

**CHANGE OF ADDRESS FORM**

**(Gregory, Inc., et. al v. Town of Fuquay-Varina, Harnett Co.: 19-CVS-8602)**

Please type or print:

Your name(s): \_\_\_\_\_

Previous Address: \_\_\_\_\_

City, State, zip code: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, zip code: \_\_\_\_\_

Home telephone: \_\_\_\_\_

Work/cell telephone: \_\_\_\_\_

Email address: \_\_\_\_\_

I (we), under penalty of perjury, provide that that above information concerning my (our) former and current address is correct.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Any Settlement Class Member that is not located within nine-months of this Settlement becoming Final, will not receive payment from the settlement. This Change of Address Form must be completed in full, signed and returned to: Class Notice & Settlement Administrator, Post Office Box 10269, Tallahassee, FL 32302-2269.

Mail Form to:

Gregory v. Fuquay-Varina Settlement Administrator  
c/o Settlement Services, Inc.  
Post Office Box 10269  
Tallahassee, FL 32302-2269