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Your claim must be submitted online or postmarked by: December 21, 2026

CLAIM FORM FOR CONNECTAMERICA.COM TCPA CLASS ACTION SETTLEMENT

Felix v. ConnectAmerica.com, LLC,
Case No. GD-26-007931
In the Court of Common Pleas of Allegheny County, Pennsylvania

USE THIS FORM ONLY IF YOU ARE A SETTLEMENT CLASS MEMBER TO MAKE A CLAIM FOR A SETTLEMENT PAYMENT

GENERAL INSTRUCTIONS

If you are a member of the Settlement Class, you are eligible to complete this Claim Form to claim a cash payment. Please refer to the Notice posted on the Settlement Website **www.ConnectAmericaTCPASettlement.com,** for more information on submitting a Claim Form and information on the limits and requirements applicable to these claims.

To receive a Settlement Payment from this Settlement via an electronic payment, you must submit the Claim Form below electronically at www.ConnectAmericaTCPASettlement.com by December 21, 2026.

This Claim Form may be submitted electronically via the Settlement Website at **www.ConnectAmericaTCPASettlement.com** or completed and mailed to the address below. Please type or legibly print all requested information, in blue or black ink. Mail your completed Claim Form, including any supporting documentation, by U.S. mail to:

Felix v. ConnectAmerica.com, LLC
c/o Kroll Settlement Administration LLC
P.O. Box 5324
New York, NY 10150-5324

I. PAYMENT SELECTION

If you would like to elect to receive your Settlement Payment through electronic transfer, please visit the website and file your Claim Form online. The Settlement Website includes a step-by-step guide for you to complete the electronic payment option.

II. SETTLEMENT CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

First Name: _____ **Last Name:** _____

Address 1: _____

Address 2: _____

City _____ **State** _____ **Zip Code** _____

Email Address: _____@_____

Telephone Number: (_____ _____ _____) _____ _____ _____ - _____ _____ _____ _____

Questions? Go to www.ConnectAmericaTCPASettlement.com or call toll-free (833) 453-2240.

III. PROOF OF SETTLEMENT CLASS MEMBERSHIP

☐ By checking this box, I certify under penalty of perjury that I (i) owned or was the subscriber for the telephone number identified in this Claim Form from April 1, 2021 to present; (ii) that I did not provide the telephone number to ConnectAmerica.com in order to be contacted, or authorize another person to do so on my behalf; (iii) that I have not previously submitted or filed a legal claim for this telephone number in connection with any call received from the Defendant; and (iv) that I understand that the Settlement Administrator may, at its discretion, request reasonable documentation to verify my claim.

Enter the Class Member ID Number provided on your Postcard Notice:

Class Member ID : 8 3 4 9 2 ____ ____ ____ ____ ____ ____ ____ ____

IV. ATTESTATION & SIGNATURE

I swear and affirm under the laws of State of Pennsylvania that the information I have supplied in this Claim Form is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

_____ ____ ____ / ____ ____ / ____ ____ ____ ____

Signature Date (MM/DD/YYYY)

_____

Print Name