[COMPLETE THIS FORM *ONLY IF* YOU CHOOSE TO *DISPUTE* THE WORK WEEKS IN THE CLASS NOTICE]

"WORK WEEK DISPUTE FORM"

Claudia Chavez v. Orange County's United Way
ORANGE COUNTY SUPERIOR COURT, CASE NO. 30-2025-01458038-CU-OE-CXC

INSTRUCTIONS: TO DISPUTE THE NUMBER OF WORK WEEKS CALCULATED FOR YOU AS PART OF THE SETTLEMENT, YOU MUST COMPLETE, SIGN AND MAIL THIS FORM AND ALL SUPPORTING EVIDENCE BY FIRST CLASS U.S. MAIL OR EQUIVALENT, POSTAGE PAID, POSTMARKED ON OR BEFORE AUGUST 25, 2026, ADDRESSED TO THE SETTLEMENT ADMINISTRATOR AS FOLLOWS:

Chavez v. Orange County's United Way
c/o CPT Group, Inc.
PO Box 19504
Irvine, CA 92623
Tel: 1(888) 903-0092

Please fill in all of the following information (type or print):

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY, STATE, ZIP CODE: _____

TELEPHONE NUMBERS: Home: _____ Work: _____

IT IS STRONGLY RECOMMENDED THAT YOU RETAIN PROOF OF MAILING THIS FORM AND ALL SUPPORTING EVIDENCE POSTMARKED ON OR BEFORE AUGUST 25, 2026.

I [insert your name] _____ wish to be dispute the number of Work Weeks calculated for me as part of the settlement in the case of *Claudia Chavez v. Orange County's United Way, Orange County Superior Court, Case No. 30-2025-01458038-CU-OE-CXC*. Based on the evidence submitted with this form, the correct number of Work Weeks is _____.

I arrived at the above number of Work Weeks by relying on the following information and/or documents (please attach any records which support your contention that you worked more work weeks than those included in the Notice):

_____

_____

_____

_____

_____

Please be advised the Court has approved the following method for resolving workweek disputes:

If you submit this form disputing the accuracy of Defendant's records used to calculate Covered Workweeks, and the Parties' counsel cannot resolve the dispute informally, the matter will be referred to the Settlement Administrator. The Settlement Administrator will review Defendant's records and any information or documents submitted by You. The parties should file with the Court all disputes submitted by class members, the evidence submitted, and the resolution of those disputes. The Court shall have the right to review any decision made by the settlement administrator regarding a claim dispute. You must submit information or documents supporting your position to the Settlement Administrator

prior to August 25, 2026. Information or documents submitted after the expiration of the Response Deadline will not be considered by the Settlement Administrator, unless otherwise agreed to by the Parties.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signed: _____ Date:_____

Print Name:_____ Last four digits of Social Security Number _____