

PPS TCPA Settlement Administrator
P.O. Box 404017
Louisville, KY 40233-9817



PNA

TAYLOR V. PROFESSIONAL PLACEMENT SERVICES, LLC ET AL.,

Case No. 1:17-cv-00599-AT (N.D. Ga.)

**Must Be Postmarked No Later Than
July 15, 2019**

Claim Form

CLAIMANT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	M.I.	Last Name
<input type="text"/>		
Primary Address		
<input type="text"/>		
Primary Address Continued		
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Foreign Province	Foreign Postal Code	Foreign Country Name/Abbreviation

Email Address:

Contact Telephone Number:

 — — — —

Cellular phone number at which you received direct-to-voicemail message(s) from PPS:

 — —

CERTIFICATION

By submitting this Claim Form, I certify that I received one or more prerecorded direct-to-voicemail messages on my cellular telephone from Professional Placement Services, LLC (“PPS”) between November 18, 2012 and May 30, 2018, and that I did not consent to receive such message(s).

Signature: _____

Dated: _____

Print Name: _____



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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Return the Claim Form

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Your mailed claim form must be postmarked **on or before July 15, 2019**.

YOUR CLAIM FORM WILL NOT BE RETURNED TO YOU. PLEASE RETAIN A COPY FOR YOUR RECORDS. ACCURATE PROCESSING AND VERIFICATION OF CLAIMS MAY TAKE A SIGNIFICANT AMOUNT OF TIME. THANK YOU IN ADVANCE FOR YOUR PATIENCE.

QUESTIONS? A COPY OF THE CLASS NOTICE, SETTLEMENT AGREEMENT AND OTHER INFORMATION REGARDING THE SETTLEMENT IS AVAILABLE AT THE CLAIMS ADMINISTRATOR'S WEBSITE AT WWW.PPSTCPASETTLEMENT.COM. YOU CAN ALSO CALL THE CLAIMS ADMINISTRATOR TOLL-FREE AT 1-866-463-4347.

