

Exhibit E

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**Your claim must
be submitted
online or
postmarked by:
Month XX, 2026**

CLAIM FORM

In re TRC Staffing Services, Inc. Data Breach Litigation
Case No. 1:24-cv-02398-VMC
U.S. District Court for the Northern District of Georgia



GENERAL INSTRUCTIONS

If you received Notice of this Settlement, the Settlement Administrator identified you as a Settlement Class Member whose personal information may have been exposed in the Data Incident. You may submit a Claim for Settlement Class Member Benefits as outlined below.

Please refer to the Detailed Notice posted on the Settlement Website [www.\[website\].com](http://www.[website].com) for more information.

To receive a Cash Payment from the Settlement, you must submit a Claim Form by Month XX, 2026.

Claim Forms must be submitted electronically on the Settlement Website by 11:59 p.m. ET on the Claim Form Deadline above or by mail, postmarked by the Claim Form Deadline. This Claim Form may be mailed to the address below. Please type or legibly print all requested information in blue or black ink. Mail your completed Claim Form, including any supporting documentation, by U.S. mail to:

In re TRC Staffing Services, Inc. Data Breach Litigation
c/o Kroll Settlement Administration LLC
P.O. Box 5324
New York, NY 10150-5324

You may submit a claim to receive one of the following:

- **Cash Payment for Monetary Losses and/or Lost Time:** Reimbursement for up to \$5,000 per Settlement Class Member for documented out-of-pocket losses related to the Data Incident and/or up to four (4) hours (at \$20 per hour) for time spent responding to the Data Incident. See Sections III and IV.
- OR
- **Alternative Pro Rata Cash Payment:** A *pro rata* (proportional) cash payment of up to \$200. No documentation is required. The amount of this payment may be adjusted *pro rata* based on the amount of Approved Claims for Cash Payments for Monetary Losses and/or Lost Time. See Section V.

I. SETTLEMENT CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

First Name

Last Name

Address 1

Address 2

City

State

Zip Code

Telephone Number: () -

Email Address: @

Class Member ID: 0 0 0 0 0 _____

II. PAYMENT SELECTION

Cash Payments for Valid Claims submitted using this paper Claim Form will be issued by mailed check. If you prefer to receive your Cash Payment through electronic transfer, you must file your Claim electronically on the Settlement Website.

III. CASH PAYMENT FOR MONETARY LOSSES

You may submit a claim for a Cash Payment for documented out-of-pocket losses for up to \$5,000 per Settlement Class Member for unreimbursed costs you incurred that are fairly traceable to the Data Incident. Eligible Monetary Losses include, but are not limited to, the following: (i) unreimbursed costs, expenses, losses or charges incurred a result of identity theft or identity fraud, falsified tax returns, or other misuse of your personal information; (ii) costs incurred on or after March 25, 2024, associated with purchasing or extending additional credit monitoring or identity theft protection services and/or accessing or freezing/unfreezing credit reports with any credit reporting agency; and (iii) other miscellaneous expenses incurred related to any Monetary Losses such as notary, fax, postage, copying, mileage, and long-distance telephone charges.

Under the Settlement, you cannot be reimbursed for Monetary Losses if you have already been reimbursed for the same losses by another source, including compensation provided in connection with the identity protection and credit monitoring services offered as part of the notification letter provided by the Defendant or otherwise.

To receive reimbursement, you must submit a Claim Form with “reasonable documentation” to support your claim. Reasonable documentation can include third-party documentation such as receipts or other documentation that demonstrates the costs incurred. “Self-prepared” documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

If you do not submit reasonable documentation supporting a claim for Monetary Losses, or if your claim is rejected by the Settlement Administrator for any reason, and you fail to cure your claim, it will be rejected and will be considered a claim for an Alternative Pro Rata Cash Payment. Check the box below to confirm you are claiming a Cash Payment for Monetary Losses and have included the necessary documentation.

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I want to claim at Cash Payment for Monetary Losses, and I have attached documentation showing that the documented losses listed on this Claim Form are fairly traceable to the Data Incident.

Cost Type (Fill all that apply)	Approximate Date of Loss	Amount of Loss	Description of Supporting Documentation (Identify what you are attaching and why)
Example: Credit Monitoring Service	10/17/25 (mm/dd/yy)	\$50.00	Copy of credit monitoring service bill
	— / — / — (mm/dd/yy)	\$ _____.	
	— / — / — (mm/dd/yy)	\$ _____.	

Cost Type (Fill all that apply)	Approximate Date of Loss	Amount of Loss	Description of Supporting Documentation (Identify what you are attaching and why)
	— — / — — / — — (mm/dd/yy)	\$ _____.	

IV. LOST TIME

If you are submitting a claim for a Cash Payment for Monetary Losses, you may also claim a Cash Payment for up to four (4) hours of Lost Time (at \$20 per hour) per Settlement Class Member. Check the box below to confirm you want to claim a Cash Payment for Lost Time and provide the appropriate number of hours you are claiming.

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I want to claim a Cash Payment for time spent responding to the Data Incident as follows:

☐ 1 Hour

☐ 2 Hours

☐ 3 Hours

☐ 4 Hours

In order to receive this payment, you must describe what you did and how the claimed lost time was spent related to the Data Security Incident. Examples of compensable lost time include: Investigating credit history for potential fraudulent transactions; communicating with credit reporting bureaus; communicating with bank/credit card customer service lines regarding potential fraudulent transactions, changing cards or accounts; time on the internet addressing potentially fraudulent transactions; and time on the internet investigating identity theft or credit protection measures, products or services.

Please describe how the time spent was related to the Data Security Incident:

V. ALTERNATIVE PRO RATA CASH PAYMENT

In lieu of the Cash Payments for Monetary Losses and/or Lost Time, you may submit a claim for a Pro Rata Cash Payment of up to \$200. No documentation is required. If your claim is approved, you will receive a *pro rata* (proportional) share of the remaining balance of the Settlement Fund after Settlement Administration Costs, attorneys' Fee and Costs Award are deducted and payments for Approved Claims for Monetary Losses and Lost Time have been made.

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I want to claim an Alternative Pro Rata Cash Payment for up to \$200.

VI. ATTESTATION & SIGNATURE

By signing below, I swear and affirm under the laws of the United States that the information I have supplied in this Claim Form is true and correct to the best of my recollection.

Signature

____/____/____
Date (mm/dd/yyyy)

Print Name

Reminder:

If your address changes or you need to correct or update to the address you provide on this Claim Form, please call (XXX) XXX-XXXX or visit the “Contact Us” section of the Settlement Website [www.\[website\].com](http://www.[website].com) and provide your updated address information. Make sure to include your Class Member ID and your phone number in case we need to contact you in order to complete your request.

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