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Avalos v. AxleHire, Inc. Claim Form

If, while residing or located in California, you placed a call to AxleHire, Inc.'s customer service telephone number (855-249-7447) and/or received a call from AxleHire, Inc.'s customer service department at any time during the period from and including October 27, 2021, through May 10, 2023, you may be entitled to money from a class action settlement.

Claim Forms must be **submitted by February 19, 2024**, if completed online at www.AHCallRecordingSettlement.com. Claim Forms submitted by U.S. mail must be **postmarked no later than the Claims Deadline of February 19, 2024**, to the following:

Avalos v. AxleHire, Inc.
c/o Kroll Settlement Administration LLC
PO Box 225391
New York, NY 10150-5391

Claimant Information

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Email Address (Optional): _____ @ _____

(If you provide an email address, the Claims Administrator will use it to communicate with you about any questions it has about your claim. We recommend that you provide an email address, but it is not required.)

Class Member ID: 7 5 1 7 1 _____

(Your Class Member ID is located on your postcard and/or email notice. If you cannot locate your Class Member ID, contact the Claims Administrator by submitting a Contact Form on the Settlement Website, www.AHCallRecordingSettlement.com, by telephone (833) 933-7411 or by mail at the address listed above, to request your Class Member ID.)

Claim Instructions

To complete this Claim Form, provide all of the telephone number(s) you used to call AxleHire, Inc.'s customer service telephone number (855-249-7447) and/or received call from AxleHire, Inc.'s customer service department at any time during the period from and including October 27, 2021, through May 10, 2023.

(_____) - _____ - _____ , (_____) - _____ - _____

(_____) - _____ - _____ , (_____) - _____ - _____

Certification: By signing below, I certify to my best honest belief that when I placed one or more calls to the AxleHire, Inc.'s customer service telephone number (855-249-7447) and/or received one or more calls from AxleHire, Inc.'s customer service department during the period from and including October 27, 2021, through May 10, 2023, I was located within the State of California.

Signature: _____ Date (mm/dd/yyyy) _____ / _____ / _____

NOTE: To receive a settlement payment of \$600.00 or more, you must provide your Tax Identification Number ("TIN") to the Claims Administrator pursuant to the instructions below. If you do not provide your TIN to the Claims Administrator and otherwise would be entitled to a settlement payment of \$600.00 or more, you may have an amount deducted from your settlement payment to comply with IRS Regulations. It is recommended that you provide your TIN with your Claim Form by filling out the form below.

Please contact a professional tax advisor or other qualified financial counselor with any questions concerning taxes, as neither Counsel nor the Claims Administrator can offer tax advice.



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SUBSTITUTE FORM W-9 REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

TAXPAYER IDENTIFICATION NUMBER

Name (as shown on your income tax return): _____

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

Enter your Employer Identification Number: -

or

Enter your Social Security Number: - -

CERTIFICATION

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

W-9 Signature

___/___/___
W-9 Signature Date

Note: If you have been notified by the IRS that you are subject to backup withholding, you must cross out item 2 above. The IRS does not require your consent to any provision of this document other than this Form W-9 certification to avoid backup withholding.

RETURN THIS FORM BY REGULAR MAIL TO:

Avalos v. AxleHire, Inc.
c/o Kroll Settlement Administration LLC
PO Box 225391
New York, NY 10150-5391



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TIN



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