## Cantonwine, et. al. v. John G. Mehos et. al. Case No: 2018CV30021

## CLAIM FORM

# IF YOU RENTED AN APARTMENT LOCATED AT 102-120 D STREET, 233 E. FIRST STREET, OR 117 ½ F STREET IN SALIDA, COLORADO, FROM APRIL 25, 2015 TO THE PRESENT, AND WISH TO BE ELIGIBLE TO RECEIVE A PAYMENT FROM THIS SETTLEMENT YOU MUST SUBMIT A COMPLETED CLAIM FORM NO LATER THAN <u>NOVEMBER 28, 2023</u>. PLEASE READ THE ENCLOSED NOTICE OR VISIT <u>WWW.MEHOSSETTLEMENT.COM</u> FOR MORE INFORMATION.

You may complete and mail this paper Claim Form postmarked no later than November 28, 2023 to:

Cantonwine Class Action c/o Atticus Administration PO Box 64053 Saint Paul, MN 55164

Or, complete and submit an online Claim Form on or before November 28, 2023 at www.MehosSettlement.com.

The information that you provide will not be disclosed to anyone other than the Court, the Settlement Administrator, and the Parties in this case, and will be used only for purposes of administering this Settlement (such as to audit and review a claim for completeness, truth, and accuracy).

#### **Class Member Information**

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Please complete all of the fields in the Claimant Information section and print clearly. This information is required and necessary to confirm that you are a Class Member entitled to receive a payment from this settlement.

Name:			
	First	Middle	Last
Mailing Address:			
	Street Address or P.O. Box		
	City	State	Zip Code
Mobile Telephone:			
Home Telephone:			
Email Address:			
Social Security Nur	nber:		
Date of Birth:			
MM	/DD/YYYY		

# **Apartment Rental History**

Please answer each of the following questions related to the time(s) during which you resided at 102-120 D Street, 233 E. First Street, or 117 ½ F Street in Salida, Colorado.

1.	I formerly lived	d at 102-	120 D Street in Salida, Colorado. YES NO				
	If YES:	a.	I lived in building number, apartment number :				
		b.	I lived at this address from to				
		c. How much did you pay in rent during the time you lived there?					
		d.	My security deposit was returned. YES NO				
		e.	How much was your security deposit?				
	Did you reside	reside at one of the D Street Apartment on May 2, 2017? YES					
	IF YES: NO	Did yo	id you lose property or incur other moving and living expenses? YES				
	Detail the moving and living expenses and loss of property incurred:						
		Did you have a child or children living there with you? YES NO					
		Name and Date of Birth of Child or Children: Parent(s) or Legal Guardian(s) of the child or children:					
2.	I formerly lived	herly lived at 223 E. First Street in Salida, Colorado. YES					
	If YES:	a.	I lived in apartment number :				
		b.	I lived at this address from to	·			
		c.	How much did you pay in rent during the time you lived there?				
		d.	My security deposit was returned. YES NO				
		e.	How much was your security deposit?				
3.	I formerly lived	formerly lived at 117 <sup>1</sup> / <sub>2</sub> F Street in Salida, Colorado. YES NO					
	If YES:	a.	I lived in apartment number :				
		b.	I lived at this address from to	·			
		c. How much did you pay in rent during the time you lived there?					
		d.	My security deposit was returned. YES NO				
		e.	How much was your security deposit?				
4.	How old were you when you lived at the apartment identified above?						

## **Supporting Documentation**

Please attach any documentation you have in your possession that would substantiate or support your claim(s). Examples of documentation that might assist with determining the validity of your claim include proof of rental payments to one of the properties described above such as a canceled check or cashiers check, a copy of the rental agreement, an electric bill or any mail that may have been sent to you at the address. Any items that you provide as evidence to your claim will <u>not</u> be returned to you. Please make copies of these items and retain the originals for your personal records.

## DOCUMENTATION ASSISTS THE SETTLEMENT ADMINISTRATOR IN MAKING ACCURATE CLAIM DETERMINATIONS BUT IS NOT REQUIRED TO FILE A CLAIM.

## **Class Member Certification**

I declare under penalty of perjury under the laws of the United States and the laws of the State of Colorado that the information provided in this Claim Form is true and correct to the best of my recollection, and that this form was executed on the date set forth below. I understand that I may be asked by the Settlement Administrator to provide supplemental information before my claim will be considered complete and valid.

Signature

Printed Name

Date