ELECTION NOT TO PARTICIPATE IN ("OPT OUT" FROM) CLASS ACTION SETTLEMENT

Superior Court of California, County of Santa Clara
Trigueros v. Stanford Federal Credit Union, et al.
Case No. 21CV375168

DO NOT SIGN OR SEND THIS DOCUMENT UNLESS YOU WISH TO EXCLUDE YOURSELF FROM THE SETTLEMENT.

THIS DOCUMENT MUST BE POSTMARKED NO LATER THAN JUNE 30, 2023. IT MUST BE SENT VIA REGULAR U.S. MAIL.

PLEASE MAIL THIS EXCLUSION FORM VIA REGULAR U.S. MAIL TO:

**THE STANFORD FEDERAL CREDIT UNION SETTLEMENT ADMINISTRATOR,
C/O PHOENIX CLASS ACTION ADMINISTRATION SOLUTIONS,
P.O. BOX 7208, ORANGE, CA 92863**

You are a Class Member if you are or previously were employed by Defendant Stanford Federal Credit Union ("Defendant") within the State of California and were classified as a non-exempt employee during the period of July 17, 2016 to November 23, 2022.

You are an Eligible Aggrieved Employee if you are or previously were employed by Defendant within the State of California and were classified as a non-exempt employee during the period of November 2, 2019 to November 23, 2022.

By signing and mailing this document to the Settlement Administrator at the address above, you are deciding to exclude yourself from the Class and deciding not to participate in the class portion of the proposed settlement of the action entitled *Trigueros v. Stanford Federal Credit Union, et al.* However, Eligible Aggrieved Employees may not exclude themselves from the PAGA portion of the proposed settlement.

IT IS MY DECISION <u>NOT</u> TO PARTICIPATE IN THE ACTION REFERRED TO ABOVE, AND <u>NOT</u> TO BE INCLUDED IN THE CLASS OF PLAINTIFFS IN THAT ACTION. I UNDERSTAND THAT BY EXCLUDING MYSELF, I WILL NOT RECEIVE AN INDIVIDUAL SETTLEMENT SHARE AND ANY CLAIMS I HAVE DURING THE CLASS PERIOD WILL NOT BE RELEASED. However, if I am an Eligible Aggrieved Employee and qualify for a payment from the PAGA Payment, I will be mailed a check for that payment regardless of whether I exclude myself from the class portion of the proposed settlement, and I will release any claims I have during the PAGA Timeframe.

Dated: _____   _____

(Signature)

_____

(Type or print name and former name(s))