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

CLAIM FORM

Stern, et al. v. Academy Mortgage Corporation
Case No.: 2:24-cv-00015-DBB-DAO
United States District Court for the District of Utah

GENERAL INSTRUCTIONS

If you received Notice of this Settlement, the Claims Administrator identified you as a Settlement Class Member whose personally identifiable information ("PII" or "Personal Information") may have been impacted in the Data Incident. You may submit a Claim for Settlement Class Member benefits as outlined below. The Settlement Class consists of all living persons residing in the United States who were notified by Defendant that their Persona Information may have been impacted in the Data Incident. Please refer to the Long Notice posted on the Settlement Website www.[website].com for more information.

To receive Settlement Class Member benefits, you must submit a Claim Form by Month XX, 2026.

Claim Forms must be submitted electronically on the Settlement Website by the Claims Deadline above or by U.S. Mail, postmarked by the Claims 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:

Stern, et al. v. Academy Mortgage Corporation
c/o Kroll Settlement Administration LLC
P.O. Box XXXX
New York, NY 10150-XXXX

Settlement Class Members may submit a Claim to receive one or all of the following benefits:

- **Reimbursement for Documented Losses:** A cash payment for up to $3,000 per Settlement Class Member for documented unreimbursed losses reasonably related to the Data Incident or to mitigating the effects of the Data Incident. Documentation is required. See Section III.
- **Pro Rata Cash Payment:** A one-time *pro rata* (proportional) cash payment. No documentation is required. The payment amount will be determined based on the number of the Valid Claims submitted. California residents who submit a sworn attestation as proof of California residency during the Claims Period will receive a one-time cash payment that is double the amount of the Pro Rata Cash Payment. See Section IV.
- **Credit Monitoring:** Three (3) years of credit monitoring, including one-bureau credit monitoring, dark web monitoring, identity theft insurance with coverage of up to $1,000,000, and fully managed identity recovery services. See Section V.

I. SETTLEMENT CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Claims 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: _____@_____

II. PAYMENT SELECTION

If you would like to receive your payment through electronic transfer, please visit the Settlement Website (**www.[website].com**) and timely submit your Claim Form online on or before **Month XX, 2026**. The Settlement Website includes a step-by-step guide for you to complete the electronic payment option. If you submit this Claim Form by mail, you will receive your payment by check.

III. CASH PAYMENT FOR DOCUMENTED LOSSES

You may submit a Claim Form for reimbursement of up to $3,000 per Settlement Class Member for documented, unreimbursed losses reasonably related to the Data Incident or to mitigating the effects of the Data Incident. To receive reimbursement for documented losses, you must attest that the losses or expenses were incurred as a result of the Data Incident and provide reasonable third-party documentation supporting the losses (e.g., telephone records, correspondence, and receipts).

Documented Losses may include, but are not limited to: (i) unreimbursed out-of-pocket credit monitoring costs that were incurred on or after March 21, 2023, through [Claims Deadline]; (ii) unreimbursed losses associated with actual fraud or identity theft; and (iii) unreimbursed bank fees, long distance phone charges, postage, or gasoline for local travel.

You may not be reimbursed for expenses if you have been reimbursed for the same expenses by another source, including compensation provided in connection with the credit monitoring and identity theft protection product offered as part of the notification letter provided by the Defendant or otherwise. If you do not submit reasonable documentation supporting a loss, if the alleged documented loss is not reasonably related to the Data Incident, or if your Claim Form is rejected by the Claims Administrator for any reason, and you fail to cure your Claim for documented losses, it will be rejected and will be treated as if you claimed a Pro Rata Cash Payment.

☐ I want to claim reimbursement for documented losses, and I have attached documentation showing that the documented losses listed on this Claim Form are reasonably related to the Data Incident or to mitigating the effects of 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)	$_____.____	
	__ __/__ __/__ __ (mm/dd/yy)	$_____.____	

IV. PRO RATA CASH PAYMENT

In addition to the reimbursement for Documented Losses, you may claim a one-time *pro rata* (proportional) cash payment. No documentation is required to submit a Claim for this cash payment. The Pro Rata Cash Payment amount will be calculated based on the total number of Valid Claims submitted as described in the Settlement Agreement, available at www.[website].com. Under the Settlement, non-California residents with Valid Claims for a Pro Rata Cash Payment will receive a one-time Pro Rata Cash Payment and California residents with Valid Claims will receive a one-time cash payment that is double that of the Pro Rata Cash Payment. Settlement Class Members must provide proof of California residency during the Claims Period, such as a sworn attestation.

☐ **Pro Rata Cash Payment**: I want to claim a one-time Pro Rata Cash Payment (non-California residents).

☐ **California Pro Rata Cash Payment**: I attest that I am a California resident and I want to claim a one-time cash payment that is double that of the Pro Rata Cash Payment amount (California residents only).

V. CREDIT MONITORING

In addition to the reimbursement for documented losses and Pro Rata Cash Payment, you may claim three (3) years of credit monitoring services, including one-bureau credit monitoring, dark web monitoring, identity theft insurance with coverage of up to $1,000,000, and fully managed identity recovery services. The Claims Administrator will provide Settlement Class Members who select this benefit with an activation code and enrollment instructions after final approval of the Settlement. Visit the Settlement Website for updates.

☐ I want to claim credit monitoring.

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 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.