SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

***In re Gateway Plaza Residents Litigation*, Index No. 651023/2014**

INSTRUCTIONS

Please fill out this Proof of Claim form as accurately and completely as possible and return the form by email or regular mail, sent or postmarked no later than **APRIL 16, 2020**, to:

Epiq Class Actions & Claims Solutions
claims@GatewayPlazaSettlement.com

or

Gateway Plaza Settlement
c/o Epiq
P.O. Box 4098
Portland, OR 97208-4098

IMPORTANT: Your answers and responses below will determine the amount, if any, to which you are entitled. Failure to complete this form as directed may delay or prevent your participation in the distribution of the Settlement Fund.

PROOF OF CLAIM

Class Member Name (including any former names that may have been used in connection with your residential lease):

First Name: | MI: | Last Name:

Former First Name: | MI: | Former Last Name:

Current Address:

City: | State: | ZIP Code:

Telephone: (Please include area code)
___ – ___ – ____

Email:

1. Do you currently reside at Gateway Plaza?

   ☐ **Yes** ☐ **No**

   If "yes", please skip Question 2.

2. Did you reside at Gateway Plaza for any period of time since April 1, 2008?

   ☐ **Yes** ☐ **No**

If "yes", please identify the address(es) and apartment number(s) and the dates during which you resided at each address and apartment listed.

Address and Apartment Number:

Dates during which you resided in the apartment:

MM – DD – YYYY MM – DD – YYYY

Address and Apartment Number:

Dates during which you resided in the apartment:

MM – DD – YYYY MM – DD – YYYY

Address and Apartment Number:

Dates during which you resided in the apartment:

MM – DD – YYYY MM – DD – YYYY

3. I certify that the foregoing answers are true, correct, and complete to the best of my knowledge, information, and belief.

4. I submit this Proof of Claim under the terms of the Stipulation of Settlement described in the Notice, including the Release provisions of the Stipulation of Settlement.

5. I submit to the jurisdiction of the Supreme Court of the State of New York, New York County, with respect to my Claim(s) as a Settlement Class Member and for purposes of enforcing the Release.

6. I further acknowledge that I will be bound by and subject to the terms of any Final Judgment that may be entered in the Action.

7. I agree to furnish additional information to the Claims Administrator to support this Claim if requested to do so.

8. I have not submitted any other Claim covering the same apartment during the Class Period and know of no other Person having done so on my behalf.

9. I hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever settle, release, and discharge, each and all of the Marina Towers Releasees and Related Party Releasees from all Released Claims as those terms are defined in the Stipulation of Settlement and described in the Notice.

10. I consent to summary disposition by the Court, without any right of appeal or review, with respect to the validity and/or amount of, or any other dispute regarding, my Claim.

11. I waive trial by jury (to the extent any such right may exist) in connection with the Court's summary disposition of the validity or amount of my Claim.

I swear under penalty of perjury that the foregoing responses are true and correct.

Signature

Date: MM – DD – YYYY