

Must Be Postmarked  
No Later Than  
**February 9, 2023**

CIRCUIT COURT FOR PRINCE GEORGE'S COUNTY

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*Brigitte Headen*  
v.  
*Conservice, LLC*

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Case No. CAL20-19314

**CLAIM FORM INSTRUCTIONS**

In order for you to qualify to receive a payment related to *Headen v. Conservice, LLC* as described in the Notice of this Settlement (the "Class Notice"), you must file a Claim Form in the attached form either in paper or electronically on the Settlement Website, [www.conserviceclassaction.com](http://www.conserviceclassaction.com).

Your claim will be considered only if you comply with all of the following conditions:

1. You must be a person to whom a Class Notice was addressed, and you must be listed as a potential Class Member on the *Headen v. Conservice, LLC* Class List. If you have a question about whether you are listed as a potential Class Member, please contact the Settlement Administrator at 1-866-274-4004.
2. You must accurately **complete** all required portions of the attached Claim Form.
3. By submitting the Claim Form, you are certifying that you are a member of the Class in the *Headen v. Conservice, LLC* case.
4. You have two options to complete a Claim Form:
  - (1) ELECTRONICALLY SUBMIT the Claim Form using the Settlement Administrator's Settlement Website, located at [www.conserviceclassaction.com](http://www.conserviceclassaction.com). When you successfully complete the online Claim Form, you will receive a receipt that your claim has been submitted.

**Or**

- (2) MAIL the **completed** Claim Form by First-Class U.S. Mail, postage prepaid, postmarked no later than **February 9, 2023** to:

***Headen v. Conservice, LLC Class Action Settlement***  
c/o Strategic Claims Services  
P.O. Box 230  
Media, PA 19063

5. If you do not complete and electronically submit or mail the Claim Form by February 9, 2023, you cannot receive any payment from the Settlement. So that you will have a record of the date of your mailing of the Claim Form and its receipt by the Settlement Administrator, you are advised to use (but are not required to use) either the Settlement Website or U.S. Mail by Certified Mail, Return Receipt Requested.

**Headen v. Conservice, LLC CLAIM FORM**

Please print or type

Last Name:	First Name:	M.I.:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Street Address:

City:	State:	5- digit ZIP Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>

E-mail address:

**Class Member Verification Code (you can find this on the notice you received):**

**FORM OF PAYMENT**

YOU MUST CHOOSE HOW TO RECEIVE YOUR SETTLEMENT PAYMENT (the Settlement Payment amount will be the same whichever form you choose). YOU MUST CHOOSE ONLY ONE FORM OF PAYMENT FROM THE FOLLOWING OPTIONS:

I choose to receive my settlement payment via an Electronic Debit Master Card, which will be sent to me by E-mail to the E-mail address identified above

OR

I choose to receive my settlement payment via an Electronic Gift Card, which will be sent to me by E-mail to the E-mail address identified above, and I choose to receive the brand of gift card checked below: (If you choose to receive an electronic gift card and do not choose one of the options below, an Amazon electronic gift card will be the default choice.)

Amazon\_\_\_\_\_

Target\_\_\_\_\_

Walmart\_\_\_\_\_

OR

I choose to receive my settlement payment via a paper check, which will be mailed to me at the address listed above. If you choose this option, please allow additional time for the payment to reach you.

**REMINDERS:**

1. You can fill out and sign this Claim Form electronically on [www.conserviceclassaction.com](http://www.conserviceclassaction.com) and get an immediate receipt.
2. The Claim Form must be complete in order to be a Valid Claim.
3. Keep a copy of the completed Claim Form for your records.
4. If you move or your name changes, please send your new address, name, or contact information to the Settlement Administrator via the Settlement Website or First-Class U.S. Mail, each listed in the Notice.
5. To return this Claim Form by mail, send it **with appropriate postage to Headen v. Conservice Class Action Settlement, c/o Strategic Claims Services, P.O. Box 230, Media, PA 19063**
6. **If you have any questions, you may contact the Settlement Administrator at 1-866-274-4004 or [info@strategicclaims.net](mailto:info@strategicclaims.net).**