

ELECTION NOT TO PARTICIPATE IN ("OPT OUT" FROM) CLASS ACTION SETTLEMENT

Superior Court of California, County of Butte

Penca v. Sierra Nevada Brewing Co.

Case No. 21CV02883

DO NOT SIGN OR SEND THIS DOCUMENT UNLESS YOU WISH TO EXCLUDE YOURSELF FROM THE SETTLEMENT.**THIS DOCUMENT MUST BE POSTMARKED NO LATER THAN May 15, 2023. IT MUST BE SENT VIA REGULAR U.S. MAIL.**

PLEASE MAIL THIS EXCLUSION FORM VIA REGULAR U.S. MAIL TO:
PENCA V. SIERRA NEVADA BREWING CO., C/O CPT GROUP, INC.
50 CORPORATE PARK, IRVINE, CA 92606

You are a Class Member if you were employed by Sierra Nevada Brewing Co. ("Sierra Nevada Brewing") as hourly-paid, non-exempt employee (whether hired directly or through staffing agency People 2.0 Global LLC dba Allevity Recruiting & Staffing fka Anderson and Associates) within the State of California at any time during the period from October 17, 2017, through January 31, 2023 ("Class Period").

You are an Eligible Aggrieved Employee if you are currently or were formerly employed by Sierra Nevada Brewing as an hourly-paid, non-exempt employee (whether hired directly or through staffing agency People 2.0 Global LLC dba Allevity Recruiting & Staffing fka Anderson and Associates) within the State of California at any time during the period from October 26, 2021, through January 31, 2023 ("PAGA Timeframe").

By signing and mailing this document to the Settlement Administrator at the address above, you are deciding to exclude yourself from the Class and deciding not to participate in the class portion of the proposed settlement of the action entitled *Penca v. Sierra Nevada Brewing Co.* However, Eligible Aggrieved Employees may not exclude themselves from the PAGA portion of the proposed settlement.

IT IS MY DECISION NOT TO PARTICIPATE IN THE LAWSUIT REFERRED TO ABOVE. BY DOING SO I CHOOSE NOT TO BE INCLUDED IN THE CLASS OF PLAINTIFFS IN THE LAWSUIT. I UNDERSTAND THAT BY EXCLUDING MYSELF, I WILL NOT RECEIVE AN INDIVIDUAL SETTLEMENT SHARE (AS FULLY DESCRIBED IN THE NOTICE I RECEIVED WITH THIS EXCLUSION FORM) AND ANY CLAIMS I HAVE DURING THE CLASS PERIOD WILL NOT BE RELEASED.

I understand that if I am an Eligible Aggrieved Employee and qualify for a payment from the PAGA Payment, I will be mailed a check for that payment regardless of whether I exclude myself from the class portion of the proposed settlement. I further understand that as an Eligible Aggrieved Employee, I will release any claims I have during the PAGA Timeframe.

Dated: _____

(Signature)_____
(Last Four of Social Security Number)_____
(Type or print name and former name(s))_____
(Telephone Number)_____
(Address)