

Gemborys v. Cenlar Agency
Settlement Administrator
P.O. Box 43501
Providence, RI 02940-3501



CNY

Ely Gemborys v. Cenlar Agency, Inc.
DISTRICT OF MASSACHUSETTS
Case No. 4:20-cv-40006

**Must Be Postmarked
No Later Than
April 20, 2021**

Settlement Claim Form

CLAIMANT INFORMATION

<input type="text"/>				<input type="text"/>	<input type="text"/>			
First Name				M.I.	Last Name			
<input type="text"/>								
Primary Address								
<input type="text"/>								
Primary Address Continued								
<input type="text"/>				<input type="text"/>	<input type="text"/>			
City				State	ZIP Code			
<input type="text"/>			<input type="text"/>		<input type="text"/>			
Foreign Province			Foreign Postal Code		Foreign Country Name/Abbreviation			

If you wish to recover in this settlement, please complete, sign, and return this **Settlement Claim Form** or submit an online Claim Form.

You must complete and submit a Claim Form by April 20, 2021. You may submit a Claim Form online at www.GemborysClass.com or by completing and submitting this Claim Form to receive your share. The final amount per Class Member will depend on the total number of valid Claim Forms received. To complete this Form, provide the information below and execute the certification.

<input type="text"/>	or	<input type="text"/>	—	<input type="text"/>	—	<input type="text"/>
Claim ID		Phone Number Cenlar called				
<input type="text"/>	—	<input type="text"/>	—	<input type="text"/>		
Current Phone Number (optional)						
<input type="text"/>						
Email (optional)						

Certification

By signing and submitting this Claim Form, I certify and affirm that the information I am providing is true and correct to the best of my knowledge and belief, I am over the age of 18 and I wish to claim my share of the Settlement Fund.

Signature: _____

Dated (mm/dd/yyyy): _____

Print Name: _____



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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