

SUPERIOR COURT OF CALIFORNIA

LOS ANGELES COUNTY

*Ortega, et al. v. Global Tel\*Link Corporation, et al.*

## Claim Form & Release

c/o Phoenix Settlement  
Administrators  
PO Box 7208  
Orange, CA 92863

Case No. BC636438

### To Receive A Payment, You Must Sign And Mail This Claim Form On Or Before May 18, 2018

If the Settlement becomes effective, and my Claim Form is timely and valid I will be eligible to receive a payment calculated based on the information contained in the tear-off section on the right, and as stated in the Settlement Agreement and the Notice. As a member of the Settlement Class, I will also be releasing and discharging all of the Released Claims against Cooper Communications Group, Inc., Global Tel\*Link Corporation, and other Released Parties, as described in the Settlement Agreement. By submitting this Claim Form, I consent to join in the Fair Labor Standards Act portion of the settlement and accordingly release all claims under the Fair Labor Standards Act ("FLSA"), 26 U.S.C section 216, et seq., arising out of or relating to the Released Claims. I understand I can review the Settlement Agreement at <http://phoenixclassaction.com/ortega-v-gtl/>.

Claim #:

Name/Address Changes (if any):

First and Last Name

Street Address Line 1

Street Address Line 2

City, State Zip Code

IF YOU MOVE, send your CHANGE OF ADDRESS to the Settlement Administrator at the above address.

To submit a claim on behalf of an estate or incapacitated person, contact the Settlement Administrator.

If you have any questions regarding this Claim Form, contact the Settlement Administrator.

I declare that all of the above is true and correct.

Signature: \_\_\_\_\_ Home Telephone: (\_\_\_\_\_) \_\_\_\_\_

Date: \_\_\_\_\_ E-mail Address (optional): \_\_\_\_\_

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Tear off this stub  
and **save** for your records.

Claim #:

According to Defendant, you worked for one of the companies covered by the settlement in California for \_ weeks between October 6, 2012 and December 31, 2017. During that time, you worked in the following capacities: \_\_\_\_\_. Based on this you have \_ credit(s). For a detailed breakdown of how your credits were calculated, review the Settlement Agreement at <http://phoenixclassaction.com/ortega-v-gtl/>.

If 100% of Settlement Class Members return timely Claim Forms, the estimated value of a credit would be \$4.60 and your total payment, if the Court approves the settlement, would be \$\_\_\_\_. This is an estimate. The actual value may be higher or lower. Payments will be reduced by taxes and withholdings.

If you want to challenge the number of pay periods shown above, you must send a letter with your Claim Form to the Settlement Administrator and include proof supporting your challenge

Carefully tear off stub before mailing Claim

