

**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:

[Grid for First Name]

MI:

[Grid for MI]

Last Name:

[Grid for Last Name]

Former First Name:

[Grid for Former First Name]

MI:

[Grid for MI]

Former Last Name:

[Grid for Former Last Name]

Current Address:

[Grid for Current Address]

City:

[Grid for City]

State:

[Grid for State]

ZIP Code:

[Grid for ZIP Code]

Telephone: (Please include area code)

[Grid for Telephone]

Email:

[Grid for 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.

