RIVALI v. SHUTTERFLY, LLC CLAIM FORM

YOU MUST SUBMIT YOUR CLAIM FORM NO LATER THAN FEBRUARY 5. 2024.

PERSONAL INFORMATION. Please legibly print or type the following information requested below. This information will be used to deliver your Voucher(s) and communicate with you if any problems arise with your Claim.

Name (first, middle, and last):		
Residential Street Address:		
City:	State:	ZIP Code:
Email Address (including those used for purchases of	on Shutterfly.com since April 1, 2018):	
Telephone Number:		

CONFIRMATION OF CLASS MEMBERSHIP. I declare that between April 1, 2018 and August 25, 2023, I made one or more purchases on Shutterfly.com in part because they were advertised as discounted from a reference price, and that I am not an officer, director, or employee of Shutterfly.

The Claims Administrator and/or Shutterfly may verify your Claim.

ACKNOWLEDGEMENT. I have received Notice of the Class Settlement in this Action and I am a member of the Class of persons described in the Notice. I agree to release all the claims, known and unknown, stated in Section 2.8 of the Settlement Agreement. I submit to the jurisdiction of the Superior Court of California, County of San Diego, with regard to my Claim and for purposes of enforcing the release of claims stated in the Settlement Agreement. I am aware that I can obtain a copy of the Full Notice and Settlement Agreement at www.SFDiscountSettlement.com or by writing the Claims Administrator at the email address: info@SFDiscountSettlement.com or the postal address:

> Rivali v Shutterfly, LLC c/o Analytics Consulting LLC P.O. Box 2010 Chanhassen, MN 55317-2010

I certify that (i) between April 1, 2018 and August 25, 2023, I made one or more purchases on Shutterfly.com in part because they were advertised as discounted from a reference price, and (ii) I am not an officer, director, or employee of Shutterfly. I agree to furnish additional information to support this Claim if required to do so.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct to the best of my knowledge.

Date Signed: _____ Signature: ____