

**CLAIM FORM**

*Cimino et al. v. ETZ Hayim Holdings, S.P.C., d/b/a Lazarus Naturals*, Case No. 3:23-cv-01185-JR  
United States District Court for the District of Oregon

**The DEADLINE to submit or mail this Claim Form is: October 16, 2024**

**GENERAL INSTRUCTIONS**

This class action litigation arose from a data security incident involving ETZ Hayim Holdings, S.P.C., d/b/a Lazarus Naturals (“ETZ”) between March 1 and June 2, 2023 that was perpetrated by an unauthorized third party that potentially accessed unencrypted and unredacted name, billing and shipping address, and financial information, such as credit or debit card information (including card number, expiration date and printed card security code) of certain current and former ETZ customers (the “Data Incident”). If you received a notice about this class action Settlement addressed to you, then the Settlement Administrator has already determined that you are a Settlement Class Member.

As a Settlement Class Member, you are eligible to receive compensation for unreimbursed documented losses or, alternatively, a cash award.

**CLAIMANT INFORMATION**

The Settlement Administrator will use this information for all communications regarding this Claim Form and the Settlement. If this information changes before the Settlement benefits are issued, you must notify the Settlement Administrator.

First Name M.I. Last Name

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Alternative Name(s)

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

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Mailing Address, Line 2:

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City: State: Zip Code:

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Telephone Number (Home) Telephone Number (Mobile)

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Email Address

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Claim Number Provided on mailed Notice or Obtained from Settlement Administrator

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**BENEFIT SELECTION**

**You may choose to claim either the documented monetary loss payment OR a cash award. You may only choose either Category A or Category B below.**

**A. Documented Loss Payment**

All members of the Settlement Class who submit a Valid Claim using this Claim Form are eligible for reimbursement of the following **documented** out-of-pocket losses, not to exceed \$5,000 per member of the Settlement Class, that were incurred as a result of the Data Incident:

Cost Type (Fill all that apply)	Approximate Date of Loss	Amount of Loss
<input type="radio"/> Out-of-pocket expenses incurred as a result of the Data Incident, including bank fees, long distance phone charges, cell phone charges (only if charged by the minute), data charges (only if charged based on the amount of data used), postage, or gasoline for local travel.	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           [ ] [ ] / [ ] [ ] / [ ] [ ]            (mm/dd/yy)         </div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           \$ [ ] [ ] [ ] [ ] [ ] [ ] . [ ] [ ]         </div>
<p><b>Examples of Supporting Third Party Documentation:</b> Telephone bills, cell phone bills, gas receipts, postage receipts, bank account statements reflecting out-of-pocket expenses. Please note that these examples of reimbursable documented out-of-pocket losses are not meant to be exhaustive, but exemplars. You may make claims for any documented out-of-pocket losses that you believe are reasonably related to the Data Incident or to mitigating the effects of the Data Incident.</p>		
<input type="radio"/> Fees for credit reports, credit monitoring or other identity theft insurance products purchased between March 13, 2023 through the close of the Claims Period October 16, 2024.	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           [ ] [ ] / [ ] [ ] / [ ] [ ]            (mm/dd/yy)         </div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           \$ [ ] [ ] [ ] [ ] [ ] [ ] . [ ] [ ]         </div>
<p><b>Examples of Supporting Documentation:</b> Receipts or account statements reflecting purchases made for Credit Monitoring or Identity Theft Insurance Services.</p>		
<input type="radio"/> Compensation for proven monetary loss, professional fees including attorneys' fees, accountants' fees, and fees for credit repair services incurred as a result of the Data Incident.	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           [ ] [ ] / [ ] [ ] / [ ] [ ]            (mm/dd/yy)         </div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           \$ [ ] [ ] [ ] [ ] [ ] [ ] . [ ] [ ]         </div>
<p><b>Examples of Supporting Documentation:</b> Invoices or statements reflecting payments made for professional fees/services.</p>		
<input type="radio"/> Loss expenses resulting from fraud or identity theft that occurred as a result of the Data Incident.	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           [ ] [ ] / [ ] [ ] / [ ] [ ]            (mm/dd/yy)         </div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">           \$ [ ] [ ] [ ] [ ] [ ] [ ] . [ ] [ ]         </div>
<p><b>Examples of Supporting Documentation:</b> Bank statements, credit card statement, letters from the IRS or other tax authorities, letters from state unemployment agencies, and police reports.</p>		

