Must be postmarked or submitted online NO LATER THAN November 29, 2026

Blank Rome Settlement
SETTLEMENT ADMINISTRATOR
P.O. BOX 3326
PORTLAND, OR 97208-3326
www.BRPrivacySettlement.com

ANTHONY SANTANA v. BLANK ROME LLP CLAIM FORM

Case No. CACE-26-011862

GENERAL INFORMATION

If you are a living individual identified in the Class List and residing in the United States whose Private Information may have been impacted in the Data Incident involving Blank Rome LLP in May 2026, you may be entitled to Settlement Class Member Benefits from a Settlement.

Class List means the list of Settlement Class Members' names and postal addresses and/or email addresses, if maintained by the Defendant, that Defendant will prepare and provide to the Settlement Administrator after Preliminary Approval.

You may submit a Claim Form for a cash payment, outlined below, by visiting the Settlement Website at www.BRPrivacySettlement.com. Claims must be submitted online or postmarked by November 29, 2026. If you would prefer to submit by mail, please use the return address at the top of this form.

The easiest way to submit a Claim is online at www.BRPrivacySettlement.com, or you can print out, complete, and mail this entire Claim Form (with any required documentation) to the mailing address above. **Claims must be submitted online or mailed by November 29, 2026. If you would prefer to submit by mail, please use the address at the top of this form.**

SETTLEMENT CLASS MEMBER BENEFITS – WHAT YOU MAY GET

If you are a Settlement Class Member, you can submit a Claim Form for the following cash payments:

1. **Cash Payment Option 1 – Documented Losses**: Up to $3,000 for reasonable documented losses related to fraud and/or identity theft as a result of the Data Incident. You *must* provide documentation of your losses with your Claim;

   AND

2. **Cash Payment Option 2 – Cash Payment**: A pro rata (a legal term meaning equal share) cash payment. You do *not* need to provide documentation of your losses with your Claim.

Credit Monitoring: You will automatically receive one year of free Credit Monitoring. The Credit Monitoring activation code will be provided on your settlement notice, and can be activated after final settlement approval.

Your Cash Payment may be subject to a *pro rata* (a legal term meaning equal share) increase or decrease depending upon the total value of all Valid Claims submitted.

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Please note: the Settlement Administrator may contact you to request additional documents to process your Claim.

For more information and complete instructions visit the Settlement Website at **www.BRPrivacySettlement.com**.

Please note that Settlement Class Member Benefits will be distributed after the Settlement is approved by the Court and becomes final.

Questions? Go to **www.BRPrivacySettlement.com** or call **1-877-293-8724**.

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Contact Information

1. NAME (REQUIRED):

First Name | MI | Last Name

2. MAILING ADDRESS (REQUIRED):

Street Address

Apt. No.

City | State | ZIP Code

3. PHONE NUMBER:

___ – ___ – ____

4. EMAIL ADDRESS:

5. UNIQUE ID:

Credit Monitoring

Without submitting a Claim, you will receive an activation code for one year of free Credit Monitoring services. Credit Monitoring activation codes are located on your settlement notice. Please keep your notice, as you will only be able to activate the free Credit Monitoring after final settlement approval.

After final approval, go to www.BRPrivacySettlement.com or call toll-free 1-877-293-8724 for instructions on how to activate your Credit Monitoring.

Cash Payment Option 1 – Documented Losses

You may submit a Claim Form with reasonable documentation for losses related to fraud and/or identity theft as a result of the Data Incident for up to $3,000 per Settlement Class Member.

"Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to clarify or support other submitted documentation.

You will not be reimbursed for expenses if you have been reimbursed for the same expenses by another source, including payment provided in connection with any credit monitoring and identity theft protection product offered or through a financial institution's consumer fraud policies.

If you do not submit reasonable documentation supporting your loss, or if the Settlement Administrator determines your Claim Form is incomplete, and you do not fix your Claim Form, your Claim Form will be denied and your Claim for Cash Payment Option 1 – Documented Losses will instead be processed as if you selected Cash Payment Option 2 –Cash Payment.

To look up more details about how the Cash Payments work, visit **www.BRPrivacySettlement.com** or call toll-free **1-877-293-8724**. *By filling out the boxes below, you are certifying that the money you spent does not relate to other data incidents or breaches.*

Expense Type and Examples of Documents	**Amount and Date**	**Description of Expense or Money Spent and Supporting Documents** (Identify what you are attaching, and why it is related to the Data Incident)
Professional fees incurred that are related to fraud and/or identity theft as a result of the Data Incident, such as falsified tax returns and account fraud. *Examples: Receipts, notices, or account statements reflecting payment for a credit freeze or unfreezing.*	$ ☐☐☐☐☐ • ☐☐ Date: ☐☐ – ☐☐ – ☐☐☐☐ MM DD YYYY	_____ _____ _____
Other losses or costs that are related to fraud and/or identity theft as a result of the Data Incident. *Examples: Account statement with unauthorized charges circled; bank fees, and fees for credit reports, credit monitoring, or other identity theft insurance products purchased.*	$ ☐☐☐☐☐ • ☐☐ Date: ☐☐ – ☐☐ – ☐☐☐☐ MM DD YYYY	_____ _____ _____
Other miscellaneous expenses such as notary, fax, postage, copying, mileage, and/or long-distance telephone charges related to fraud and/or identity theft as a result of the Data Incident. *Examples: Phone bills, receipts, detailed list of addresses you traveled (i.e. police station, IRS office), reason why you traveled there (i.e. police report or letter from IRS re: falsified tax return) and number of miles you traveled.*	$ ☐☐☐☐☐ • ☐☐ Date: ☐☐ – ☐☐ – ☐☐☐☐ MM DD YYYY	_____ _____ _____

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Cash Payment Option 2 – Cash Payment

In addition to Cash Payment Option 1 – Documented Losses, without documentation, you may submit a Claim Form to receive a *pro rata* (a legal term meaning equal share) cash payment.

☐ **By checking this box, I affirm I want to receive Cash Payment Option 2 – Cash Payment.**

Payment Election

Please fill out **ONLY ONE** of the payment options below.

#1 Digital Payment Account – Payment Option

☐ PayPal ☐ Venmo ☐ Zelle

*Provide the email **OR** phone number, **NOT** both, associated with your selected digital payment account.*

Email Address

OR Phone Number

			–				–				

#2 Physical Check to be Sent by Mail – Payment Option

Sent by mail to the address on this Claim.

☐ Physical Check

If you select more than one payment option, you will be mailed a check.

Signature

I attest under penalty of perjury and under the laws of the United States that the information I have supplied in this Claim Form and any copies of documents that I am sending to support my Claim are true and correct to the best of my knowledge.

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

Signature

Date ☐☐ – ☐☐ – ☐☐☐☐
MM DD YYYY

Print Name

Questions? Go to **www.BRPrivacySettlement.com** or call **1-877-293-8724**.