

Lawrence v. Whitley Penn, LLP

Claim Form

You are only eligible to file a claim if your personal or financial information was potentially exposed in a data incident announced by Whitley Penn LLP on or about January 30, 2024. By submitting a claim and signing the certification below, you are verifying that you received a notice from Whitley Penn that your personal or financial information may have been compromised during the Incident.

The Settlement Notice describes your legal rights and options. To view or download the Settlement Notice and find more information regarding your legal rights and options, please visit the official Settlement Website at www.WhitleyPennDataIncident.com.

The deadline for submitting your Claim Form is June 25, 2026. Please send your Claim Form by U.S. Mail, or email to the Settlement Administrator:

Lawrence v. Whitley Penn, LLP
c/o CPT Group, Inc.
PO Box 19504
Irvine, CA 92623
Email: WhitleyPennDataIncident@cptgroup.com

If you wish to receive a digital payment from the Settlement Fund through Paypal, Venmo, ACH/direct deposit, Zelle, or E-Visa, please complete the Digital Claim form located on the Settlement Website at www.WhitleyPennDataIncident.com.

CLASS MEMBER INFORMATION

The Settlement Administrator will use this information for all communications regarding this Claim Form and the Settlement. Provide your name and contact information below. It is your responsibility to notify the Settlement Administrator of any changes to your contact information after the submission of your Claim Form.

Required Information:

CPT ID (if known) _____

First: _____ M: _____ Last: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Country: _____

Phone: _____

Email: _____

Please indicate whether you are a Medicare Beneficiary: Yes No

CLAIM OPTIONS → select one or both of the Settlement Claim Options

Pro rata share of Settlement Fund: A Settlement Fund of \$155,000 has been created to resolve the claims described in the Settlement Notice. The amount that each Settlement Class Member will receive depends on the number of people who elect to receive a *pro rata* share of the Settlement Fund, but is estimated to be **at least \$75**.

- Check this box if you want to receive a *pro rata* share of the Settlement Fund**

24 Months Free for CyEx Financial Shield: CyEx Financial Shield provides advanced identity and financial monitoring, proactive real-time alerts, and expert product and fraud resolution support designed to protect financial assets. This includes 3 bureau credit monitoring, transaction monitoring, home title monitoring, dark web monitoring, and \$1,000,000 in Comprehensive Identity Theft insurance. In the event that financial fraud is detected, a dedicated case manager will be assigned to you to assist in the restoring of the compromised assets. To learn more about CyEx Financial Shield, visit www.cyex.com/financial-shield/

- Check this box if you want to receive a code for 24 Months of CyEx Financial Shield**
The code will be emailed to the address you provided above after the effective date of the Settlement.

COMPENSATION

In the event your claim is valid, and you qualify to receive your *pro rata* share of the Settlement Fund, the payment will be issued in the form of a paper check and mailed to the address listed on page 1 of this claim form. Please provide updated information to the Settlement Administrator if needed.

Alternatively, if you wish to receive a digital payment from the Settlement Fund through Paypal, Venmo, ACH/direct deposit, Zelle, or E-Visa, please complete the Digital Claim form located on the Settlement Website.

CERTIFICATION

I affirm under the laws of the United States that the information supplied in this claim form is true and correct to the best of my knowledge. I understand that I may be asked to provide supplemental information by the Settlement Administrator before my claim will be considered complete and valid.

Print Name: _____

Signature: _____

Date: _____

Once you've completed all applicable sections, please mail, or email this Claim Form to the address provided below, postmarked by June 25, 2026.

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c/o CPT Group Inc.
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Irvine, CA 92623
Email: WhitleyPennDataIncident@cptgroup.com