#### WORKWEEK & ADDRESS CORRECTION FORM

Chipotle Services, LLC

San Francisco County Superior Court – Case No. CGC-15-544936

To be mailed a check from this settlement, you need not take any action. You do not need to return this Workweek Correction Form. If you do not opt out, a settlement check will be sent to you at the address below if the settlement receives final approval. You will also give up your rights to be part of any other lawsuit involving the same legal claims as the ones in this Litigation, and will release all such claims. You need only return this Workweek & Address Correction Form if you wish to (i) correct your mailing information below or (ii) challenge the accuracy of the information below regarding your total pay periods worked during the Calculation Period. You should also update the Claims Administrator with your new address if you move.

THE DEADLINE FOR SUBMITTING THIS FORM IS JANUARY 2, 2021. You may contact the Claims Administrator at a later date to update address information, but a delay in updating your address may result in mail or payments being sent to the wrong address.

IDENTIFICATION  «Contact»	Please Make any Name/Address Corrections Below:	
«Address_1» «City», «State» «ZIP_Code»		
☐ Please correct my address only. I do not dispucorrecting your address.)	ate my workweeks. (Check box and sign here if you are o	only

## II. GENERAL INFORMATION

SETTLEMENT CLASS MEMBER

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The Class includes all current and former non-exempt employees of Defendant, who were hired *before* August 1, 2014 and who worked in California at any time during the Class Period. "Class Period" shall be from October 1, 2014 through August 1, 2020.

### YOU WILL SUFFER NO RETALIATION OR ADVERSE ACTION FOR PARTICIPATING IN THIS SETTLEMENT.

This final approval hearing on the adequacy, reasonableness and fairness of the settlement will be held at 9:15 a.m. on February 19, 2021 in Department 304 of the San Francisco County Superior Court located at Civic Center Courthouse, 400 McAllister Street, San Francisco, CA 94102. **You are not required to attend this hearing.** 

## III. YOUR CLAIM INFORMATION

According to payroll records maintained by Chipotle, the total number of pay periods you worked at Chipotle as an employee in California during the Calculation Period ("Workweeks"), is: <u>«Total\_Weeks»</u> Workweeks.

Based on your workweeks, the total class members' workweeks, and the net settlement fund, we estimate your share of the settlement will be approximately «Est\_Set\_Amt» if you do not submit a Workweek Correction Form. This estimate may be too high or too low, and if any of the factors considered in the estimate change, the actual amount may also change.

# IV. <u>IF YOU DISPUTE THE INFORMATION ABOVE</u>

Please complete this Section only if you disagree with the information listed in Section III above.
I dispute the Workweek information in Section III. I believe I worked Workweeks at Chipotle during the time frame referenced above.
If there is a dispute about whether the Workweek information set forth in Section III is accurate, the dispute will be resolved by the Settlement Administrator. If you believe the number of Workweeks as listed in Section III is incorrect, please check the box below and send this signed and completed Form along with copies of any documents (please retain the originals for your records) that support your belief that the information set forth above is incorrect to the Settlement Administrator at the following address:
Turley v. Chipotle
cc/o Phoenix Settlement Administrators
P.O. Box 7208
Orange, CA 92863
Phone: (800) 523-5773
Fax: (949) 209-2503
Again, you need not take any action to participate in the settlement and you will be bound by the other provisions of the Settlement Agreement approved by the Court. If you make any corrections or dispute the number of Workweeks shown, this Workweek Correction Form will be deemed submitted by you when sent by first class mail and postmarked prior to the deadline. Do not submit this form to the Court.
$\square$ I dispute my workweeks.
I declare that the foregoing information is true and accurate, and that I have read and understand the Class Notice that was mailed with this Workweek & Address Correction Form.
Dated:
(Signature)