

REQUEST FOR EXCLUSION

Send in this form only if you wish to exclude yourself from the class action. If you send in this form you will NOT participate further in the class action.

I have received the notice of class action including an explanation of my right to be excluded from the class action if I wish. I do not wish to be a member of the class in the case of *Gregory, Inc., et. al v. Town of Fuquay-Varina*, Wake Co. File No. 19-CVS-8602. I understand that by signing this form:

1. I will not receive any monetary or other benefits of any favorable outcomes in this matter, including any awards or settlements;
2. I will not be bound by any adverse decision in this matter;
3. I will not be represented by the attorneys for the class members;
4. I may pursue at my own expense whatever claims I may have against the Town of Fuquay-Varina, regardless of the decision is in this class action; and
5. I understand that I am responsible for any claim that I might file, and that claim would be subject to any defenses that the Defendant herein may have.

Your signature: _____ Date: _____

Please type or print:

Your name: _____

Address: _____

City, State, zip code: _____

Telephone: _____

Approximate Date(s) of Impact Fee payment(s) during class period (07/01/18- 07/11/22):

If you have your own attorney, please type or print his or her name, address and telephone number:

If you wish to exclude yourself from this class action, you must have postmarked and mailed this form no later than the date of **January 21, 2024** to:

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

With Copies to:

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