Wendy's Financial Institution Data Breach Settlement c/o Analytics Consulting LLC P.O. Box 2005 Chanhassen, MN 55317-2005

CLAIM FORM

PLEASE READ: YOU HAVE THREE OPTIONS FOR COMPLETING AND SUBMITTING THIS CLAIM FORM

- (1) VISIT <u>www.WendysFIDataBreachSettlement.com</u> and COMPLETE THE ONLINE VERSION OF THIS CLAIM FORM NO LATER THAN **September 30, 2019**; **OR**
- (2) COMPLETE AND SIGN THIS FORM AND UPLOAD IT NO LATER THAN **September 30, 2019** VIA THE SECURE LINK THAT CAN BE FOUND AT <u>www.WendysFIDataBreachSettlement.com</u>; **OR**
- (3) COMPLETE AND SIGN THIS FORM AND SUBMIT IT BY MAIL POSTMARKED BY September 30, 2019 at:

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- Use this form if your financial institution is a Settlement Class Member that is entitled to claim into the \$50 million (\$50,000,000) Settlement Fund.
- Fill out this form if your financial institution wants to receive a payment per eligible card. No documentation is needed.

Materials to Gather to Complete this Form: The number of payment card accounts your financial institution issued that were identified as having been at risk as a result of the Data Breach in an alert or similar document by Visa, MasterCard, Discover, American Express, or JCB.

SETTLEMENT CLASS MEMBER INFORMATION				
Name of Financial Institution / Settlement Class Member				
Name of Person Filling Out This Form First Name M.I. Last Name				
Your Title in the Financial Institution				
Mailing Address				
City State Zip Code				
Daytime Phone				
Email Address (if provided, we will communicate primarily by email about your claim)				
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CERTIFICATION OF PAYMENT CARDS

Please complete all parts of the question below:

Is your financial institution the issuer of one or more payment cards that were identified in any of the categories of alerts or similar documents below? (Check All Applicable Boxes Below.)

If you check "YES" for any category of alert(s) (or similar documents), indicate how many payment card accounts your financial institution issued that were identified in the referenced alert(s) or similar documents. For purposes of completing this form, please note that a payment card number can have only one corresponding payment card account, even if your financial institution issued multiple payment cards bearing the card number.

(a) Visa alert(s) in the US-2016-0183-PA series			no 🗆 no	
	Number of Issued Accounts Identified in Th	ese Alerts:		
(b) MasterCard alert(s) in the ADC0099-US-16 series or ADC001016-US-16 series			no 🗆 no	
	Number of Issued Accounts Identified in Th	ese Alerts:		
(c) Discover alert(s) in the DCA-USA-2016-6670, DCA-USA-2016-5283,		☐ YES	ы П №	
or DCA-USA-2016-4698 series	Number of Issued Accounts Identified in Th	ese Alerts:		
(d) American Express alert(s) or similar documents relating to the Wendy's data breach YES NO				
Number of Issued Accounts Identified in These Alerts/Documents:				
(e) JCB alert(s) or similar documents relating to the Wendy's data breach			в Пио	
Number of Issued Accounts Identified in These Alerts/Documents:				
Your financial institution is not a Settlement Class Member and you should not submit this claim form unless you are able to answer YES to at least one of the categories above.				
SIGN CLAIM FORM				
By submitting this claim form, the above-named Settlement Class Member certifies that it is eligible to make a claim in this settlement and that the information provided in this claim form is true and correct. The above-named Settlement Class Member understands that this claim may be subject to audit, verification, and Court review.				
		M M D D	Y Y Y Y	
Signature of Duly Authorized Represent	orized Representative of Settlement Class Member Date Signed			
Print Name				

CLAIM SUBMISSION REMINDERS

- You may submit your claim by mail or through the website at <u>www.WendysFIDataBreachSettlement.com</u>.
- Please keep a copy of this claim form if submitting by mail.
- Claims must be submitted through the website by <u>September 30, 2019</u>, or mailed so they are postmarked, by <u>September 30, 2019</u>.