

## CLAIM FORM

### **I. Your Information**

Please clearly print or type your information in the spaces below:

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address (Optional): \_\_\_\_\_

### **II. Please provide either: (1) an original or copy of your customer receipt, OR (2) an original or copy of your credit or debit card statement**

You must provide proof in either one of the following two ways:

**Option (1):** You may attach an original or a copy of your customer receipt that contains the expiration date of your credit or debit card and shows that you made a transaction from Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015;

**OR**

**Option (2):** You may attach an original or a copy of your credit or debit card statement showing that you made a transaction at Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015. Before providing your statement or copy of your statement, please redact (meaning you may white-out or mark-over) information contained in your credit or debit card statement to prevent it from showing things like your account numbers, your other purchases, etc. The only information that is required to show on your statement for purposes of making a claim under this Settlement is your name, address, and all of the details of your transaction from Pick-A-Part, including the date and amount of your purchase.

You may make only one claim regardless of whether you have made one or more than one eligible credit or debit card transaction. Accordingly, if you had more than one eligible transaction you only need to provide proof of either one receipt or one statement showing that you made one credit or debit card transaction at Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015.

### **III. Please Sign This Form**

I declare that the facts stated in this Claim Form are true and accurate.

Signature: \_\_\_\_\_

## **INSTRUCTIONS FOR THE CLAIM FORM**

### **I. Deadline For Returning Your Completed Claim Form**

In order to receive any benefits, you must complete and return the attached Claim Form **by no later than July 14, 2018**. You may submit the Claim Form by U.S. mail, fax, or on-line submission.

If you are mailing the Claim Form, your completed Claim Form (together with the required documentation) must be mailed to the following address **postmarked no later than July 14, 2018**:

Receipts FACTA Settlement  
c/o Atticus Administration  
P.O. Box 1440  
Minneapolis, MN 55440

You may also send your Claim Form (together with the required documentation) by facsimile to the following facsimile number 1-844-728-8428, **by no later than 11:59 p.m. Pacific Time on July 14, 2018**.

You may also submit your claim by completing and submitting an electronic version of the Claim Form (and uploading and submitting the required documentation) on the internet at [www.ReceiptsFACTASettlement.com](http://www.ReceiptsFACTASettlement.com), **by no later than 11:59 p.m. Pacific Time on July 14, 2018**.

### **II. You Must Complete Section I Of The Claim Form**

You must complete Section I entitled "Your Information" by clearly printing or typing your information in the appropriate spaces. You must complete all of the spaces, except for your E-mail address which is optional.

### **III. You Must Also Provide The Necessary Document With Your Claim Form**

As explained in Section II of the Claim Form, you must provide proof **in either one of the following two ways**:

**Option (1)**: You may attach an original or a copy of your customer receipt that contains the expiration date of your credit or debit card and shows that you made a transaction from Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015;

**OR**

**Option (2)**: You may attach an original or a copy of your credit or debit card statement showing that you made a transaction at Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015. Before providing your statement or copy of your statement, please redact (meaning you may white-out or mark-over) information contained in your credit or debit card statement to prevent it from showing things like your account numbers, your other purchases, etc. The only information that is required to show on your statement for purposes of making a claim under this Settlement is your name, address, and all of the details of your transaction from Pick-A-Part, including the date and amount of your purchase.

You may make only one claim regardless of whether you have made one or more than one eligible credit or debit card transaction. Accordingly, if you had more than one eligible transaction you only need to provide proof of either one receipt or one statement showing that you made one credit or debit card transaction at Pick-A-Part at any time during the period December 22, 2014 to October 28, 2015.

Although you may submit either the original or a copy of either your receipt or card statement, if you decide to send an original, it is encouraged that you make and keep a copy for yourself. We will not be responsible for original documents that are lost.

**IV. You Must Sign In The Space Provided In Section III Of The Claim Form**

You must also sign the Claim Form in the space provided in Section III of the Claim Form.