

SETTLEMENT CLAIM FORM

Maria Sanchez, et al. v. McDonald's Restaurants of California, Inc., Los Angeles Superior Court No. BC499888

I. INSTRUCTIONS:

1. **You must fill out this Claim Form if you did not receive a copy of the Notice of Class Settlement in the mail** and you believe you are a Class Member in this lawsuit. You are a Class Member if you work or worked for McDonald's Restaurants of California, Inc. as a non-managerial hourly worker at one or more of McDonald's corporate (i.e. non-franchise) restaurants in California at any time from January 24, 2009 through March 4, 2020. This includes crew persons, crew trainers, primary maintenance persons, backup maintenance persons, crew OJEs, shift manager trainees, core crew persons, crew chiefs, and MA core shift manager trainees.
2. Please read this Claim Form, provide the information requested below, sign at the bottom, and mail the form to the Claims Administrator at the address below **no later than July 31, 2020** to be eligible to receive your share of the settlement with McDonald's as set forth in the Class Notice that is available at www.sanchezvmcdonaldssettlement.com.
3. More information concerning this lawsuit, and your rights and options in the lawsuit is provided in the Class Notice and at www.sanchezvmcdonaldssettlement.com.
4. **If you change your address or any of your other contact information before final distribution, please send the Claims Administrator your updated contact information.**
5. You may be required to provide documentation of your dates of employment to participate in the settlement. Your employment status, and dates of employment, must be verified by the Claims Administrator in order for you to be eligible to participate in the settlement.

IF A CLAIM FORM IS REQUIRED FROM YOU, YOU MUST TIMELY COMPLETE, SIGN, AND MAIL THIS FORM BY FIRST CLASS U.S. MAIL OR EQUIVALENT, POSTAGE PAID, POSTMARKED ON OR BEFORE JULY 31, 2020, ADDRESSED AS FOLLOWS IN ORDER TO RECEIVE A MONETARY RECOVERY:

Sanchez, et al. v. McDonald's Restaurants of California, Inc.
c/o CPT Group, Inc.
50 Corporate Park
Irvine, CA 92606

IF YOU ARE REQUIRED TO TIMELY SUBMIT THIS CLAIM FORM TO SHARE IN THE SETTLEMENT BUT FAIL TO DO SO, YOU WILL NOT RECEIVE A SETTLEMENT PAYMENT, AND THE SETTLEMENT WITH MCDONALD'S AND RELEASE OF CLAIMS WILL BE BINDING ON YOU (UNLESS YOU HAVE TIMELY OPTED OUT OF THE CLASS OR THE SETTLEMENT).

It is strongly recommended that you obtain proof of timely mailing and keep it until receipt of payment.

II. CERTIFICATION AND RELEASE OF CLAIMS IN SETTLEMENT OF LAWSUIT:

By providing the information below, I certify, understand, and agree to the following:

- I was employed as a non-managerial hourly worker at one or more McDonald's corporate (i.e., non-franchised) restaurants in California, at some time between January 24, 2009 and March 4, 2020.
- I hereby request payment of my share of the settlement with McDonald's in *Maria Sanchez, et al. v. McDonald's Restaurants of California, Inc.*, Los Angeles Superior Court No. BC499888, as set forth in the Class Notice.
- I understand that if I have any questions concerning the lawsuit, the settlement, or this Claim Form, I may contact one of the plaintiffs' attorneys listed on the Class Notice. I also understand that the complete terms of the Settlement Agreement, including definitions of terms and the release of claims that will bind me as a class

member if I do not opt out of the lawsuit, are set forth in the Settlement Agreement on file with the Court and can be found at www.sanchezvmcdonaldssettlement.com.

- I understand that the settlement of the lawsuit with McDonald's, as described in more detail in the Notice, is fully binding on me. I wish to participate in the settlement with McDonald's by submitting this Claim Form for a settlement payment and by agreeing to the release of claims provided as part of the settlement.
- Upon the Effective Date of this settlement, as set forth in full in the Settlement Agreement, I fully, finally, and forever release, relinquish, and discharge all "Settled Claims" against the "Released Parties," as those quoted terms are defined in the Settlement Agreement and the Class Notice.

I declare under penalty of perjury under the laws of the State of California that I have read and understand this Claim Form, that the information supplied by me is true and correct, and that I accept and agree to the terms and conditions of the settlement of the lawsuit with McDonald's as set forth in this Claim Form and the Settlement Agreement, including the release of claims I am providing.

Signed: _____
(Sign your name here)

Date: _____
(mm/dd/yyyy)

This Claim Form was signed in: _____,
(City) (State)

Print Or Type Information Requested Below:

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY, STATE, ZIP CODE: _____

OTHER NAMES USED AT WORK (if any): _____

TELEPHONE NUMBERS: Home: _____ Cell: _____

EMAIL ADDRESS: _____

ADDRESS OF RESTAURANT WHERE EMPLOYED: _____

DATES OF EMPLOYMENT: _____

Optional: If you do not want back-up withholding taken from your settlement check, you may also fill out the following:

Taxpayer Identification Number Certification – Substitute IRS Form W-9

Enter your Social Security Number or Taxpayer Identification Number, if any: _____ - _____ - _____

Print name as shown on your income tax return if different from above.

First Name: _____ Last Name: _____

Under penalty of perjury, I certify that:

1. The taxpayer identification number shown on this form is my correct taxpayer identification number, and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Note: If you have been notified by the IRS that you are subject to backup withholding, you must cross out item 2 above.

The IRS does not require your consent to any provision of this document other than this Form W-9 certification to avoid backup withholding.