

# **EXHIBIT D**

Front of Short Notice

Claims Administrator  
In re Great Expressions Data Security Incident Litigation  
PO Box TBD  
[CITY/STATE/ZIP]

Unique ID: <Unique ID>

Legal Notice

If you are an individual U.S. resident to whom ADG, LLC d/b/a Great Expressions Dental Centers and Great Expressions Dental Centers, P.C. (collectively, “Defendants”) sent notice of a Data Security Incident, a class action settlement may affect your rights.

Back of Short Notice

A proposed Settlement has been reached in a class action lawsuit titled, *In re Great Expressions Data Security Incident Litigation*, No. 2:23-cv-11185 (E.D. Mich.) (the “Lawsuit”). The lawsuit asserts claims against Defendants related to a data security incident that occurred in February 2023 (the “Data Security Incident”). Defendants notified potentially impacted individuals beginning in May 2023.

**Who is Included?** Records indicate that you may be a member of the SSN Subclass. The SSN Subclass is defined by the Court as all individual U.S. residents to whom Defendants sent notice that their personal information was potentially impacted in the Data Security Incident and whose Social Security numbers were potentially accessed or acquired in the Data Security Incident.

**What does the Settlement Provide?** The proposed Settlement would create a Settlement Fund of \$2,700,000.00 that would be used to pay all costs of the Settlement, including: (1) reimbursement for Ordinary Out-of-Pocket Losses and Attested Time (SSN Subclass Members only); (2) reimbursement for Extraordinary Losses (SSN Subclass Members only); (3) Cash Payments of up to \$500 (SSN Subclass Members only); (4) reimbursement for Non-SSN Attested Time (Non-SSN Subclass Members only); (5) notice and administration costs; (6) service award payments, as may be approved by the Court (up to \$2,500.00 each); and (7) attorneys’ fees (up to one third of the Settlement Fund or \$900,00.00) and expenses (up to \$25,000.00), as may be awarded by the Court. The Settlement also releases all claims or potential claims of Settlement Class Members against Defendants arising from or related to the Data Security Incident, as detailed in the Class Settlement Agreement and Release.

**How To Get Benefits:** SSN Subclass Members who submit valid claims and any required documentation may receive one or more of the following, to be paid from the Settlement Fund: (1) **a Cash Payment of up to \$500.00**, (2) Reimbursement of Ordinary Out-of-Pocket Losses up to \$500 per individual, including Attested Time for up to 2 hours of time spent responding to the Data Security Incident at a rate of \$20 per hour, (3) Reimbursement of Extraordinary Losses up to \$5,000 per individual. Depending on how many valid claims are submitted, the amounts of the

reimbursements and Cash Payments will be adjusted upward (to the maximum amounts described above) or downward proportionally among Settlement Class Members submitting valid claims. Claim Forms must be postmarked or submitted online at **TBD** by **TBD**.

**Your Other Options.** If you do not want to be legally bound by the Settlement, you must exclude yourself by **TBD**. If you do not exclude yourself, you will give up any right to sue Defendants for the claims that this Settlement resolves as more fully described in the Settlement Agreement, available at the Settlement website. If you do not exclude yourself, you may object to the Settlement by **TBD**.

The Court has scheduled a Final Fairness Hearing in this case for **TBD**, to decide whether to approve the Settlement. The Court will consider whether the Settlement is fair, reasonable, and adequate. If there are timely objections, the Court will consider them and will listen to people who have properly requested to speak at the hearing. You or your own lawyer may attend and ask to appear at the hearing, but you are not required to do so. The hearing could reschedule to a different date or time, so please check the Settlement website for those details.

**More Information.** Complete information about your rights and options, as well as important documents (including the Settlement Agreement) are available at **TBD**. You may also call toll-free **TBD**.

Front of Tear-Off Claim Form (Postage Prepaid)

Claims Administrator  
In re Great Expressions Data Security Incident Litigation  
PO Box **TBD**  
**[CITY/STATE/ZIP]**

Claim for a Cash Payment

Unique ID: <Unique ID>

Back of Tear-Off Claim Form (Postage Prepaid)

***Tear-Off Claim Form for SSN Subclass Claims That Do Not Require Documentation***

Claims for **a Residual Cash Payment of up to \$500** or Ordinary Attested Time do not require documentation and may be submitted using this tear-off claim form, for which the postage is prepaid.

Please select below the claim(s) you would like to make (insert an “X” in the box):

**I would like a Cash Payment of up to \$500**

**I attest under penalty of perjury that I spent  1 Hour  2 Hours of time responding to receiving notice of the Data Security Incident.**

**Below is a brief description of (1) the actions I took in response to the Data Security Incident; and (2) the time associated with each action:**

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**Select from one of the following payment methods:**

PayPal    Venmo    Zelle    Virtual Prepaid Card    Check

Please provide the email address or phone number associated with your PayPal, Venmo, or Zelle account, or an email address for the Virtual Prepaid card:

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Claims for Reimbursement of Ordinary Out-of-Pocket Losses and/or Extraordinary Losses require supporting documentation and cannot be made using this tear-off claim form. Any such claims

should be submitted through the settlement website at **TBD** or by mailing a completed full claim form (available on the settlement website) and supporting documentation to the settlement administrator.

Verification & Signature: I swear under penalty of perjury under the laws of the United States that the information in this Claim Form is true and correct to the best of my knowledge and belief.

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

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**Who is Included?** Records indicate that you may be a member of the Non-SSN Subclass. The Non-SSN Subclass is defined by the Court as all individual U.S. residents to whom Defendants sent notice that their personal information was potentially impacted in the Data Security Incident but whose Social Security numbers were not potentially accessed or acquired in the Data Security Incident.

**What does the Settlement Provide?** The proposed Settlement would create a Settlement Fund of \$2,700,000.00 that would be used to pay all costs of the Settlement, including: (1) reimbursement for Ordinary Out-of-Pocket Losses and Attested Time (SSN Subclass Members only); (2) reimbursement for Extraordinary Losses (SSN Subclass Members only); (3) Cash Payments of up to \$500 (SSN Subclass Members only); (4) reimbursement for Non-SSN Attested Time (Non-SSN Subclass Members only); (5) notice and administration costs; (6) service award payments, as may be approved by the Court (up to \$2,500.00 each); and (7) attorneys’ fees (up to one third of the Settlement Fund or \$900,000.00) and expenses (up to \$25,000.00), as may be awarded by the Court. The Settlement also releases all claims or potential claims of Settlement Class Members against Defendants arising from or related to the Data Security Incident, as detailed in the Class Settlement Agreement and Release.

**How To Get Benefits:** Non-SSN Subclass Members who submit valid claims and any required documentation may receive payment for Non-SSN Attested Time for up to 2 hours of time spent responding to the Data Security Incident at a rate of \$20 per hour. Depending on how many valid claims are submitted, the amounts of the Non-SSN Attested Time payments will be adjusted upward (to the maximum amounts described above) or downward proportionally among

Settlement Class Members submitting valid claims. Claim Forms must be postmarked or submitted online at **TBD** by **TBD**.

**Your Other Options.** If you do not want to be legally bound by the Settlement, you must exclude yourself by **TBD**. If you do not exclude yourself, you will give up any right to sue Defendants for the claims that this Settlement resolves as more fully described in the Settlement Agreement, available at the Settlement website. If you do not exclude yourself, you may object to the Settlement by **TBD**.

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Claim for a Cash Payment

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Please select below the claim(s) you would like to make (insert an "X" in the box):

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Please provide the email address or phone number associated with your PayPal, Venmo, or Zelle account, or an email address for the Virtual Prepaid card:

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Verification & Signature: I swear under penalty of perjury under the laws of the United States that the information in this Claim Form is true and correct to the best of my knowledge and belief.

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

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_