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CLAIM FORM

**MUST BE FILED
ONLINE OR
POSTMARKED
NO LATER THAN
August 7, 2019**

People of the State of California v. j2 Global, Inc.
Superior Court of California for the County of Los Angeles
Case No. 19STCV06851

**For Office Use
Only**

You must submit a Claim Form to receive any payment. Each Eligible Recipient will receive one payout. Complete and mail one form only to: j2 Global Claims Administrator, PO Box 58700, Philadelphia, PA 19102-8700.

PART 1: CLAIMANT INFORMATION

a. Name (please print):

First

Last

b. Your Current Mailing Address:

Street

City

State

Zip Code

Email Address

@

Telephone Number

c. Company Name:

PART 2: SIGNATURE

I wish to receive a payment from the class action Settlement in *People of the State of California v. j2 Global, Inc.*, Case No. 19STCV06851. I agree to be bound by all of the terms and conditions of the Settlement, and declare under penalty of perjury under the laws of the State of California that I (1) paid for a fax service plan with eFax, MyFax or MetroFax, (2) have not already obtained a refund for all money paid to my fax service plan, and (3) am or was an eFax, MyFax or MetroFax customer of the Defendant who signed up during the designated period of April 1, 2012 through November 30, 2016, with a California zip code billing address and who did not send or receive a fax using eFax, MyFax or MetroFax after the trial period.

Signature

_____/_____/_____
Date



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