## HEARST SETTLEMENT CLAIM FORM

THIS CLAIM FORM MUST BE SUBMITTED ONLINE OR POSTMARKED BY MARCH 25
2019 AND MUST BE FULLY COMPLETED, BE SIGNED, AND MEET ALL CONDITIONS
OF THE SETTLEMENT AGREEMENT.

Instructions: Fill out each section of this form and sign where indicated.

Name (First, M.I., Last):		
Street Address:		
City:	State:	_ Zip Code:
Email Address (optional):		
Contact Phone #: () – (You may be contacted if further information is		

<u>Class Member Verification</u>: By submitting this claim form and checking the boxes below, I declare that I believe I am a member of the Settlement Class and that the following statements are true (each box must be checked to receive a payment):

□ I had a Michigan street address at any time on or before July 30, 2016 and purchased and/or had a subscription to a Hearst Publication on or before July 30, 2016. Hearst Publications include any magazine or other publication published by Defendant or one of its subsidiaries, predecessors, or companies acquired by Hearst, or any publication acquired by Hearst, in the United States, including but not limited to any one of the following magazines or publications: *Country Living, Cosmopolitan, Elle Decor, Elle, Esquire, Food Network Magazine, Good Housekeeping, Harper's Bazaar, House Beautiful, Marie Claire, O, The Oprah Magazine, Popular Mechanics, Redbook, Road & Track, Seventeen, Town & Country, Veranda, and Woman's Day.* 

Under penalty of perjury, all information provided in this Claim Form is true and correct to the best of my knowledge and belief.

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

Print Name: \_\_\_\_\_

The Settlement Administrator will review your Claim Form; you may be required to submit additional documentation to validate your claim. If accepted, you will be mailed a check for a *pro rata* share of the Settlement Fund depending on the number of valid claim forms received. This process takes time, please be patient.