APPEAL FORM (Niagara College Class Action)

Claimant Identification	Telephone	Telephone Request Information		
Epiq File No.: (insert No. from letter)	Teleconference Requested	Yes 🗆	No 🗆	
TR No. (last three digits 901553- ***)	Telephone number to reach you:			
Your Name:	Time/Day preferred for teleconference			

Please provide an explanation as to why you believe you should receive more compensation and/or why you should be included in the Niagara College Class Action.

Reasons (add additional sheets and documents, if desired)

THIS APPEAL FORM MUST BE RECEIVED BY THE ADMINISTRATOR <u>BY MAY 27, 2020</u>

I understand that to succeed in this appeal I must establish that Class Counsel made material errors in the evaluation of my entitlement, pursuant to the terms of the Settlement and the Guideline and that if I succeed in doing so, the Administrator will then review my Claim and determine whether my compensation, if any, is increased or decreased as a result.

I also hereby acknowledge that I am aware that in the event that my appeal is unsuccessful, the amount of \$250.00 will be deducted from my compensation, or in the event that no compensation is awarded, I will be required to pay \$250.00 upon receipt of the Appeal decision.

Signature of Claimant

Date

Please send completed forms along with proof to: Niagara College Claims Administrator c/o Epiq Class Action Services Canada Inc., by either: Email: NiagaraCollegeAppeals@epiqglobal.com Courier: 610-180 King St S, Waterloo, ON, N2J 1P8 Mail: Suite 3-505, 133 Weber St N, Waterloo, ON, N2J 3G9