

IN THE CIRCUIT COURT FOR THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

WOODLANDS OF GAINESVILLE, LLC, a
Foreign Limited Liability Company,

Plaintiff,

v.

Case No.: 01-2012-CA-407

ZACHARY T. ARNOLD and MICHELLE
ARNOLD,

Defendants.

_____/_____
ZACHARY T. ARNOLD and MICHELLE
ARNOLD,

Counter-Plaintiffs,

v.

WOODLANDS OF GAINESVILLE, LLC, a
Foreign Limited Liability Company,

Counter-Defendant.

_____/_____

CLAIM FORM

IN ORDER FOR YOU TO RECEIVE PAYMENT AS PART OF THE
SETTLEMENT IN THE ABOVE ACTION, YOU MUST COMPLETE AND
SUBMIT THIS FORM, FOLLOWING THE PROCEDURES OUTLINED BELOW

Please review the statements below and check the box and/or fill in the blanks as they apply to you. **Be sure to answer every question.**

If you submitted a request for exclusion from the Class you should not complete this Claim Form.

I. Claimant's Information

Please **write legibly** and provide the following information:

Your Name (first, middle, last): _____

Company Name (if applicable): _____

Address: _____
City: _____ State: __ Zip code: _____

Email Address: _____

Telephone Number: (___) ___ - _____

SSN or Taxpayer I.D. Number (if Claimant is a person): _____

Employer I.D. Number (if Claimant is a business): _____

Please note: If you provide incomplete, incorrect, or inaccurate information, your claim may be denied. The information you provide will be used for processing of your claim and will not be used or released for any other purpose. Your Social Security Number, Taxpayer I.D. Number, or EIN is necessary for tax reporting purposes and will be kept strictly confidential.

II. Tenant Claims

1. I occupied a unit for any period of time between August 8, 2008 and July 25, 2013 which was leased from Woodlands of Gainesville: Yes No
2. The full address, including unit number, where I resided under the Lease is:

III. Guarantor Claims

3. I, or someone on whose behalf I am submitting this claim, executed a guaranty of one or more leases pursuant to which someone occupied a unit at Woodlands of Gainesville between August 8, 2008 and July 25, 2013:
 Yes No

IV. All Claims

4. At any time in the past, were you, or the person on whose behalf you are submitting this claim, represented by counsel in connection with a civil action in which the tenant or the guarantor was alleged to have breached the lease or the guaranty and which civil action was dismissed or fully adjudicated prior to July 25, 2013:
 Yes No
5. Were you, or the person on whose behalf you are submitting this claim, previously represented by counsel and a party to any release of or by Woodlands of Gainesville?
 Yes No

6. The approximate date(s) of the tenancy to which I was a party or a guarantor was/were:

7. Did you suffer any adverse credit rating or score as a result of any reporting, collection effort, or action or litigation initiated by Woodlands of Gainesville, LLC?
 Yes No

If so, how: _____

8. Did the Lease at Woodlands of Gainesville naturally expire or was it terminated?
 Naturally Expired Terminated

9. Did Woodlands of Gainesville ever make a claim against you in connection with the lease or guaranty, for unpaid rent or other charges, or to keep your security deposit, or for anything else? Yes No

I understand that, subject to the Court's final approval of the Settlement, I will be bound by the releases set forth in the Settlement Agreement and the Final Judgment. I have read and completed this Claim Form and declare under penalty of perjury that the information provided is true and correct to the best of my knowledge and belief.

Date: ____ / ____ / 2014
(MM/DD/2014)

Signature of Claimant or Authorized Representative
This Claim Form is not valid unless signed.

DO NOT MAIL A COMPLETED CLAIM FORM TO THE COURT OR DEFENSE COUNSEL. YOU MUST MAIL THIS COMPLETED CLAIM FORM TO CLASS COUNSEL AT THE FOLLOWING ADDRESS POSTMARKED ON OR BEFORE SEPTEMBER 11, 2014, TO TAKE PART IN THIS SETTLEMENT:

Andy Dogali, Class Counsel
Dogali Law Group, P.A.
101 E. Kennedy Blvd., Suite 1100
Tampa, Florida 33602