CLAIM FORM FOR UNIDENTIFIED CLASS MEMBERS

This Claim Form may be submitted online at www.EconomistNewspaperSettlement.com or completed and mailed to the address below. Submit your completed Claim Form online or mail it so it is postmarked no later than **April 12, 2023**. If you received a Notice by mail, you do NOT need to submit a Claim Form, and your Cash Award will be sent to you by check at the address identified on the Notice once the Settlement is finally approved. If your address has changed, please submit a change of address form online at www.EconomistNewspaperSettlement.com to ensure your check is mailed to your current address.

I. CLAIMANT INFORMATION (all fields required)

The Settlement Administrator will use this information for communications and payments. If this information changes before settlement payments are issued, contact the Settlement Administrator at the address below.

First Name			M.I.	Last Name	
Curre	nt Mailing Address, Line 1: Stree	et Address/P.O. Box	I		
Curre	nt Mailing Address, Line 2				
City State			;		Zip Code
Preferred Telephone Number			Preferred Email Address		
July 3	CLAIM INFORMATION and address at which you result to the second of the s	eceived your subscri	iption to The E	Economist pu	ablication between February 4, 2015 and
Curre	nt Mailing Address, Line 2				
City		State			Zip Code
III.	PREFERRED PAYMENT METHOD				
	Check PayPal (Associated Email Address:)				
Venmo (Associated Phone Number:)
IV.	. SIGNATURE: Sign and date the Claim Form below.				
Signed:			Date:		
		11	41 11 1	1	1 - 1 1 1 A 1 12 2022

Submit this Claim Form online or mail it to the address below postmarked no later than April 12, 2023.

Economist Newspaper Settlement Administrator c/o JND Legal Administration PO Box 91231 Seattle, WA 98111