CLAIM FORM FOR UNIDENTIFIED CLASS MEMBERS

This Claim Form may be submitted online at <u>www.KiplingerSettlement.com</u> or completed and mailed to the address below. Submit your completed Claim Form online or mail it so it is postmarked no later than **June 6, 2023**. If you received a Notice by mail, you do NOT need to submit a Claim Form, and your Cash Award will be sent to you by check at the address identified on the Notice once the Settlement is finally approved. If your address has changed, please submit a change of address form online at <u>www.KiplingerSettlement.com</u> to ensure your check is mailed to your current address.

I. CLAIMANT INFORMATION (all fields required)

The Settlement Administrator will use this information for communications and payments. If this information changes before settlement payments are issued, contact the Settlement Administrator at the address below.

First Name	M.I.	Last Name
Current Mailing Address, Line 1: Street Address/P.O. Bo	DX	
Current Mailing Address, Line 2:		
City:	State:	Zip Code:
Preferred Telephone Number		
Preferred Email address		

II. CLAIM INFORMATION

Mailing address at which you received your subscription to a Kiplinger Publication between December 24, 2015 and July 30, 2016:

Mailing Address, Line 1: Street Address/P.O. Box			
Mailing Address, Line 2:			1
City:	State:	Zip Code:	

III. PREFERRED PAYMENT METHOD

___ Check

____ PayPal (Associated Email Address: ______)

____ Venmo (Associated Phone Number: _____)

IV. SIGNATURE: Sign and date the Claim Form below.

Unique ID:

Signed:

Date: _____

Submit this Claim Form online or mail it to the address below postmarked no later than June 6, 2023.

Kiplinger Settlement c/o JND Legal Administration P.O. Box 91420 Seattle, WA 98111