

CLAIM FORM FOR BRITAX CLASS ACTION SETTLEMENT

Margaret Stevens v. Britax Child Safety, Inc.

Case No. 2:20-cv-07373 MCS-AS

USE THIS FORM TO MAKE A CLAIM FOR A CASH PAYMENT

The DEADLINE to submit this Claim Form is August 10, 2022.

I. GENERAL INSTRUCTIONS

If you were a California resident when you purchased for personal or household use a new Britax Frontier ClickTight Harness-2-Booster Seat or Britax Pioneer Harness-2-Booster Seat (the “Class Child Seats”) at any time from August 14, 2016 up to and including August 14, 2020 with a manufacturing date from August 14, 2016 to no later than September 30, 2019, then you are a “Settlement Class Member” and entitled to make a Claim.

As a Settlement Class Member:

1. You are entitled to receive \$40 for each purchase of a Class Child Seat that you made.
2. Complete information about the Settlement and its benefits, are available at www.BritaxBoosterSeatSettlement.com.

In order for your claim to be considered, you must timely complete this Claim Form. The Claim Form may be completed online at www.BritaxBoosterSeatSettlement.com or by mailing a completed Claim Form to the address below, received or postmarked before **August 10, 2022**. To ensure the accuracy and completeness of your claim, online claim submission is strongly encouraged. If you plan to mail in a Claim Form, then please type or legibly print all requested information, in blue or black ink. Mail your completed Claim Form, including any supporting documentation, by U.S. mail to: Britax Booster Seat Settlement c/o CPT Group Inc., 50 Corporate Park Irvine, CA 92606.

In order for your Claim to be approved you must submit either of the following:

1. A receipt or other document confirming the purchase of a Class Child Seat and the date of purchase;
2. Identification of the serial number for the Class Child Seat and the manufacturing date (which must be between August 14, 2016, and September 30, 2019).

You can locate the serial number and manufacturing date for a Class Child Seat at www.BritaxBoosterSeatSettlement.com.

II. CLAIMANT INFORMATION

The Settlement Administrator will use this information for all communications regarding this Claim Form and the Settlement. If this information changes prior to distribution of a cash payment, you must notify the Settlement Administrator in writing at the address above.

First Name

M.I.

Last Name

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Mailing Address, Line 1: Street Address/P.O. Box

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Mailing Address, Line 2:

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City:

State:

Zip Code:

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Email Address

Phone Number:

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In addition, you must (i) sign the declaration in Section IV of this Claim Form; and (ii) submit reasonable documentation (with this Claim Form) demonstrating your purchase of one or more Class Child Seats, such as a retailers' receipt or credit card receipt confirming purchase of a Class Child Seat or a photo of the Class Child Seat showing the serial number and manufacturing date of the Class Child Seat between August 14, 2016 and September 30, 2019. The serial number can be found in the location identified in the photograph below, marked by the blue arrow.



Manufacturing Date and Serial Number located here.






If you do not submit such documentation or fail to sign the attestation, your claim will be denied.

III. PAYMENT

In the event your claim is valid, and you qualify to receive a monetary payment, you will receive an email at the email address provided in Section II above after Final Approval. You can receive your payment via a variety of digital options such as Prepaid Mastercard, PayPal, Venmo, Direct Deposit/ACH, Zelle, or you can elect to receive a paper check.

Please select the method by which you would like to receive the payment. A paper check will be mailed if a method of compensation is not selected. Please confirm the email address listed in Section II is the correct email address to receive notification of your payment.

Please select only one:

 <p>mastercard.</p> <p>Most widely accepted prepaid card – Use with Apple Pay, Google Pay, Samsung Pay</p> <input type="checkbox"/> GET A PREPAID MASTERCARD	 <p>No bank account required</p> <input type="checkbox"/> USE PAYPAL	 <p>No bank account required</p> <input type="checkbox"/> USE VENMO
 <p>Direct to your bank account</p> <input type="checkbox"/> USE DIRECT DEPOSIT	 <p>Direct to your bank account</p> <input type="checkbox"/> USE ZELLE	<p>Paper Check By Mail</p> <p>Allow 1-3 extra weeks for delivery</p> <input type="checkbox"/> USE PAPER CHECK

