|} \hline & \\ \hline \end{array}$$

MM

DD

YY

Signature:

Print Name:

FOR MORE INFORMATION OR TO SUBMIT A CLAIM FORM, VISIT NTNPostcardSettlement.com