

**CLAIM FORM**

**THIS CLAIM FORM MUST BE RECEIVED  
BY AUGUST 30, 2016 IN ORDER TO BE VALID**

**ATTENTION:** *This Claim Form is to be used to apply for reimbursement of losses due to the disruption of services in RushCard accounts for portions of the period of time from October 12, 2015 through October 31, 2015. If you do not have documentation to support your losses, you may qualify for a payment of up to \$100. If you submit documentation to support your losses, you may qualify for a payment of up to \$500. PLEASE BE ADVISED that any documentation you provide must be submitted WITH this Claim Form. If you are unable to electronically upload a copy of your documentation to the website, you will need to mail a printed Claim Form along with your documentation to the Settlement Administrator. If you are unable to print this form, please email [RushSettlement@AngeionGroup.com](mailto:RushSettlement@AngeionGroup.com) or call 1-855-400-3445 to have a blank Claim Form mailed to you.*

**REGISTRATION**

Name (First, Middle Initial, Last): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**Claim Number:**

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**Instructions.** Please follow the instructions below and complete the questions as instructed.

**CLAIM INFORMATION**

Please answer the questions as instructed below:

<p><b>Section A. Confirm Your Eligibility</b></p>																				
<p>Did you have an open RushCard account on October 12, 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, continue to the next question. If no, you are not a member of the Settlement Class and do not qualify to file a Claim.</i></p>																				
<p>Did you use or authorize use of your RushCard account at least one time from July 14, 2015 – October 12, 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, continue to the next question. If no, you are not a member of the Settlement Class and do not qualify to file a Claim.</i></p>																				
<p>Please provide your Date of Birth:</p> <table style="margin-left: auto; margin-right: auto;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="width: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="width: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr><tr><td colspan="2" style="text-align: center;">Month</td><td colspan="2" style="text-align: center;">Day</td><td colspan="6" style="text-align: center;">Year</td></tr></table> <p><i>If you had more than one RushCard account, you may only submit one Claim Form for losses. For accounts with multiple owners or users, only one Claim may be submitted per account.</i></p>											Month		Day		Year					
Month		Day		Year																
<p>Did you attempt to use your RushCard account or access your RushCard account at any time during the time period of October 12, 2015 – October 31, 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, continue to the next question. If no, you do not qualify to file a Claim, but you may qualify for other benefits provided in the settlement without the need to file a Claim. Those benefits are more fully explained in the Settlement Agreement available at <a href="http://www.RushSettlement.com">www.RushSettlement.com</a>. Click <a href="#">here</a> to leave this Claim Form and learn more about the additional benefits for which you may qualify.</i></p>																				
<p><i>UniRush has announced that during the time period of October 12, 2015 – October 31, 2015, some cardholders who tried to use their accounts were unable to access their accounts, authorize use of their accounts, or otherwise use their cards due to a disruption in services. This event is referred to as the “Service Disruption.” For some cardholders, the Service Disruption lasted a few hours with cardholders experiencing no actual difficulties, but for other cardholders the Service Disruption lasted longer and affected varied account features, such as ATM withdrawals, payroll deposits, and actual card use for payment purposes.</i></p> <p>When you attempted to use your card, access your account(s), or authorize use of your account(s) during the time period of October 12, 2015 – October 31, 2015, were you unable to do so? For example, were you unable to withdraw money from the account or were you unable use the card to make charges or pay for goods or services? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, continue to the next question. If no, you do not qualify to file a Claim, but you may qualify for other benefits provided in the settlement without the need to file a Claim. Those benefits are more fully explained in the Settlement Agreement available at <a href="http://www.RushSettlement.com">www.RushSettlement.com</a>.</i></p>																				
<p>Did you suffer any financial or other losses as a result of the Service Disruption? For example, were you charged any late fees on other accounts; did you suffer lost wages; were you evicted from your home, or did have your electricity or telephone service turned off? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, continue to the next question. If no, you do not qualify to file a Claim, but you may qualify for other benefits provided in the settlement without the need to file a Claim. Those benefits are more fully explained in the Settlement Agreement available at <a href="http://www.RushSettlement.com">www.RushSettlement.com</a>.</i></p>																				

**Section B. Claims for Losses**

*If it is verified that you had an open RushCard account on October 12, 2015 and attempted to use your account, attempted to authorize use of your account or otherwise access your account between October 12, 2015 and October 31, 2015 and were unsuccessful in doing so and suffered a loss as a result, you will be eligible to receive one of two types of payments to compensate you for the losses and inconveniences suffered as a result of the Service Disruption.*

*If it is verified that you meet all of the criteria above but **do not** have documentation to support your losses and the dollar amount of those losses, you will be eligible to receive a payment of up to **\$100**.*

*If it is verified that you meet all of the criteria above and you **submit** documentation to support your losses and the dollar amount of those losses, you will be eligible to receive a payment compensating you for your losses of up to **\$500**. By way of example, documentation includes receipts, account statements, letters or records from employers confirming payments or losses, and letters from landlords confirming payments or losses.*

*You will only be eligible for one form of payment under this Claims process. If you previously received any payment or reimbursement from UniRush to compensate for out-of-pocket expenses resulting from the Service Disruption, other than UniRush's fee holiday from November 1, 2015 to February 29, 2016, your compensation will be reduced by the amount you previously received.*

*If the total number of Claims exceeds the limits set by the Settlement Agreement, your Claim will be reduced on a pro rata basis. Payment for your losses will be paid directly to you by check and sent to the mailing address you provided above.*

**Please select one of the following options:**

I have documentation to support the losses and the dollar amount of the losses I suffered as a result of the Service Disruption and elect to submit that documentation.

*If you select this option, please skip to Section C.*

I do not have documentation or elect not to submit that documentation to support the losses and the dollar amount of the losses I suffered as a result of the Service Disruption.

*If you select this option, please continue to the next two instructions.*

**Please provide an explanation of the types of losses and the dollar amount of the losses you suffered as a result of the Service Disruption:**

**Please explain why you are unable to provide documentation of your losses and/or the dollar amount of those losses:**

*Please skip Section C and continue directly to Section D.*

**Section C. Reimbursement for Documented Losses**

For each loss that you suffered as a result of the Service Disruption, please provide a description of the loss, the date of the loss, the dollar amount of the loss, and the type of documentation you will be submitting to support the loss.

*Examples of such losses include: late fees charged on accounts, declined payment fee, lost wages, eviction from housing, interest fees on money borrowed, and disconnection of electricity or telephone service. These are only examples and do not represent a complete list of losses eligible for compensation. Please provide a description of any loss that you claim was the result of the Service Disruption.*

*Examples of documentation include: account statements, letters from your employer, and billing statements.*

<b>Description of the Loss</b>	<b>Date of Loss</b>	<b>Amount</b>	<b>Type of Supporting Documentation</b>
Examples: Late fee charged on electric bill	10/20/15	\$5.50	Copy of electric bill showing late fee
Return payment fee for car payment on auto pay	10/17/15	\$25.00	Copy of billing statement showing fee charged by finance company

**Additional Information**

If you believe that there is additional information related to your losses that would be helpful for the evaluation of your Claim, please explain:

**Submitting Documentation**

Supporting documentation may be submitted either electronically or in paper form.

If you wish to submit your documentary support electronically, please do so as part of Claim Form process at [www.RushSettlement.com](http://www.RushSettlement.com) and provide the additional information required below.

If you wish to submit your documentary support by mail, please print out this Claim Form, sign it, and mail the completed Claim Form along with a copy of your documentary support as discussed below to:

RushCard Settlement Claims Administrator  
1801 Market Street, Suite 660  
Philadelphia, PA 19103

If you are unable to print a copy of the completed Claim Form, please email [RushSettlement@AngeionGroup.com](mailto:RushSettlement@AngeionGroup.com) or call 1-855-400-3445 to request a blank Claim Form be mailed to you.

Please only provide copies of your supporting documents and retain all originals for your personal files. The Settlement Administrator will have no obligation to return any supporting documentation to you. A copy of the Settlement Administrator's privacy policy is available at [www.RushSettlement.com](http://www.RushSettlement.com). Your supporting documentation shall not be provided to the Defendants in this action.

Should you elect to proceed with a Claim under Section C but fail to include supporting documentation, your Claim will be processed as if you elected not to submit documentation and you will be eligible only for the payment of up to \$100.

**Section D. Class Member Affirmation**

By submitting this Claim Form and checking the box below, I declare that I had an open RushCard account on October 12, 2015 and I used or had authorized use of my account at least once during the period of July 14, 2015 through and including October 12, 2015.

By submitting this Claim Form and checking the box below, I further declare that I authorized use or attempted to use my account or otherwise accessed my account between October 12, 2015 and October 31, 2015 and was unsuccessful in doing so and suffered a loss as a result.

I understand that my Claim and the information provided above will be subject to verification.

I also understand that I may not be entitled to recover if I am employed by and/or affiliated with the Judge or Magistrate presiding over this action, and/or am employed by any of the Defendants or anyone acting on their behalf.

By submitting this Claim Form, I hereby also declare under penalty of perjury under the law of the United States of America that the information provided in this Claim Form is true and correct. I further certify that any documentation that I have submitted in support of my Claim consists of unaltered documents in my possession.

**Yes, I am a member of the Settlement Class and I understand that I am submitting this Claim Form and the affirmations it makes under the penalty of perjury. I further understand that my failure to check this box may render my Claim null and void.**

You have two options on submitting this Claim Form. Please do not submit the Claim Form twice. Either you may submit the Claim Form electronically or you may print the Claim Form, sign it, and mail it to the Settlement Administrator at the following address:

RUSHCARD SETTLEMENT  
1801 Market Street  
Suite 660  
Philadelphia, PA 19103

Should you choose to submit the Claim Form electronically, please include your name in both the Signature and Printed Name fields.

Signature: \_\_\_\_\_

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
(MM-DD-YY)

Printed Name: \_\_\_\_\_

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