

CLASS ACTION SETTLEMENT CLAIM FORM

Hise vs. Enhanced Recovery Company, LLC

Circuit Court of St. Clair County, Illinois

Case No. 21-L-0148

IMPORTANT: You have been identified as a claimant who is likely a Class Member. If you are a Class Member and fail to submit this Claim Form, then you will receive nothing but still be bound by the Settlement. *If* you are a Class Member and you submit this Claim Form, then you will receive a portion of the Settlement. Only those claimants who fall within the definition of “Class Member” in the accompanying Class Notice will receive a settlement payment, and not all who receive the Class Notice are Class Members. There is no cost to you to submit a Claim Form.

Name: _____

Address: _____

SIGN AND DATE YOUR CLAIM FORM:

I wish to make a claim associated with the class action settlement, and all information provided above is true and correct to the best of my knowledge.

Signature

Print Name

Date

If you have any questions, please visit www.HiseSettlement.com, call 1-888-220-6629 or e-mail HiseSettlement@AtticusAdmin.com.