



AN IMPORTANT NOTICE FROM
State Senator Brad Hoylman
Assemblymember Brian Kavanagh
Councilmember Dan Garodnick



Message from the Claims Administrator to
Members of the Roberts Class:
DO NOT DELAY IN MAILING IN YOUR CLAIM FORMS
YOU WILL LOSE YOUR RIGHT TO
SUBMIT A CLAIM AFTER MAY 15TH

If you signed a lease for any of the 4,311 improperly deregulated units at ST/PCV for a lease term that included or began after January 22, 2003, up to November 30, 2012, you are automatically a Class Member. However, you must file a claim form by May 15th to be eligible to receive money from the settlement (a minimum of approximately \$150 up to potentially tens of thousands of dollars). There is no reason not to file a claim.

Due to heavy call volume at Berdon Claims Administration, our offices strongly recommend that you follow the procedures below in the event you have not received nor submitted a claim form.

If you have not received a claim form or are seeking your Unique Notice Number, please fax a Claim Information Request Form to 516-931-0810. The Claim Information Request Form can be found on the back of this flyer or online at <http://bit.ly/13fKBxy>. You may also attach a scanned copy to a message through the "Contact Us" link in the upper-right-hand corner of the website.

Everyone who was issued a notice of a claim was given a unique identifying ID number that must be included on all claims, for fraud prevention purposes.

A Claims Administrator will e-mail a notice number and/or a claim form within 48 hours of receiving your request. Please add your phone number to this form so an Administrator can call if there are any issues with your request. Please do not call Berdon Claims Administration at this time regarding this case unless you have an extremely urgent matter regarding your claim.

Questions? Call Senator Hoylman's office at 212-633-8052, Assemblymember Kavanagh's office at 212-979-9696, or Councilmember Garodnick's office at 212-818-0580

Stuyvesant Town Class Action Litigation
Claim Information Request Form

To request your unique Notice Number and/or log-in information for the Individual Settlement Details website, please submit the completed form to the Claims Administrator.

Name _____
Address _____
City: _____ State: _____ ZIP: _____
Telephone _____
E-mail _____
Last 4 digits of SSN _____

Last Lease Information

Street Address _____ Unit # _____

Leased from _____ / _____ through _____ / _____
Month Year Month Year

[] At the time the lease was in effect, my name was _____.

Please enclose supporting documentation with your request.

[] I am a beneficiary of a Class Member, whose name and Social Security Number are as follows:

Name _____
Social Security Number _____

Please provide copies of death certificates, powers of attorney, relevant portions of will, or other legal documents that demonstrate your authority to receive this information.

Date _____ day of _____, 2013

Signature _____

Print Name _____

Your request should be submitted to the Claims Administrator as follows.

By mail: Stuyvesant Town Class Action Litigation – Claim Form Request
c/o Berdon Claims Administration LLC
P.O. Box 9014
Jericho, NY 11753-8914
Or by fax: (516) 931-0810

If you have any questions in connection with this form, please contact the Claims Administrator at (800) 766-3330.