

Gois, et al. v. Kisco Senior Living, LLC
Case No. 24-CV-00751-BJC-AHG (Southern District of California)

Kisco Senior Living Data Incident Settlement

CLAIM FORM FOR CALIFORNIA STATUTORY PAYMENT, RESIDUAL CASH PAYMENT, CREDIT MONITORING SERVICES, AND REIMBURSEMENT OF ORDINARY OUT-OF-POCKET LOSSES AND AND/OR EXTRAORDINARY LOSSES AND EXTRAORDINARY ATTESTED TIME

**IN ORDER TO BE VALID, THIS CLAIM FORM MUST BE RECEIVED ONLINE AT
WWW.KISCOSETTLEMENT.COM NO LATER THAN JANUARY 19, 2027.**

ATTENTION: *This Claim Form is to be used by Settlement Class Members to apply for relief related to the Data Incident that occurred on or around June 6, 2023, and potentially affected individuals who had a relationship with Kisco Senior Living, LLC (“Kisco”). The types of relief for which these individuals may be eligible are for all Settlement Class Members,*

- (i) *Three years of three bureau credit monitoring (“Credit Monitoring Services”),*
- (ii) *Reimbursement of Ordinary Out-of-Pocket Losses up to \$1,000 per individual for unreimbursed costs or expenditures incurred by a Class member in responding to notice of the Data Incident that were incurred between June 1, 2023 (or the earliest verifiable date the Data Incident occurred) and the Claims Deadline, as result of the Data Incident,*
- (iii) *Reimbursement of Extraordinary Losses up to \$10,000 per individual for proven monetary losses incurred by a Settlement Class member that are more likely than not caused by the Data Incident and are losses that are not already covered by one or more of the other reimbursement categories,*
- (iv) *Whether or not they incurred Extraordinary Out-of-Pocket Losses, Settlement Class Members may also submit a claim for up to 5 hours of time spent remedying issues related to the Data Incident at a rate of \$30 per hour, but only if at least 1 full hour was spent. This relief is available only for time spent as a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of the Settlement Class member’s personal information. Settlement Class Members must provide an attestation and a brief description of (1) the actions taken in response to the Data Incident and (2) the time associated with each action (“Attested Time”). Reimbursement for Attested Time is included in the total of up to \$10,000 per person for Out-of-Pocket Losses,*
- (v) **For California residents at the time of the Data Incident, a \$250 California Statutory Payment,** and/or
- (vi) *A Residual Cash Payment. In addition to, or in the alternative to, making claims for a California Statutory Payment, Credit Monitoring Services, Ordinary Out-of-Pocket Losses, and/or Extraordinary Losses and Extraordinary Attested Time, Settlement Class Members may elect to receive a residual cash payment.*

If the aggregate amount of Approved Claims for Ordinary Out-of-Pocket Losses, Approved Claims for Extraordinary Out-of-Pocket Losses and Attested Time, and Approved Claims for California Statutory Payments exceeds the remaining amount of the Settlement Fund after payment of Approved Claims for Credit Monitoring Services, notice and administration costs, service awards approved by the Court, and attorneys’ fees and expenses approved by the Court, Approved Claims for Ordinary Out-of-Pocket Losses, Approved Claims for Extraordinary Out-of-Pocket Losses and Attested Time, and Approved Claims for California Statutory Payments will be decreased pro rata to consume the remaining amount of the Settlement Fund.

If there are funds remaining in the Settlement Fund after payment of Approved Claims for Credit Monitoring Services, Approved Claims for Ordinary Out-of-Pocket Losses, Approved Claims for Extraordinary Out-of-Pocket Losses and Attested Time, Approved Claims for California Statutory Payments, costs of notice and administration, service awards approved by the Court, and attorney’s fees and expenses approved by the Court (“the Remainder”), the Remainder will be paid pro rata to each Settlement Class Member who timely submitted an approved claim, whether for a Residual Cash Payment or any other benefit available under the Settlement. The amount of the Residual Cash Payments will be calculated by dividing the Remainder by the number of Settlement Class Members who timely submitted an approved claim.

CLAIM INFORMATION

Section A. Confirm Your Eligibility

Did you receive a unique CPT ID indicating that you may be a member of the Settlement Class?

☐ Yes ☐ No

If yes, you are a member of the Settlement Class and may file a claim.

If no, you are not a member of the Settlement Class and do not qualify to file a Claim.

If you were a California resident at any time from June 1, 2023, to June 6, 2023, would you like to make a claim for a \$250 California Statutory Payment? If yes, check the appropriate box(es) below:

☐

I attest under penalty of perjury that I was a California resident at any time from June 1, 2023, to June 6, 2023, and would like a \$250 California Statutory Payment

Would you like to make a claim for a Residual Cash Payment? If yes, check the appropriate box(es) below:

☐

I would like a Residual Cash Payment

Would you like to make a claim for three years of three bureau Credit Monitoring Services? If yes, check the appropriate box(es) below:

☐

I would like three years of three bureau Credit Monitoring Services

Did you incur any unreimbursed costs or expenditures in responding to notice of the Data Incident between June 1, 2023 (or the earliest verifiable date the data breach occurred) and the Claims Deadline, as result of the Data Incident?

☐ Yes ☐ No

*If yes, you may be eligible to fill out **Section B** of this form and provide corroborating documentation.*

Do you believe you have suffered identity theft, fraud, or other extraordinary losses as a result of the Data Incident?

☐ Yes ☐ No

*If yes, you may be eligible to fill out **Section B** of this form and provide corroborating documentation.*

Section B.

Reimbursement for Ordinary Out-of-Pocket Losses

All Settlement Class members may submit a claim for Ordinary Out-of-Pocket Losses up to \$1,000 per individual.

“Ordinary Out-of-Pocket Losses” are unreimbursed costs or expenditures incurred by a Class member in responding to notice of the Data Incident that were incurred between June 1, 2023 (or the earliest verifiable date the Data Incident occurred) and the Claims Deadline, as result of the Data Incident.

Settlement Class Members who elect to submit a claim for reimbursement of Ordinary Out-of-Pocket Losses must provide to the Settlement Administrator the information required to evaluate the claim, including: (1) the Settlement Class Member’s name and current address; (2) documentation supporting their claim; and (3) a brief description of the nature of the loss, if the nature of the loss is not apparent from the documentation alone.

Documentation supporting Ordinary Out-of-Pocket Losses can include receipts or other documentation not “self-prepared” by the Settlement Class Member that documents the costs incurred. “Self-prepared” documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

Providing adequate proof of your unreimbursed costs, losses, and expenditures does not ensure that you will be entitled to receive the full amount claimed. All Claims will also be subject to an aggregate maximum payment amount, as explained in the Settlement Agreement. If the amount of Ordinary Out-of-Pocket Losses exceeds the funds available under the Settlement Agreement, then Claims for Ordinary Out-of-Pocket Losses will be reduced on a pro rata basis. If you would like to learn more, please review the Settlement Agreement for further details.

For each unreimbursed cost or expenditure that you incurred in responding to notice of the Data Incident, please provide documentation supporting the cost or expenditure and, if the nature of the cost or expenditure is not apparent from the documentation alone, a brief description of the documentation describing the nature of the cost or expenditure.

You must provide ALL this information for this Claim to be processed. Supporting documentation must be submitted electronically or mailed to the Claims Administrator. Please make electronic submissions as part of this Claim Form at **www.KiscoSettlement.com** and provide the additional information required below. **If you fail to provide sufficient supporting documentation, the Settlement Administrator will deny your Claim.** Please provide only copies of your supporting documentation and keep all originals for your personal files. The Settlement Administrator will have no obligation to return any supporting documentation to you. A copy of the Settlement Administrator’s privacy policy is available at **www.KiscoSettlement.com**. With the exception of your name, mailing address, email address, and phone number, supporting documentation will not be provided to Defendant in this action. Please do not directly communicate with Defendant regarding this matter. All inquiries are to be sent to the Claims Administrator.

Examples of documentation include receipts.

Description of the Loss	Date of Loss	Amount	Type of Supporting Documentation
Example: Identity Theft Protection Service	07 - 17 - 20 MM DD YY	\$50.00	Copy of identity theft protection service bill
Example: Fees paid to a professional to remedy a falsified tax return	02 - 30 - 21 MM DD YY	\$25.00	Copy of the professional services bill
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
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	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	

Reimbursement for Extraordinary Out-of-Pocket Losses and Attested Time

In addition to submitting a claim for Ordinary Out-of-Pocket Losses, Settlement Class Members who believe they have suffered identity theft, fraud, or other extraordinary losses may submit a claim for Extraordinary Out-of-Pocket Losses up to \$10,000 per individual.

“Extraordinary Out-of-Pocket Losses” are proven monetary losses incurred by a Settlement Class member that are more likely than not caused by the Data Incident and are losses that are not already covered by one or more of the other reimbursement categories. Extraordinary Out-of-Pocket Losses are actual, documented, and unreimbursed costs, expenses, losses or charges incurred a result of identity theft or identity fraud, falsified tax returns, or other possible misuse of the Settlement Class member’s personal information. The loss must have occurred between June 1, 2023 (or the earliest verifiable date the Data Incident occurred) and the Claims Deadline. The Settlement Class Member must have made reasonable efforts to avoid, or seek reimbursement for, the loss, including but not limited to exhaustion of all available credit monitoring insurance and identity theft insurance.

Settlement Class Members who elect to submit a claim for reimbursement of Extraordinary Out-of-Pocket Losses must provide to the Settlement Administrator the information required to evaluate the claim, including: (1) the Settlement Class member’s name and current address; (2) documentation supporting their claim; and (3) a brief description of the nature of the loss, if the nature of the loss is not apparent from the documentation alone.

Documentation supporting Extraordinary Out-of-Pocket Losses can include receipts or other documentation not “self-prepared” by the Settlement Class member that documents the costs incurred. “Self-prepared” documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity to or support other submitted documentation.

Providing adequate proof of your unreimbursed costs, losses, and expenditures does not ensure that you will be entitled to receive the full amount claimed. All Claims will also be subject to an aggregate maximum payment amount, as explained in the Settlement Agreement. If the aggregate amount of Extraordinary Out-of-Pocket Losses and Attested Time claimed exceeds the funds available under the Settlement Agreement, then Claims for Extraordinary Out-of-Pocket Losses and Attested Time will be reduced on a pro rata basis. If you would like to learn more, please review the Settlement Agreement for further details.

For each proven monetary loss you incurred that was more likely than not caused by the Data Incident and not reimbursable as Ordinary Out-of-Pocket Losses, please provide documentation supporting the monetary loss and, if the nature of the monetary loss is not apparent from the documentation alone, a brief description of the documentation describing the nature of the cost or expenditure.

You must provide ALL this information for this Claim to be processed. Supporting documentation must be submitted electronically or mailed to the Claims Administrator. Please make electronic submissions as part of this Claim Form at **www.KiscoSettlement.com** and provide the additional information required below. **If you fail to provide sufficient supporting documentation, the Settlement Administrator will deny your Claim.** Please provide only copies of your supporting documentation and keep all originals for your personal files. The Settlement Administrator will have no obligation to return any supporting documentation to you. A copy of the Settlement Administrator’s privacy policy is available at **www.KiscoSettlement.com**. With the exception of your name, mailing address, email address, and phone number, supporting documentation will not be provided to Defendant in this action. Please do not directly communicate with Defendant regarding this matter. All inquiries are to be sent to the Claims Administrator.

Examples of documentation include receipts.

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	- - MM DD YY	\$.	
	- - MM DD YY	\$.	
	- - MM DD YY	\$.	

Reimbursement for Extraordinary Attested Time

☐ If you spent between one (1) and five (5) hours of time remediating issues related to the Data Incident, you may claim reimbursement for Extraordinary Attested Time.

☐ 1 Hour ☐ 2 Hours ☐ 3 Hours ☐ 4 Hours ☐ 5 Hours

Please provide a brief description of (1) the actions you took in response to the Data Incident; and (2) the time associated with each action:

Attestation (You must check the box below to obtain compensation for lost time)

☐ I attest under penalty of perjury that I spent the number of hours claimed above remediating issues related to the Data Incident.

Section C. Payment

If you make a claim for a cash payment using this Claim Form, you will receive your payment by check.

To receive an electronic payment, submit your claim online at www.KiscoSettlement.com.

Section D. Settlement Class Member Affirmation

By submitting this Claim Form and checking the box below, I declare that I received notification from Defendant that I have been identified as a potential Settlement Class Member. If I have submitted a Claim for Ordinary Out-of-Pocket Losses and/or Extraordinary Out-of-Pocket Losses and/or Attested Time, I declare that I incurred the claimed unreimbursed costs, losses, or expenditures and that I believe they were incurred as a result of the Data Incident.

I understand that my Claim and the information provided above will be subject to verification.

I also understand that I may not be entitled to recover under this Settlement if I am employed by and/or affiliated with the Judge or Magistrate presiding over this action, and/or am an officer, director, member, or shareholder of Defendant.

By submitting this Claim Form, I certify that any documentation that I have submitted in support of my Claim consists of unaltered documents in my possession.

☐ Yes, I understand that my failure to check this box may render my Claim null and void.

Please include your name in both the Signature and Printed Name fields below.

Signature:

Date:

		-			-		
MM			DD			YY	

Printed Name:

**IN ORDER TO BE VALID, THIS CLAIM FORM MUST BE RECEIVED ONLINE AT
WWW.KISCOSETTLEMENT.COM OR POSTMARKED NO LATER THAN JANUARY 19, 2027.**