

**UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY**

IN RE: AMERICAN MEDICAL  
COLLECTION AGENCY, INC.  
CUSTOMER DATA SECURITY BREACH  
LITIGATION

This Document Relates To:

Labcorp Track

Case No. 19-md-2904 (JKS)(MAH)

MDL No. 2904

**DECLARATION OF ELIAS ROSE OF KROLL SETTLEMENT ADMINISTRATION  
LLC IN CONNECTION WITH FINAL APPROVAL OF SETTLEMENT**

I, Elias Rose, declare as follows:

1. I am a Senior Manager of Kroll Settlement Administration LLC (“Kroll”),<sup>1</sup> the Settlement Administrator appointed in the above-captioned case, whose principal office is located at One World Trade Center, 285 Fulton Street, 31st Floor, New York, New York 10007. I am over 21 years of age and am authorized to make this declaration on behalf of Kroll and myself. The following statements are based on my personal knowledge and information provided by other experienced Kroll employees working under my general supervision.

2. Kroll has extensive experience in class action matters, having provided services in class action settlements involving antitrust, privacy, securities fraud, labor and employment, consumer, and government enforcement matters. Kroll has provided notification and/or claims administration services in more than 3,000 cases.

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<sup>1</sup> Capitalized terms used but not defined herein shall have the meanings ascribed to them in the Settlement Agreement (as defined below).

### **BACKGROUND**

3. Kroll was appointed as the Settlement Administrator to provide notification and claims administration services in connection with the Class Action Settlement Agreement and Release (the “Settlement Agreement”) entered into in this Action. Kroll’s duties in connection with the settlement have and will include: (a) preparing and sending notices in connection with the Class Action Fairness Act; (b) receiving and analyzing the Settlement Class Data; (c) creating a Settlement Website with online claim-filing capabilities; (d) establishing a toll-free telephone number; (e) establishing a post office box for the receipt of mail; (f) preparing and sending the Short Form Notice and detachable Claim Form (“Postcard Notice”) via first-class mail; (g) preparing and sending the Short Form Notice via email (“Email Notice”); (h) receiving and processing mail from the United States Postal Service (“USPS”) with forwarding mailing addresses; (i) receiving and processing undeliverable mail, without a forwarding mailing address, from the USPS; (j) receiving and processing Claim Forms; (k) receiving and processing opt-out requests and objections; and (l) such other tasks as counsel for the Parties or the Court request Kroll to perform.

### **NOTICE PROGRAM**

#### **The CAFA Mailing**

4. As noted above, on behalf of the Defendant, Kroll provided notice of the proposed settlement pursuant to the Class Action Fairness Act, 28 U.S.C. §1715(b) (“the CAFA Notice”) on March 20, 2026. Kroll sent the CAFA Notice identifying the documents required, a true and correct copy of which is attached hereto as **Exhibit A**, via first-class certified mail, to (a) the Attorney General of the United States, (b) the fifty-three (53) state and territorial Attorneys General identified in the service list for the CAFA Notice, attached hereto as **Exhibit B**, and (c) via email to three (3) state Attorneys General as noted on **Exhibit B**. The CAFA Notice directed the Attorneys General to the website [www.CAFANotice.com](http://www.CAFANotice.com), a site that contains all the documents relating to the settlement referenced in the CAFA Notice.

### **Data and Case Setup**

5. On April 24, 2026, Kroll received one (1) data file from The Brattle Group. The file contained 14,512,698 records with Names and Addresses for known Settlement Class Members. Kroll undertook several steps to review the Settlement Class Data for the dissemination of the Short Form Notice, including standardizing and normalizing the data and the removal of 2,687,664 duplicate records, resulting in 11,825,034 unique records. Kroll then performed an email append which identified 6,054,020 available email addresses for Settlement Class Members. The remaining 5,771,014 Settlement Class Members for whom an email address was not identified would be sent Postcard Notices. Additionally, in an effort to ensure that Postcard Notices would be deliverable to Settlement Class Members for whom an email address was not obtained through the email append process, Kroll processed the Settlement Class Member mailing list through the USPS National Change of Address (“NCOA”) database and updated the Settlement Class Data with physical mailing address changes received from the NCOA.

6. On May 12, 2026, Kroll created a dedicated Settlement Website landing page entitled [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com). At the request of counsel for the Parties, a separate landing page was also created within the Settlement Website to present information specific to the Defendant. The Settlement Website “went live” on June 1, 2026, and contains a summary of the settlement, important dates and deadlines, contact information for the Settlement Administrator, answers to frequently asked questions, downloadable copies of relevant documents, including the Settlement Agreement, Preliminary Approval Order, Postcard Notice, Email Notice, Long Form Notice, Claim Form, and Plaintiffs’ Motion for Attorneys’ Fees and Expenses and Service Awards, and allowed Settlement Class Members an opportunity to file a Claim Form online. As of July 27, 2026, the Settlement Website has received 521,125 page views by approximately 358,000 total unique users.

7. On April 29, 2026, Kroll established a toll-free telephone number, (833) 447-6786, for Settlement Class Members to call and obtain additional information regarding the settlement through an Interactive Voice Response (“IVR”) system and through speaking with a live operator.

As of July 27, 2026, the IVR system has received 9,058 calls, and 773 callers have been connected to live operators.

8. On April 29, 2026, Kroll designated a post office box with the mailing address: *American Medical Collection Agency, Inc. Customer Data Security Breach Litigation Labcorp Settlement*, c/o Kroll Settlement Administration LLC, P.O. Box 5324, New York, NY 10150-5324, in order to receive requests for exclusion, Claim Forms, objections, and correspondence from Settlement Class Members.

### **The Notice Program**

9. Between June 2, 2026, and June 5, 2026, Kroll caused the mailing of 5,771,014 Postcard Notices via first-class mail. A true and correct copy of the Postcard Notice, along with the Long Form Notice and Claim Form, are attached hereto as **Exhibits C, D, and E**, respectively.

10. Between June 1, 2026, and June 5, 2026, Kroll caused the Email Notice to be sent to the 6,054,020 email addresses on file for Settlement Class Members, as noted above. A true and correct copy of a complete exemplar Email Notice (including the subject line) is attached hereto as **Exhibit F**.

### **NOTICE PROGRAM REACH**

11. As of July 27, 2026, 8,772 Postcard Notices were returned by the USPS with a forwarding physical mailing address. Of these, 8,772 Postcard Notices were automatically remailed by the USPS.

12. As of July 27, 2026, 1,329,197 emails were rejected/bounced back as undeliverable. In accordance with section 10.1 of the Settlement Agreement, Kroll is sending Postcard Notices to the 1,329,197 Settlement Class Members who had an undeliverable Email Notice, with mailing scheduled to commence on July 30, 2026.

13. As of July 27, 2026, 1,700,097 Postcard Notices were returned by the USPS as undeliverable as addressed, without a forwarding physical mailing address. Kroll performed an advanced address search on the 1,700,097 undeliverable records. The advanced address search

produced 1,445,070 updated addresses. Beginning on July 30, 2026, Kroll is re-mailing Postcard Notices to the 1,445,070 updated addresses obtained from the advanced address search.

14. Based on the foregoing, following all Postcard Notice re-mailings, Kroll has reason to believe that Short Form Notices will likely reach approximately 11,570,007 of the 11,825,034 Settlement Class Members, which will equate to a reach rate of the direct notice of approximately 97.84%. This reach rate is consistent with other court-approved, best-practicable notice programs and Federal Judicial Center Guidelines, which state that a notice plan that reaches<sup>2</sup> over 70% of targeted class members is considered a high percentage and the “norm” of a notice campaign.

| <b>Direct Notice Program Dissemination &amp; Reach</b>                           |                                           |                                    |
|----------------------------------------------------------------------------------|-------------------------------------------|------------------------------------|
| <b>Description</b>                                                               | <b>Volume of Settlement Class Members</b> | <b>Percentage of Class Members</b> |
| Settlement Class Members                                                         | 11,825,034                                | 100.0%                             |
| <b>Email Notice Campaign</b>                                                     |                                           |                                    |
| (+) Email Notices Sent                                                           | 6,054,020                                 | 51.20%                             |
| (-) Total Undeliverable Email Notices                                            | (1,329,197)                               | 11.24%                             |
| <b>Initial Postcard Notice Mailing</b>                                           |                                           |                                    |
| (+) Postcard Notices Mailed (Initial Campaign)                                   | 5,771,014                                 | 48.80%                             |
| (-) Total Postcard Notices returned as undeliverable                             | (1,700,097)                               | 14.38%                             |
| <b>Supplemental Postcard Notice Mailing</b>                                      |                                           |                                    |
| (+) Total Unique Postcard Notices to be Re-mailed                                | 1,445,070                                 | 12.22%                             |
| (+) Total Unique Postcard Notices to be Mailed (for Undeliverable Email Notices) | 1,329,197                                 | 11.24%                             |
| <b>Direct Notice Program Reach</b>                                               |                                           |                                    |
| (=) Likely to Receive Direct Notice                                              | 11,570,007                                | 97.84%                             |

### **CLAIM ACTIVITY**

15. The Claims Deadline is September 3, 2026.

<sup>2</sup> FED. JUD. CTR., *Judges’ Class Action Notice and Claims Process Checklist and Plain Language Guide* (2010), available at <https://www.fjc.gov/sites/default/files/2012/NotCheck.pdf>. The guide suggests that the minimum threshold for adequate notice is 70%.

16. As of July 27, 2026, Kroll has received 30,229 Claim Forms through the mail and 122,468 Claim Forms filed electronically through the Settlement Website, for a total of 152,697 claims received. Kroll is still in the process of reviewing and validating Claim Forms.

17. To prevent Claim Forms from being filed by individuals outside the Settlement Class and to curtail fraud, Settlement Class Members were provided a unique “Class Member ID” on their respective notices as part of the claims process. The Class Member ID is required for Settlement Class Members to file a Claim Form online.

### **EXCLUSIONS AND OBJECTIONS**

18. The Opt-Out Date and Objection Date was July 27, 2026.

19. As of July 30, 2026, Kroll has received four (4) timely exclusion requests and three (3) objections to the settlement. A list of the exclusions is attached hereto as **Exhibit G**.

### **CERTIFICATION**

I declare under penalty of perjury under the laws of the United States that the above is true and correct to the best of my knowledge and that this declaration was executed on July 30, 2026, in Portland, Oregon.



ELIAS ROSE

# Exhibit A



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VIA U.S. MAIL

Date: 3/20/2026

To: All "Appropriate" Federal and State Officials Per 28 U.S.C. § 1715  
(see attached service list)

Re: CAFA Notice for the Proposed Settlement in In Re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Labcorp Track): Civil Action No. 19-MD-2904 (D.N.J.), Pending in the United States District Court District of New Jersey.

Pursuant to Section 3 of the Class Action Fairness Act of 2005 ("CAFA"), 28 U.S.C. § 1715, Defendant Laboratory Corporation of America Holdings ("Labcorp" or "Defendant") hereby notifies you of the proposed settlement of the above-captioned action (the "Action"), currently pending in the United States District Court for the District of New Jersey (the "Court").

Eight items must be provided to you in connection with any proposed class action settlement pursuant to 28 U.S.C. § 1715(b). Each of these items is addressed below, and all exhibits are available for download at [www.CAFANotice.com](http://www.CAFANotice.com) under the folder entitled *In Re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Labcorp Track)*:

1. 28 U.S.C. § 1715(b)(1) – a copy of the complaint and any materials filed with the complaint and any amended complaints.

The First Amended Consolidated Class Action Complaint is available as **Exhibit A**. The Consolidated Class Action Complaint is available as **Exhibit B**. The underlying complaints which were subsequently consolidated into the above-captioned action are available at **Exhibits C1-C22**.

2. 28 U.S.C. § 1715(b)(2) – notice of any scheduled judicial hearing in the class action.

On March 13, 2026, Plaintiff filed a motion for preliminary approval of the class action settlement, and the date of the preliminary approval hearing has not yet been set. The Court has not yet scheduled the Final Fairness Hearing for this matter. The proposed Preliminary Approval Order is available as **Exhibit D**.

3. 28 U.S.C. § 1715(b)(3) – any proposed or final notification to class members.

Copies of the proposed Long Form Notice, Short Form Notice, and Claim Form will be made available to Settlement Class Members and will be available on the Settlement Website created for the administration of this matter. These are available as **Exhibits E, F, and G**, respectively. The Notices describe, among other things, the Claim submission process and the Settlement Class Members' rights to object or exclude themselves from the Settlement Class.

4. 28 U.S.C. § 1715(b)(4) – any proposed or final class action settlement.

The Class Action Settlement Agreement and Release ("Settlement Agreement") is available as **Exhibit H**.

5. 28 U.S.C. § 1715(b)(5) – any settlement or other agreement contemporaneously made between class counsel and counsel for defendants.

There are no other settlements or other agreements between Settlement Class Counsel and Defendant’s Counsel beyond what is set forth in the Settlement Agreement.

6. 28 U.S.C. § 1715(b)(6) – any final judgment or notice of dismissal.

The Court has not yet entered a final judgment or notice of dismissal. Accordingly, no such document is presently available.

7. 28 U.S.C. § 1715(b)(7) – (A) If feasible, the names of class members who reside in each State and the estimated proportionate share of the claims of such members to the entire settlement to that State’s appropriate State official; or (B) if the provision of the information under subparagraph (A) is not feasible, a reasonable estimate of the number of class members residing in each State and the estimated proportionate share of the claims of such members to the entire settlement.

The definition of the Settlement Class in the Settlement Agreement is: “all individuals for whom Labcorp transmitted personal information to Retrieval-Masters Creditor’s Bureau, Inc. d/b/a American Medical Collection Agency (“AMCA”), and whose information was contained in the computer systems implicated by the cybersecurity incident at AMCA that occurred between approximately August 2018 and March 2019.” The Settlement Class specifically excludes: (i) Labcorp and its officers and directors; (ii) the Judge and/or Magistrate assigned to evaluate the fairness of this settlement; and (iii) any other Person found by a court of competent jurisdiction to be guilty under criminal law of initiating, causing, aiding, or abetting the Security Incident or who pleads *nolo contendere* to any such charge.

An estimated breakdown by state for the Settlement Class, which is estimated to exceed 10 million individuals, is available as **Exhibit I**. The estimated proportionate share of the claims of Settlements Class Members is not known at this time and is contingent on the submission of claims by Settlement Class Members.

8. 28 U.S.C. § 1715(b)(8) – any written judicial opinion relating to the materials described in 28 U.S.C. § 1715(b) subparagraphs (3) through (6).

There has been no written judicial opinion. Accordingly, no such document is presently available.

If you have any questions about this notice, the Action, or the materials available for download at [www.CAFANotice.com](http://www.CAFANotice.com) under the folder entitled *In Re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Labcorp Track)*, please contact the undersigned below.

Respectfully submitted,

Gio Santiago  
Senior Manager  
[Gio.Santiago@Kroll.com](mailto:Gio.Santiago@Kroll.com)

# Exhibit B

**CAFA NOTICE SERVICE LIST****U.S. Attorney General**

Pamela Bondi  
U.S. Department of Justice  
950 Pennsylvania Avenue NW  
Washington, D.C. 20530

**Alabama Attorney General**

Steve Marshall  
501 Washington Ave.  
P.O. Box 300152  
Montgomery, AL 36130

**Alaska Attorney General**

Stephen J. Cox  
1031 W. 4th Avenue, Suite 200  
Anchorage, AK 99501

**American Samoa Attorney General**

Gwen Tauiiili-Langkilde  
Executive Office Building, Utulei  
3rd FL, P.O. Box 7  
Utulei, AS 96799

**Arizona Attorney General**

Kris Mayes  
2005 N Central Ave.  
Phoenix, AZ 85004

**Arkansas Attorney General**

Tim Griffin  
323 Center St., Suite 200  
Little Rock, AR 72201

**California Attorney General**

CAFA Coordinator  
Office of the Attorney General  
Consumer Protection Section  
455 Golden Gate Ave., Suite 11000  
San Francisco, CA 94102

**Colorado Attorney General**

Phil Weiser  
Ralph L. Carr Colorado Judicial Center  
1300 Broadway, 10th Floor  
Denver, CO 80203

**Connecticut Attorney General**

William Tong  
165 Capitol Avenue  
Hartford, CT 06106  
\*AG.CAFA@CT.GOV

\*Preferred

**Delaware Attorney General**

Kathy Jennings  
Carvel State Office Building  
820 N. French St.  
Wilmington, DE 19801

**District of Columbia Attorney General**

Brian Schwalb  
400 6th Street NW  
Washington, D.C. 20001

**Florida Attorney General**

James Uthmeier  
Office of the Attorney General  
The Capitol, PL-01  
Tallahassee, FL 32399

**Georgia Attorney General**

Chris Carr  
40 Capitol Square, SW  
Atlanta, GA 30334

**Guam Attorney General**

Douglas Moylan  
Office of the Attorney General ITC Building  
590 S. Marine Corps Dr., Ste. 706  
Tamuning, Guam 96913

**Hawaii Attorney General**

Anne E. Lopez  
425 Queen St.  
Honolulu, HI 96813

**Idaho Attorney General**

Raúl Labrador  
700 W. Jefferson Street, Suite 210  
P.O. Box 83720  
Boise, ID 83720

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**Illinois Attorney General**

Kwame Raoul  
James R. Thompson Ctr.  
100 W. Randolph St.  
Chicago, IL 60601

**Indiana Attorney General**

Todd Rokita  
Indiana Government Center South  
302 West Washington St., 5th Fl.  
Indianapolis, IN 46204

**Iowa Attorney General**

Brenna Bird  
Hoover State Office Building  
1305 E. Walnut  
Des Moines, IA 50319

**Kansas Attorney General**

Kris Kobach  
120 S.W. 10th Ave., 2nd Fl.  
Topeka, KS 66612

**Kentucky Attorney General**

Russell Coleman  
700 Capital Avenue  
Capitol Building, Suite 118  
Frankfort, KY 40601

**Louisiana Attorney General**

Liz Murrill  
1885 North Third St.  
Baton Rouge, LA 70802

**Maine Attorney General**

Aaron Frey  
State House Station 6  
Augusta, ME 04333

**Maryland Attorney General**

Anthony G. Brown  
200 St. Paul Place  
Baltimore, MD 21202

**Massachusetts Attorney General**

Office of Massachusetts Attorney General  
Andrea Joy Campbell  
ATTN: CAFA Coordinator/General  
Counsel's Office

One Ashburton Place  
Boston, MA 02108

**Michigan Attorney General**

Dana Nessel  
P.O. Box 30212  
525 W. Ottawa St.  
Lansing, MI 48909

**Minnesota Attorney General**

Keith Ellison  
445 Minnesota St, Suite 600  
St. Paul, MN 55101

**Mississippi Attorney General**

Lynn Fitch  
Department of Justice, P.O. Box 220  
Jackson, MS 39205

**Missouri Attorney General**

Catherine Hanaway  
Supreme Ct. Bldg., 207 W. High St.  
P.O. Box 899  
Jefferson City, MO 65101

**Montana Attorney General**

Austin Knudsen  
Office of the Attorney General, Justice Bldg.  
215 N. Sanders St., Third Floor  
P.O. Box 201401  
Helena, MT 59620

**Nebraska Attorney General**

Mike Hilgers  
2115 State Capitol  
P.O. Box 98920  
Lincoln, NE 68509

**Nevada Attorney General**

Aaron D. Ford  
CAFA Coordinator  
Office of the Nevada Attorney General  
Bureau of Consumer Protection  
100 N. Carson Street  
Carson City, NV 89701  
\* NVAGCAFAnotices@ag.nv.gov

\* Preferred

**New Hampshire Attorney General**

John Formella  
33 Capitol Street  
Concord, NH 03301

**New Jersey Attorney General**

Jennifer Davenport  
Richard J. Hughes Justice Complex  
25 Market Street, 8th Floor  
P.O. Box 080  
Trenton, NJ 08625

**New Mexico Attorney General**

Raul Torrez  
P.O. Drawer 1508  
Santa Fe, NM 87504-1508

**New York Attorney General**

Letitia A. James  
CAFA Coordinator  
Office of the New York State Attorney  
General  
28 Liberty Street, 15th Floor  
New York NY 10005  
\* CAFA.Notices@ag.ny.gov

\* Preferred

**North Carolina Attorney General**

Jeff Jackson  
Dept. of Justice, P.O. Box 629  
Raleigh, NC 27602-0629

**North Dakota Attorney General**

Drew Wrigley  
State Capitol  
600 E. Boulevard Ave.  
Bismarck, ND 58505

**Northern Mariana Islands Attorney General**

Edward E. Manibusan  
Administration Building  
P.O. Box 10007  
Saipan, MP 96950

**Ohio Attorney General**

Dave Yost  
State Office Tower  
30 E. Broad St., 14th Floor  
Columbus, OH 43215

**Oklahoma Attorney General**

Gentner Drummond  
313 NE 21st Street  
Oklahoma City, OK 73105

**Oregon Attorney General**

Dan Rayfield  
Oregon Department of Justice  
1162 Court St. NE  
Salem, OR 97301

**Pennsylvania Attorney General**

Dave Sunday  
Pennsylvania Office of Attorney General  
16th Floor, Strawberry Square  
Harrisburg, PA 17120

**Puerto Rico Attorney General**

Lourdes Lynnette Gomez-Torres  
P.O. Box 9020192  
San Juan, PR 00902

**Rhode Island Attorney General**

Peter F. Neronha  
150 S. Main St.  
Providence, RI 02903

**South Carolina Attorney General**

Alan Wilson  
Rembert C. Dennis Office Bldg.  
P.O. Box 11549  
Columbia, SC 29211

**South Dakota Attorney General**

Marty Jackley  
1302 East Highway 14, Suite 1  
Pierre, SD 57501

**Tennessee Attorney General**

Jonathan Skrmetti  
PO Box 20207  
Nashville, TN 37202

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**Texas Attorney General**

Ken Paxton  
Capitol Station  
P.O. Box 12548  
Austin, TX 78711

**Wyoming Attorney General**

Keith G. Kautz  
State Capitol Bldg.  
200 W. 24th Street  
109 State Capitol  
Cheyenne, WY 82002

**U.S. Virgin Islands Attorney General**

Gordon C. Rhea  
3438 Kronprindsens Gade  
GERS Building, 2nd Floor  
St. Thomas, Virgin Islands 00802

**Utah Attorney General**

Derek Brown  
State Capitol, Rm. 236  
Salt Lake City, UT 84114-0810

**Vermont Attorney General**

Charity R. Clark  
109 State St.  
Montpelier, VT 05609

**Virginia Attorney General**

Jay Jones  
202 North Ninth Street  
Richmond, VA 23219

**Washington Attorney General**

Nick Brown  
1125 Washington St. SE  
P.O. Box 40100  
Olympia, WA 98504

**West Virginia Attorney General**

John McCuskey  
State Capitol Complex, Bldg. 1, Rm. E-26  
1900 Kanawha Blvd. E  
Charleston, WV 25305

**Wisconsin Attorney General**

Josh Kaul  
Wisconsin Department of Justice State  
Capitol, Room 114 East  
P.O. Box 7857  
Madison, WI 53707

# Exhibit C



United States District Court, District of New Jersey  
In re: AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA  
SECURITY BREACH LITIGATION (All Actions Against Laboratory Corporation of  
America Holdings); Case No. 19-md-2904

## Class Action Settlement Notice

Authorized by the United States District Court  
District of New Jersey



Example QR Code.  
Replace this with case  
specific QR Code.



Your  
information  
may have been  
impacted in an  
alleged data  
breach at a  
medical  
collection  
agency.

There is a  
\$35,000,000  
settlement of a  
lawsuit.  
You may be  
entitled to money.

To be part of this settlement,  
you must respond by  
September 3, 2026.

You can visit  
[www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com)  
to learn more.

### Key things to know:

- This is an important legal document.
- If you take no action and are a Settlement Class Member, any ruling from the Court will apply to you, and you will not be able to sue Laboratory Corporation of America Holdings about the same issues.

- If you have questions or need assistance, please call 1-833-447-6786.
- You can learn more at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) or by scanning the QR code.

AMERICAN MEDICAL COLLECTION AGENCY,  
INC. CUSTOMER DATA SECURITY BREACH  
LITIGATION LABCORP SETTLEMENT  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324

**Court-Approved  
Legal Notice**



This is an important notice  
about a class action lawsuit.

«ScanString»  
Postal Service: Please do not mark barcode

---

Notice ID: «Notice ID»  
Confirmation Code: «Confirmation Code»  
«FirstName» «LastName»  
«Address1»  
«Address2»  
«City», «StateCd» «Zip»  
«CountryCd»

**CLAIM FORM**

Claims must be postmarked no later than September 3, 2026 or submitted online no later than September 3, 2026.

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

**Monetary Compensation:** If you want to submit a Claim for an Out-of-Pocket Loss Payment, visit [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) to submit your Claim Form and supporting documentation online or download a Claim Form to complete and return by mail. If you make a claim for Out-of-Pocket Losses you **cannot** also claim an Alternative Cash Payment.

**Alternative Cash Payment:** Do you want an Alternative Cash Payment estimated at \$50 instead of Out-of-Pocket Losses?  
☐ YES ☐ NO. This value may be increased or decreased after payments for valid claims, settlement administrative costs, service awards for named plaintiffs, and attorneys' fees and expenses are deducted from the Settlement Fund.

**Medical Monitoring Services:** Would you like to receive two (2) years of Monitoring Services through CyEx Medical Shield Pro? ☐ YES ☐ NO. You can receive Monitoring Services in addition to claiming Out-of-Pocket Losses or an Alternative Cash Payment. To receive Monitoring Services, you must provide your email address here: \_\_\_\_\_

To receive a payment from this Settlement via an electronic payment, you must submit the Claim Form electronically at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) by **September 3, 2026**. If you submit your claim through the mail using this Claim Form, payment will be mailed to the address provided above.

I swear under penalty of perjury that I am eligible to make a claim and that the information provided in this Claim Form is true.

Signature: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_ Print Name: \_\_\_\_\_

*AMERICAN MEDICAL COLLECTION AGENCY, INC.  
CUSTOMER DATA SECURITY BREACH LITIGATION  
LABCORP SETTLEMENT*

Attn: Claim Forms

c/o Kroll Settlement Administration LLC

PO Box 5324

New York, NY 10150-5324

# Exhibit D



United States District Court, District of New Jersey

*In re: AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER  
DATA SECURITY BREACH LITIGATION (All Actions Against Laboratory  
Corporation of America Holdings)*

Case No. 19-md-2904

# Class Action Notice

***Authorized by the District of New Jersey***

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Are you an individual who received diagnostic services from Laboratory Corporation of America Holdings?

There is a \$35,000,000 settlement of a lawsuit related to an alleged data breach.

You may be entitled to money.

To be part of this settlement, you should:

Read this Notice.

Respond by September 3, 2026.

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Important things to know:

- If you take no action and are a Settlement Class Member, you will still be bound by the settlement, and your rights will be affected. ***Please read this Notice carefully and completely.***
- You can learn more at: [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com)

Questions? Call 1-833-447-6786 Toll-Free or Visit  
[www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com)

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# About This Notice

## Why did I get this Settlement Class Notice?

This Settlement Class Notice had been sent to you because you may be a Settlement Class Member in the United States whose Personally Identifiable Information ("PII") and/or Protected Health Information was allegedly impacted in the cybersecurity incident reported by American Medical Collection Agency ("AMCA") as affecting its computer systems between approximately August 1, 2018 through March 30, 2019 ("Security Incident").

The Court in charge of the case is the U.S. District Court for New Jersey, and the lawsuit is known as *In re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Laboratory Corporation of America Holdings)*: Civil Action No. 19-md-2904.

The Court authorized this Settlement Class Notice because you are entitled to know about your rights under a proposed class action settlement with Laboratory Corporation of America Holdings ("Labcorp" or "Defendant") before the Court decides whether to approve the Settlement. If the Court approves the Settlement, and after objections and appeals are resolved, a Settlement Administrator appointed by the Court will make the cash payments and distribute access codes for credit monitoring services that the Settlement allows.

This Notice package explains the lawsuit, the Settlement, your rights, what benefits are available, who is eligible for them, and how to get them.

## What do I do next?

Read this Settlement Class Notice to understand the settlement and to determine if you are a Settlement Class Member. Then, decide if you want to:

| SUMMARY OF YOUR LEGAL RIGHTS AND OPTIONS IN THIS SETTLEMENT |                                                                                                                                                                                                                                                                                                                                                                                                                                              | DEADLINE                 |
|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>SUBMIT A CLAIM</b>                                       | <p>The only way to receive benefits from this settlement is by submitting a valid and timely Claim Form.</p> <p>The fastest way to submit your Claim Form is online at <a href="http://www.amcadatabreachsettlement.com">www.amcadatabreachsettlement.com</a></p>                                                                                                                                                                            | <b>September 3, 2026</b> |
| <b>OPT OUT OF THE SETTLEMENT</b>                            | You can choose to opt out of the settlement and receive no benefits. This is the only option that potentially allows you to ever be part of any other lawsuit against Labcorp or any other Released Parties about the legal claims related to the issues raised in this Litigation, subject to any defenses Labcorp may have to such claims, including the statutes of limitations. You can hire your own legal counsel at your own expense. | <b>July 27, 2026</b>     |
| <b>OBJECT TO THE SETTLEMENT AND/OR ATTEND A HEARING</b>     | If you do not opt out of the settlement, you may object to it by writing to the Court about why you don't like the settlement. You may also object to Class Settlement Class Counsel's attorneys' fees and expense request, and ask the Court for permission to speak about your objection at the Final Fairness Hearing.                                                                                                                    | <b>July 27, 2026</b>     |
| <b>DO NOTHING</b>                                           | Unless you opt out of the settlement, you are automatically part of the settlement. If you do nothing, you will not receive benefits from this settlement and you will give up the right to sue, continue to sue, or be part of another lawsuit against Labcorp related to the legal claims resolved by this settlement.                                                                                                                     | No Deadline              |

The Court in charge of this case still has to decide whether to approve the settlement.

Read on to understand the specifics of the settlement and what each choice would mean for you.

## What are the most important dates?

Your deadline to object or opt out: **July 27, 2026**

Final Fairness Hearing: **August 20, 2026**

Your deadline to submit a Claim Form: **September 3, 2026**

## Basic Information

### What is this lawsuit about?

This class action lawsuit concerns the AMCA Security Incident, which may have impacted your personal information. Defendant Labcorp denies all claims alleged against it and denies all charges of wrongdoing or liability. The settlement is not an admission of wrongdoing or an indication that Defendant has violated any laws, but rather the resolution of disputed claims.

### What is a class action?

In a class action, one or more individuals sue on behalf of other people with similar claims. These individuals are known as "Plaintiffs" or "Settlement Class Representatives." Together, the people included in the class action are called a "class" or "class members." One court resolves the lawsuit for all class members, except for those who opt out of the settlement.

### Why is there a settlement?

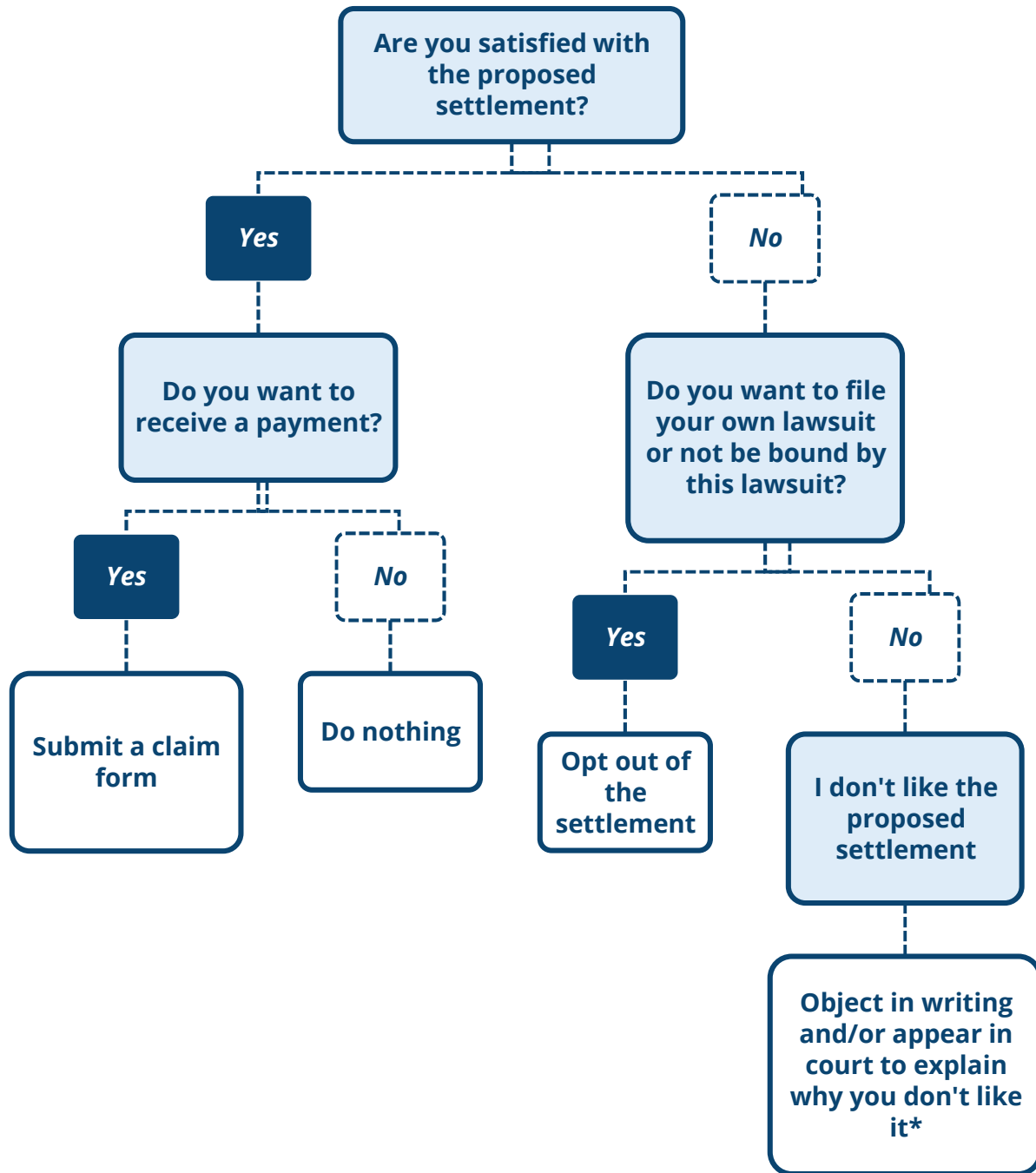
The Court did not decide in favor of Plaintiffs or Defendant. Plaintiffs and Defendant have agreed to a settlement to avoid the costs and risks of a trial, and to allow the Settlement Class Members to receive benefits from the settlement. Plaintiffs and their attorneys think the settlement is best for all Settlement Class Members.

### How do I weigh my options?

You have four options. You can stay in the settlement and submit a claim, you can opt out of the settlement, you can object to the settlement, or you can do nothing. This chart shows the effects of each option:

|                                                             | <b>Submit a Claim</b> | <b>Opt Out</b> | <b>Object</b> | <b>Do Nothing</b> |
|-------------------------------------------------------------|-----------------------|----------------|---------------|-------------------|
| <b>Can I receive settlement money if I . . .</b>            | YES                   | NO             | YES           | NO                |
| <b>Am I bound by the terms of the settlement if I . . .</b> | YES                   | NO             | YES           | YES               |
| <b>Can I pursue my own case if I . . .</b>                  | NO                    | YES            | NO            | NO                |
| <b>Will the class lawyers represent me if I . . .</b>       | YES                   | NO             | NO            | YES               |

## What is the best path for me?



*\*You can object to the settlement AND submit a Claim Form to receive payment, but you must submit a Claim Form to receive payment.*

## Who is in the settlement?

### Who is included in the settlement?

The Settlement Class is defined as: All individuals for whom Labcorp transmitted personal information to Retrieval-Masters Creditor's Bureau, Inc., d/b/a American Medical Collection Agency ("AMCA"), and such information was contained in the computer systems implicated by the cybersecurity incident at AMCA that occurred between approximately August 2018 and March 2019.

### Are there exceptions to being included?

Yes. Excluded from the Settlement Class are: (i) Labcorp and its officers and directors; (ii) the Judge and/or Magistrate assigned to evaluate the fairness of this settlement; and (iii) any other Person found by a court of competent jurisdiction to be guilty under criminal law of initiating, causing, aiding, or abetting the Security Incident or who pleads *nolo contendere* to any such charge.

If you are not sure whether you are included in the Settlement Class, you can ask for free help by contacting the Settlement Administrator by mail, email, or by calling toll-free.

AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA SECURITY  
BREACH LITIGATION LABCORP SETTLEMENT  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324  
1-833-447-6786

You may also view the Settlement Agreement at:

[www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com)

## The Settlement Benefits

### What does the settlement provide?

The settlement provides for the creation of a \$35,000,000.00 Settlement Fund to pay for: (i) Out-of-Pocket Losses, (ii) Monitoring Services, (iii) Alternative Cash Payments, (iv) Notice and Administrative Costs, (v) Taxes, (vi) Service Awards, and (vii) Attorneys' Fees and Expenses. The settlement benefits are summarized below. Visit [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) for a full description of these benefits.

Two types of claims may be made: (1) Out-of-Pocket Losses from verifiable, documented unreimbursed costs or expenditures that Settlement Class Member actually incurred and that are fairly and reasonably traceable to the AMCA Security Incident up to \$5,000; or (2) Alternative Cash Payment which provides for a \$50 per Settlement Class Member payment, both subject to pro rata increases or decreases dependent on the number of claims filed.

A Settlement Class Member may also elect to receive two (2) years of CyEx Medical Shield Pro medical and healthcare information monitoring services.

**Compensation for Out-of-Pocket Losses.** Participating Settlement Class Members can claim up to a total of \$5,000 per person for out-of-pocket losses incurred as a result of the Security Incident, including, without limitation, the following: (i) unreimbursed costs, expenses, losses or charges incurred a result of identity theft or identity fraud, medical fraud, or other alleged misuse of Settlement Class Members' personal information; (ii) professional service costs—such as law firms or credit repair services—related to misuse of Settlement Class Members' personal information; (iii) miscellaneous expenses incurred related to any Out-Of-Pocket Loss such as notary, fax, postage, copying, mileage, and long-distance telephone charges; (iv) credit monitoring costs that were incurred on or after August 1, 2018, through the date of the Claims Deadline; (v) up to 10 total hours for verified and documented time spent remedying fraud, identity theft, or other misuse of a Settlement Class Member's Personal Information that is fairly traceable to the AMCA Security Incident at \$25 per hour. Out-of-Pocket Losses are subject to increases or decreases pro rata depending upon the number of claims filed.

Settlement Class Members submitting claims for Out-of-Pocket Losses must submit documentation and an attestation supporting their claims. This can include receipts or other documentation that document the costs incurred but does not include documentation that is "self-prepared" by the claimant. "Self-prepared" documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support to other submitted documentation. The attestation must state that the monetary losses are fairly traceable to the Security Incident and were not incurred due to some other event or reason.

**Alternative Cash Payment.** In lieu of seeking Out-of-Pocket Losses, Settlement Class Members may submit a claim for an Alternative Cash Payment estimated to be \$50 per valid claimant. After payment of Notice and Administration Expenses, Service Awards, and Attorneys' Fees and Expenses, Out-of-Pocket Losses, and Taxes from the Settlement Fund, the remaining amount of the Net Settlement Fund will be evenly distributed to each Settlement Class Member who submits a timely and Valid Claim for an Alternative Cash Payment.

**Monitoring Services.** During the Claims Period, Settlement Class Members may also claim and enroll in up to two (2) years of medical and healthcare information Monitoring Services provided by CyEx through its Medical Shield Pro product.

### What Claims am I releasing if I stay in the Settlement Class?

Unless you opt out of the settlement, you cannot sue, continue to sue, or be part of any other lawsuit against Labcorp arising out of or relating to the AMCA Security Incident. The "Releases" section of the Settlement Agreement describes the legal claims that you give up if you remain in the Settlement Class. The Settlement Agreement is available for review at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com).

## Submitting a Claim Form for Settlement Benefits

### How do I submit a Claim for a Settlement Benefit?

The fastest way to submit your Claim Form is online at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com). If you prefer, you can download the Claim Form from the website and mail it to the Settlement Administrator at:

*AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA SECURITY  
BREACH LITIGATION LABCORP SETTLEMENT  
Attn: Claims  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324*

You may also contact the Settlement Administrator to request a Claim Form by calling toll-free 1-833-447-6786 or by writing to the address above.

## What is the deadline for submitting a Claim?

If you are submitting a Claim Form online, you must do so by **September 3, 2026**. If you are submitting a claim by U.S. mail, the completed and signed Claim Form, along with any supporting documentation, must be mailed so it is postmarked no later than **September 3, 2026**.

## When will the settlement benefits be issued?

The Court will hold a Final Fairness Hearing on **August 20, 2026**. If the Court approves the settlement, there may be appeals. It is always uncertain whether appeals will be filed and, if so, how long it will take to resolve them.

Settlement benefits will be distributed if the Court grants final approval of the settlement and after any appeals are resolved, or after the period to seek an appeal has expired.

## The Lawyers Representing You

### Do I have a lawyer in the case?

Yes, the Court appointed James E. Cecchi of Carella, Byrne, Cecchi, Brody & Agnello, P.C.; Linda P. Nussbaum of Nussbaum Law Group, P.C.; and Stuart A. Davidson of Robbins Geller Rudman & Dowd LLP to represent you and other Settlement Class Members as Class Counsel.

James E. Cecchi

**CARELLA, BYRNE, CECCHI, BRODY & AGNELLO, P.C.**

5 Becker Farm Road  
Roseland, NJ 07068

Linda P. Nussbaum

**NUSSBAUM LAW GROUP, P.C.**

1225 Franklin Avenue  
Suite 325  
Garden City, NY 11530

Stuart A. Davidson

**ROBBINS GELLER RUDMAN & DOWD LLP**

225 NE Mizner Boulevard  
Suite 720  
Boca Raton, Florida 33432

## Should I get my own lawyer?

You will not be charged for Settlement Class Counsel's services. If you want to be represented by your own lawyer, you may hire one at your own expense.

## How will Class Counsel be paid?

Settlement Class Counsel will file a Fee Application for an award of attorneys' fees and expenses to be paid from the Settlement Fund of up to one-third of the Settlement Fund. As part of the Fee Application, Settlement Class Counsel will also seek Service Awards of \$5,000 for each Class Representative to be paid from the Settlement Fund.

Class Counsel's Fee Application will be available at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) after it is filed with the Court.

## Excluding Yourself from the Settlement

### How do I opt out of the settlement?

If you do not want to receive any benefits from the settlement, and you want to keep your right, if any, to separately sue Labcorp about the legal issues in this case (subject to any defenses Labcorp may have to such a suit, including the statutes of limitations), there are steps that you must take to exclude yourself from the Settlement Class. This is called requesting an exclusion from, or "opting out" of the Settlement Class. The deadline to submit a request for exclusion from the settlement is **July 27, 2026**.

To exclude yourself from the settlement, you must submit a written request for exclusion that includes the following information:

- (i) the name of the proceedings: *In re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Laboratory Corporation of America Holdings), Civil Action No. 19-md-2904*, pending in the United States District Court, District of New Jersey;
- (ii) Your full name;
- (iii) Your current mailing address and telephone number;
- (iv) Your personal signature; and
- (v) the words "Request for Exclusion" or a comparable statement that You do not wish to participate in the settlement, or some other clear manifestation of the intent to opt out of the settlement.

Your request for exclusion must be mailed to the Settlement Administrator at the address below, **postmarked no later than July 27, 2026.**

AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA SECURITY  
BREACH LITIGATION LABCORP SETTLEMENT  
ATTN: Exclusion Request  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324

If you exclude yourself, you are telling the Court that you do not want to be part of the settlement. You will not be eligible to receive any settlement benefits if you exclude yourself.

You may only exclude yourself—not any other person. **Any Settlement Class Member who does not file a timely request for exclusion in accordance with this section will lose the opportunity to exclude himself or herself from the settlement and will be bound by the settlement.**

## Commenting on or Objecting to the Settlement

### How do I tell the Court if I like or do not like the settlement?

If you are a Settlement Class Member and you do not like the settlement, you can object to it, if you choose. You can give reasons why you think the Court should not approve it. The Court will consider your views.

For an objection to be a valid objection under the settlement, it must include or substantially comply with the following: (i) Your full name, address, telephone number, and email address; (ii) the case name and docket number: *In re American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Laboratory Corporation of America Holdings)*, No. 19-md-2904 (JKS) (MAH) (D.N.J.); (iii) information identifying You as a Settlement Class Member, including proof that You are a member of the Settlement Class, such as the class member identification number on the Short Form or email notice you receive about the settlement; (iv) a written statement of all grounds for the objection, including whether the objection applies only to You, to a subset of the Settlement Class, or to the entire Settlement Class, accompanied by any legal support for the objection You believe applicable; (v) the identity of any and all counsel representing You in connection with the objection; (vi) the identity of all class action cases in which You or Your counsel has objected; (vii) a statement whether You and/or Your counsel will appear at the Final Fairness Hearing; and (viii) Your personal signature on the written objection. The Court, in its discretion, may authorize additional discovery of objectors.

You or Your counsel may also file their objection with the Court through the Court's ECF system, with service on Plaintiffs' Counsel and Defendant's Counsel, to be made through the ECF system.

To be timely, an objection must be mailed to Settlement Administrator, so it is postmarked no later than **July 27, 2026**.

*AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA SECURITY  
BREACH LITIGATION LABCORP SETTLEMENT*

ATTN: Objection  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324

## What is the difference between objecting and excluding?

Objecting is telling the Court that you do not like something about the settlement. You can object to the settlement only if you do not exclude yourself from the settlement. Excluding yourself from the settlement is opting out and stating to the Court that you do not want to be part of the settlement. If you opt out of the settlement, you cannot object to it because the settlement no longer affects you.

## The Court's Final Fairness Hearing

### When is the Court's Final Fairness Hearing?

The Court will hold a Final Fairness Hearing on **August 20, 2026 at 11:00 a.m.**, before U.S. District Judge Michael A. Hammer of the U.S. District Court for the District of New Jersey, at the Martin Luther King Federal Courthouse, 50 Walnut Street, Newark, NJ 07102, in Courtroom 2C.

At the Final Fairness Hearing, the Court will consider whether to approve the settlement, Settlement Class Counsel's Fee Application, and application for Service Awards. The Court will also consider any objections to the settlement that were submitted in accordance with the requirements outlined above.

If you are a Settlement Class Member, you or your attorney may ask permission to speak at the hearing at your own cost (**see above**).

The date and time of this hearing may change without further notice. Please check [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) for updates.

## Do I have to come to the Final Fairness Hearing?

No. Settlement Class Counsel will answer any questions the Court may have. You may attend at your own expense if you wish. If you file an objection, you do not have to come to the Final Fairness Hearing to talk about it. If you file your written objection on time, the Court will consider it. You may also pay your own lawyer to attend, but such attendance is not necessary.

## If I Do Nothing

### What happens if I do nothing at all?

If you are a Settlement Class Member and do nothing, you will remain a part of the Settlement Class but will not get any payments or monitoring services from the settlement. And, unless you exclude yourself, you will not be able to sue Labcorp about claims arising out of or related to the AMCA Security Incident being resolved through this settlement ever again, assuming such claims are not time-barred.

## Getting More Information

### How do I get more information?

This Settlement Class Notice summarizes the proposed settlement. Complete details are provided in the Settlement Agreement. The Settlement Agreement and other related documents are available at the Settlement Website, [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com).

If you have additional questions, you may contact the Settlement Administrator by mail, email, or by calling toll-free.

*AMERICAN MEDICAL COLLECTION AGENCY, INC. CUSTOMER DATA SECURITY  
BREACH LITIGATION LABCORP SETTLEMENT*  
c/o Kroll Settlement Administration LLC  
PO Box 5324  
New York, NY 10150-5324  
1-833-447-6786

Publicly filed documents can also be obtained by visiting the office of  
the Clerk of the Court,

United States District Court, District of New Jersey,  
Martin Luther King Federal Court House,  
50 Walnut Street, Newark, NJ 07102.

**DO NOT CONTACT THE COURT OR CLERK OF COURT REGARDING  
QUESTIONS ABOUT THIS SETTLEMENT.**

**IF YOU NEED TO CHANGE YOUR CONTACT INFORMATION, YOU MUST  
CONTACT THE SETTLEMENT ADMINISTRATOR AT 1-833-447-6786.**

# Exhibit E

8339500000000

Your Claim must  
be submitted online  
or  
postmarked by:  
September 3, 2026

**IN RE: AMERICAN MEDICAL COLLECTION AGENCY, INC.**  
**CUSTOMER DATA SECURITY BREACH LITIGATION**  
**LABCORP SETTLEMENT**

Civil Action No. 19-md-2904 (JKS)(MAH)(MDL 2904)

**CLAIM FORM**

**GENERAL INSTRUCTIONS**

**To receive a payment from this Settlement via an electronic payment, you must submit the Claim Form electronically at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) by September 3, 2026. If you submit your claim through the mail using this Claim Form, payment will be mailed to the address provided below.**

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 for whom Labcorp transmitted personal information to Retrieval-Masters Creditor's Bureau, Inc. d/b/a American Medical Collection Agency ("AMCA"), and such information was contained in the computer systems implicated by the cybersecurity incident at AMCA that occurred between approximately August 2018 and March 2019.

The following entities and individuals are excluded from the definitions of "Settlement Class Members" or "Class Members" and are not eligible to receive settlement benefits: Labcorp and its officers and directors; the Judge and/or Magistrate assigned to evaluate the fairness of this settlement; and any other Person found by a Court of competent jurisdiction to be guilty under criminal law of initiating, causing, aiding, or abetting the Security Incident or who pleads *nolo contendere* to any such charge.

Settlement Class Members may submit a Claim Form either for: (1) Out of Pocket Losses from verifiable unreimbursed costs or expenditures that Settlement Class Member actually incurred and that are fairly and reasonably traceable to the AMCA Security Incident up to \$5,000; or (2) Alternative Cash Payment which provides for \$50 per class member payments, both subject to pro rata increases or decreases dependent on the number of claims filed.

Settlement Class Members may also elect to receive up to two (2) years of medical and healthcare information monitoring services by CyEx Medical Shield Pro.

If you intend to make a Claim for Out-of-Pocket Losses, you will need to submit supporting documentation. Out-of-Pocket Losses may include, without limitation, the following:

- unreimbursed costs, expenses, losses or charges incurred as a result of identity theft or identity fraud, medical fraud, or other alleged misuse of Settlement Class Members' personal information;
- professional service costs—such as law firms or credit repair services—related to misuse of Settlement Class Members' personal information;
- miscellaneous expenses incurred related to any Out-Of-Pocket Loss such as notary, fax, postage, copying, mileage, and long-distance telephone charges;
- credit monitoring costs that were incurred on or after August 1, 2018, through the date of the Settlement Class Member's Claim submission;
- up to 10 total hours for verified and documented time spent remedying fraud, identity theft, or other misuse of a Settlement Class Member's personal information that is fairly traceable to the AMCA Security Incident at \$25 per hour.

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

QUESTIONS? VISIT [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) OR CALL TOLL-FREE 1-833-447-6786

8339500000000

American Medical Collection Agency, Inc. Customer Data Security Breach Litigation Labcorp Settlement, c/o Kroll Settlement Administration LLC, PO Box 5324, New York, NY 10150-5324.

## 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 : 83395

## II. BENEFIT SELECTION

Select one (1) of the following options:

☐ Check this box if you want to receive the Alternative Cash Payment of up to \$50. If you select this option, proceed to the next section.

**OR**

☐ Check this box if you want to receive reimbursement for Out-of-Pocket Losses of up to \$5,000.\*

**\*You must submit supporting documentation demonstrating that the unreimbursed costs or expenditures that you actually incurred are fairly and reasonably traceable to the AMCA Security Incident.**

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

| <i>Cost Type (fill in all that apply)</i> | <i>Approximate Date of Loss</i> | <i>Amount of Loss</i> | <i>Description of Documentation Provided</i>       |
|-------------------------------------------|---------------------------------|-----------------------|----------------------------------------------------|
| <i>Example: Credit Repair Service</i>     | <i>07/17/25<br/>(MM/DD/YY)</i>  | <i>\$100</i>          | <i>Example: Receipt for credit repair services</i> |
|                                           |                                 |                       |                                                    |
|                                           |                                 |                       |                                                    |
|                                           |                                 |                       |                                                    |
|                                           |                                 |                       |                                                    |
|                                           |                                 |                       |                                                    |
|                                           |                                 |                       |                                                    |

QUESTIONS? VISIT [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) OR CALL TOLL-FREE 1-833-447-6786

8339500000000

| <i>Cost Type (fill in all that apply)</i> | <i>Approximate Date of Loss</i> | <i>Amount of Loss</i> | <i>Description of Documentation Provided</i> |
|-------------------------------------------|---------------------------------|-----------------------|----------------------------------------------|
|                                           |                                 |                       |                                              |
|                                           |                                 |                       |                                              |
| <b>TOTAL AMOUNT CLAIMED:</b>              |                                 |                       |                                              |

### III. HEALTHCARE INFORMATION MONITORING SERVICES

- ☐ Check this box if you wish to receive up to two (2) years of medical and healthcare information monitoring services by CyEx Medical Shield Pro.

### IV. ATTESTATION & SIGNATURE

I swear and affirm under penalty of perjury 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 or Claims Referee before my claim is considered complete and valid.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date (MM/DD/YYYY)

QUESTIONS? VISIT [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) OR CALL TOLL-FREE 1-833-447-6786

# Exhibit F

From: Administrator@[settlement website].com

To: ClassMember@domain.com

Re: Class Action Settlement Notice – AMCA Data Breach (Labcorp), No.  
19-MD-2904

---

Notice ID: <<Refnum>>

**Records show your information may have been impacted in an alleged data breach at a medical collection agency. The settlement in this class action lawsuit may affect your rights.**

**For more information, visit [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) or call (833) 447-6786.**

You are not being sued. This is not a solicitation from a lawyer. This Email Notice was authorized by U.S. District Court for the District of New Jersey.

**You received this email notice because you may be a member of the group of people potentially affected, called the “Settlement Class.”**

The Settlement Class consists of individuals for whom Laboratory Corporation of America Holdings (“Labcorp”) transmitted personal information to Retrieval-Masters Creditor’s Bureau, Inc. d/b/a American Medical Collection Agency (“AMCA”), and such information was contained in the computer systems implicated by the cybersecurity incident at AMCA that occurred between approximately August 2018 and March 2019 (the “Security Incident”). You may be entitled to payment as part of the settlement of this lawsuit.

#### **What is the lawsuit about?**

A settlement has been reached in a class action lawsuit against Labcorp, which concerns the AMCA Security Incident. Labcorp denies it did anything wrong. The settlement is a compromise to end the lawsuit – it does not determine who is right. The lawsuit is called *In Re: American Medical Collection Agency, Inc. Customer Data Security Breach Litigation (All Actions Against Laboratory Corporation of America Holdings)*, Civil Action No. 19-MD-2904, and is pending in the U.S. District Court for the District of New Jersey.

#### **Your options:**

Option 1: Submit a Claim Form at [www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) to get payment and other benefits from the settlement. To receive benefits, Claim Forms must be submitted by **September 3, 2026**.

Option 2: Submit an Opt-Out form by **July 27, 2026** to get no payment but keep the right to sue Labcorp about the same issues.

Option 3: Do nothing. Get no payment. Give up the right to sue Labcorp about the same issues.

Option 4: Object by **July 27, 2026**. Tell the Court why you don't like the settlement.

**For complete information, visit**  
**[www.amcadatabreachsettlement.com](http://www.amcadatabreachsettlement.com) or call (833) 447-6786.**

# Exhibit G

**Exclusion List**

| <b>Count</b> | <b>First Initial</b> | <b>Last Name</b> |
|--------------|----------------------|------------------|
| 1            | C                    | PATE             |
| 2            | T                    | VANDUNK          |
| 3            | B                    | SIEGEL           |
| 4            | S                    | RAMOS            |