

REQUEST FOR EXCLUSION FROM SETTLEMENT
AND EXCLUSION FROM INDIVIDUAL SETTLEMENT PAYMENT

Lorena Sibrian-Franco v. East Valley Community Health Center, Inc., et al.

**Los Angeles County Superior
Court Case No. 19STCV21220**

YOU MAY TIMELY SUBMIT THIS REQUEST FOR EXCLUSION *ONLY* IF YOU *DO NOT WISH TO BE INCLUDED IN THE SETTLEMENT* AND IF YOU *DO NOT WISH TO RECEIVE AN INDIVIDUAL SETTLEMENT PAYMENT*.

INSTRUCTIONS:

You must timely complete, sign, and mail this Request for Exclusion if you want to “opt out” of the Settlement and do not want to receive an Individual Settlement Payment. If you choose to continue to pursue the lawsuit, you will have to find new counsel at your own expense.

IDENTIFYING INFORMATION

Please verify and/or complete any missing identifying information:

NAME AND FORMER NAMES (IF ANY):	_____
ADDRESS LINE 1	_____
ADDRESS LINE 2	_____
LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	_____
TELEPHONE NUMBER	_____

If you want to be excluded from the Settlement and not receive an Individual Settlement Payment, you must timely file this Request for Exclusion with *Sibrian-Franco v. East Valley Community Health Center, Inc. c/o CPT Group, Inc., 50 Corporate Park, Irvine, Ca, 92606*, no later than April 5, 2024.

I declare the foregoing to be true and correct under penalty of perjury under the laws of the United States and the State of California.

Date _____, 2024

Signed: _____