

**Your claim must be  
submitted online or  
postmarked by:  
November 25, 2025**

Circuit Court of Sangamon County Illinois  
*Aaron Umberger and Tracy Bruner et al. v.  
Kerber, Eck & Braeckel LLP,  
Case No. 2024LA000198*

*Jessica Kurtz v. Kerber, Eck & Braeckel LLP,  
Case No. 2024LA000264*

**CLAIM  
FORM**

## **CLAIM FORM**

### **GENERAL INSTRUCTIONS**

Complete this Claim Form if you are a Settlement Class Member and you wish to receive Settlement benefits.

You are a member of the Settlement Class and eligible to submit a Claim Form if:

**You are an individual who resides in the United States whose personal information was impacted by the cybersecurity incident that affected Kerber, Eck & Braeckel, LLP (“KEB”) in or around February 2023 (“Data Incident”).**

Excluded from the Settlement Class are (i) the judges presiding over this Litigation, and members of their direct families; (ii) the Defendant, their subsidiaries, parent companies, successors, predecessors, and any entity in which the Defendant or their parents have a controlling interest, and their current or former officers and directors; and (iii) Settlement Class Members who submit a valid Request for Exclusion prior to the Opt-Out Deadline

Settlement Class Members may submit a claim form for: (1) 2 years of credit monitoring; (2) Unreimbursed Economic Losses – up to a total of \$10,000 per claimant; and (3) a Pro Rata Cash Payment.

**Credit Monitoring Services.** All Settlement Class Members shall have the ability to make a claim for 2 years of Three-Bureau Credit Monitoring Services by choosing this benefit on this Claim Form.

**Unreimbursed Economic Losses** up to a total of \$10,000 per claimant, upon submission of a valid claim with supporting documentation for unreimbursed economic losses incurred as a result of or fairly traceable to the Data Incident, including, without limitation, unreimbursed losses relating to fraud or identity theft; professional fees including attorneys’ fees, accountants’ fees, and fees for credit repair services; costs associated with freezing or unfreezing credit with any credit reporting agency; credit monitoring costs that were incurred on or after the Data Incident through the date of claim submission; and miscellaneous expenses such as notary, fax, postage, copying, mileage, and long-distance telephone charges.

**Pro Rata Cash Payment** which is a pro rata share of the Net Settlement Fund, less all valid claims for Unreimbursed Economic Losses. This is estimated to be at least \$50.

This Claim Form may be submitted electronically *via* the Settlement Website at [www.kebdatasettlement.com](http://www.kebdatasettlement.com) or completed and mailed, including any supporting documentation, to:

*KEB Data Incident Settlement, c/o RG/2 Claims Administration, P.O. Box 59479, Philadelphia, PA 19102-9479.*

**QUESTIONS? VISIT [WWW.KEBDATASETTLEMENT.COM](http://WWW.KEBDATASETTLEMENT.COM) OR CALL TOLL-FREE 1-866-742-4955**

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## CLAIM FORM

### I. SETTLEMENT CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

**First Name**

**Last Name**

**Street Address**

**City**

**State**

**Zip Code**

**Email Address**

**Telephone Number**

**Notice ID Number, if known**

### II. UNREIMBURSED ECONOMIC LOSSES

☐ Check this box if you are requesting compensation for Unreimbursed Economic Losses up to a total of \$10,000.00.

**\*You must submit supporting documentation demonstrating actual, unreimbursed monetary loss.**

*Complete the chart below describing the supporting documentation you are submitting.*

Description of Documentation Provided	Amount
<i>Example: Receipt for credit repair services</i>	<i>\$100</i>
<b>TOTAL AMOUNT CLAIMED:</b>	

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### III. PRO RATA CASH PAYMENT

- ☐ Check this box if you wish to receive a pro rata cash payment from the Net Settlement Fund, less all valid claims for Unreimbursed Economic Losses. This is estimated to be at least \$50.

### IV. CREDIT MONITORING SERVICES

- ☐ Check this box if you wish to enroll in 2 years of Three-Bureau Credit Monitoring Services.

### V. PAYMENT SELECTION

Please select **one** of the following payment options, which will be used should you be eligible to receive a Settlement payment:

- ☐ Electronic Payment - An email address must be provided in Section I above if you select this option.
- ☐ **Physical Check** - Payment will be mailed to the address provided in Section I above.

Once the Settlement is approved, if you are eligible for payment, and if you opted for an electronic payment, you will receive an email advising you that your payment is ready. You may choose from Paypal, Venmo, ACH, or a Prepaid Card.

### VI. ATTESTATION & SIGNATURE

I swear and affirm that the information provided in this Claim Form, and any supporting documentation provided is true and correct to the best of my knowledge. I understand that my claim is subject to verification and that I may be asked to provide supplemental information by the Settlement Administrator before my claim is considered complete and valid.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date