PROOF OF CLAIM FORM		
Your Claim must be submitted online or mailed and postmarked by: ***June 4, 2023***	NJTPMS Settlement Administrator 1650 Arch Street, Suite 2210 Philadelphia, PA 19103 www.NJTPMSSettlement.com	**MAV**

THE DEADLINE TO SUBMIT THIS CLAIM FORM IS JUNE 4, 2023

This is the official claim form you must use to make a claim in the lawsuit captioned as *Charles Bratton v. Mavis Tire Supply d/b/a "Mavis Discount Tire"* ("*Mavis*"), Docket No. BUR-L-1085-21, which was filed in the Superior Court of New Jersey, Burlington County. Please read this form carefully before filling it out. In order to qualify for relief under the class settlement you must have purchased tire replacement services at a Mavis Discount Tire store in New Jersey between May 24, 2015, and February 24, 2023 (the "Class Period") after being presented with Reservation Details online before work began, and been charged either a TPMS Service Kit Fee or a tire recycling fee. This may or may not have occurred in your situation. The responses and information you provide to the questions set out below are designed to permit you to make a claim. If you have any questions, please contact the claims administrator via phone at (844) 464-0060 or via email at info@NJTPMSSettlement.com.

THIS COMPLETED FORM MUST BE POSTMARKED OR EMAILED NO LATER THAN JUNE 4, 2023.

PERSONAL INFORMATION OF THE CLAIMANT:

1. State your full name, present address, and either a phone number or e-mail address at which you may be contacted by the claims administrator, if necessary:

_____ _____
First Name Last Name

_____
Address

_____ _____ _____
City State Zip Code

(_____)_____ _____
Phone Number E-Mail Address

2. To be eligible for relief, you must sign and return this claim form no later than **June 4, 2023**.

RELIEF SELECTION:

3. Mavis agrees that each eligible Settlement Class Member who submits a timely valid Claim shall be entitled to submit a Claim either for a cash payment in the amount of $5 for each tire purchased capped at $20 or for a Settlement Purchase Certificate in the amount of $40 to be used for goods or services in a store located in New Jersey.

Please attest under oath your claim status below by writing an "X" on the line in front of your attestation:

___ Please pay me $5 per tire replaced (capped at $20).

___ Please pay me a $40 Settlement Purchase Certificate for me to use at a Mavis Store in New Jersey within one year of issuance.

TO COMPLETE YOUR CLAIM, PLEASE COMPLETE THIS FORM AND RETURN, BY EITHER EMAIL OR UNITED STATES REGULAR MAIL, TO THE ADDRESS OR EMAIL ADDRESS SET FORTH BELOW BEFORE THE CLAIM DEADLINE.

BY SIGNING HERE YOU ARE DECLARING UNDER OATH THAT THE FOREGOING INFORMATION IS ACCURATE TO THE BEST OF YOUR KNOWLEDGE.

NAME: _____

Return the completed claim form to:

NJTPMS SETTLEMENT ADMINISTRATOR
1650 Arch Street, Suite 2210
Philadelphia, PA 19103
Info@NJTPMSSettlement.com