ELECTION NOT TO PARTICIPATE IN ("OPT OUT" FROM) CLASS ACTION SETTLEMENT

Superior Court of California, County of Sacramento
Katrina Fox v. Cares Community Health, et al.
Case No. 34-2019-00271128-CU-OE-GDS
consolidated with *Marion Schwarz v. Cares Community Health*
Case No. 34-2020-00282587-CU-OE-GDS

DO NOT SIGN OR SEND THIS DOCUMENT UNLESS YOU WISH TO EXCLUDE YOURSELF FROM THE SETTLEMENT. IF YOU EXCLUDE YOURSELF, YOU WILL NOT RECEIVE ANY PAYMENT FROM THE SETTLEMENT.

THIS DOCUMENT MUST BE POSTMARKED NO LATER THAN MAY 15, 2023. IT MUST BE SENT VIA REGULAR U.S. MAIL.

PLEASE MAIL THIS EXCLUSION FORM VIA REGULAR U.S. MAIL TO:

**CARES COMMUNITY HEALTH
C/O PHOENIX CLASS ACTION ADMINISTRATION SOLUTIONS
PO Box 7208,
Orange, California 92863**

IT IS MY DECISION <u>NOT</u> TO PARTICIPATE IN THE CLASS ACTION REFERRED TO ABOVE, AND <u>NOT</u> TO BE INCLUDED IN THE CLASS OF PLAINTIFFS IN THAT ACTION. I UNDERSTAND THAT BY EXCLUDING MYSELF, I WILL NOT RECEIVE ANY MONEY FROM THE SETTLEMENT, EXCEPT MY PORTION OF THE CIVIL PENALTIES ALLOCATED TO THE CALIFORNIA LABOR CODE PRIVATE ATTORNEYS GENERAL ACT OF 2004 ("PAGA"), LABOR CODE § 2698, *et seq.*, SETTLEMENT.

I ALSO UNDERSTAND THAT IF I ELECT TO OPT OUT OF THIS CLASS ACTION SETTLEMENT, ANY CLAIMS I HAVE WILL <u>NOT</u> BE RELEASED; EXCEPT THAT, EVEN IF I ELECT TO OPT OUT, I CANNOT PURSUE ANY ACTION UNDER PAGA AGAINST THE RELEASED PARTIES FOR ANY CLAIMS THAT AROSE BETWEEN MAY 27, 2019, AND SEPTEMBER 27, 2022.

I confirm that I worked for Cares Community Heath on an hourly-paid or non-exempt basis within the State of California at any time during the period from December 11, 2015, to September 27, 2022, and did not previously sign an individual separation agreement. I confirm that I have received and reviewed the Notice of Class Action Settlement in this action. I have decided to be excluded from the class, and I have decided **not** to participate in the proposed settlement.

Dated: _____

_____
(Signature)

_____
(Last four digits of Social Security number)

_____
(Type or print name and former name(s))

_____
(Telephone number)

_____
(Address)

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_____
(Address continued)