

KEMPER AND INFINITY DATA INCIDENTS SETTLEMENT CLAIM FORM

This Claim Form should be filled out and submitted by mail if you received notice that your Personal Identifiable Information was potentially compromised in the Data Incidents that occurred at Kemper Corporation and Infinity Insurance Company. If you fill out this Claim Form, you may get a payment of (1) up to \$10,000 for reimbursement for documented out-of-pocket expense and/or (2) up to 6 hours of lost time compensable at \$18.00 per hour and/or (3) up to \$50.00 if you were a California resident at the time of the Data Incidents. Please refer to the Settlement Notice posted on the settlement website, www.InfinityClassSettlement.com, for more information. You may also fill out and submit a Claim Form on the Settlement website by following the prompts.

First, please provide us your information so we may contact you.

First: _____ M: _____ Last: _____

Address: _____

City: _____ State: _____ ZIP: _____ Country: _____

Phone: _____ Email (*Optional*): _____ Last 4 SSN: _____

Second, please provide the username and password that the Settlement Administrator provided to you in the letter or email notifying you of the Settlement. If you do not have this information but believe you may be a Class Member, please contact the Settlement Administrator at 1-800-347-9165.

Username: _____ Password: _____

Third, please describe your claimed damages. Three types of damages are available. First, you may recover certain out-of-pocket expenses incurred as a result of the Data Incidents. Second, you may recover money to compensate you for time you spent addressing the Data Incident(s). And third, you may also receive a \$50 payment if you are a member of the California Settlement Subclass. These expenses or time must have been incurred during the applicable time period, which is generally from the first Data Incident (December 14, 2020) through the end of the claim deadline (which has been extended to March 15, 2022). Please refer to the Settlement Notice for more information.

1. Documented Out-of-pocket expenses.

The types of expenses that you may claim include fees or other charges (e.g., professional fees, losses related to fraud or identity theft, credit monitoring, etc.) and other incidental expenses (e.g., postage, long distance charges, etc.) you incurred addressing the Data Incident(s). The Settlement Notice describes the types of available expenses in greater detail and the documentation required to support the expenses. Please refer to that document for more information.

Documentation is required for claimed expenses. Please be sure to include documentation to expedite the processing of your claim.

Date	Description	Amount

Documentation: Attach supporting documentation. For example, a bank statement showing claimed fees (you may redact unrelated transactions and all but the first and last four digits of any account number).

2. Lost-Time Losses.

You may be eligible for reimbursement of up to three hours of lost time spent remedying issues related to the Data Incident(s) (at \$18 per hour) with an attestation and brief description of the actions taken to remedy issues and the time associated with each action.

You may also be eligible for reimbursement of an additional one to three hours if you are able to document time lost remedying issues related to the Data Incidents (at \$18 per hour or, if you lost work, at a rate of documented compensation up to \$50 per hour).

At least one full hour must have been spent dealing with the Data Incident(s). Round to the nearest hour and check only one box.

How much time did you spend? 1 Hour 2 Hours 3 Hours 4 Hours 5 Hours 6 Hours

What did you do?

When, approximately, did this occur?

Documentation: If you claim one to three hours, you must complete the following attestation and provide above a description of your time spent. **If you claim four to six hours, you must provide documentation proving the time spent and/or the rate of compensation for lost work (if claiming lost work).**

Attestation

I attest under penalty of perjury that I spent the number of hours claimed above making reasonable efforts to deal with the Data Incident(s).

Payment to California Settlement Subclass Members.

If you reside or resided in the State of California when Kemper or Infinity sent you a notice letter on or about March 16, 2021 and/or on or about May 25, 2021, notifying you that your PII was compromised in the Data Incident(s), you are eligible to claim a \$50 cash payment.

California Address where Data Incident Notice was received

Documentation: The Settlement Administrator may require documentation to validate your claim.

Last, you must certify that the information you provided above is true and accurate. Please sign the following:

I declare under penalty of perjury under the laws of the United States that the information supplied in this Claim Form is true and correct to the best of my recollection. I understand that I may be asked to provide supplemental information by the Claims Administrator or Claims Referee before my claim will be considered complete and valid.

Print Name: _____

Signature: _____ Date: _____

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Once complete, please mail this Claim Form and all required supporting documentation to the following address, postmarked by **March 15, 2022**:

Kemper Data Incidents Settlement
c/o RG/2 Claims Administration LLC
P.O. Box 59479
Philadelphia, PA 19102-9479

Questions? Call 1-800-347-9165 or visit www.InfinityClassSettlement.com