Bottoms v. Block, Inc. (d/b/a Cash App) No. 2:23-cv-01969-MJP (W.D. Wash.)

CLAIM FORM

Complete and return this Claim Form by October 27, 2025 to claim your payment. You may submit your Claim Form using this online portal or mail to: Bottoms v Block Settlement Administrator, PO Box 2631, Baton Rouge, LA 70821.

I. Claim Verification	
Did you receive a claims code by mail or email? T notice or at the top of the email notice.	he claims code is located on the front of the postcard
☐ Yes, Claims Code:☐ No	
Phone number(s) at which you received the Cash Washington resident and without your clear and af	App "Invite Friends" referral text message while a firmative consent in advance:
II. Class Member Identifying Information.	
	elow. The Settlement Administrator will use the email 1. You must notify the Settlement Administrator if your Form.
First Name	Last Name
Street Address	
City	State Zip Code
Email Address	Phone Number
III. Attestation	
I attest that the following statements are true (chec I received one or more Cash App "Invite Frie I provided above;	k each box to indicate your agreement): nds" text messages on the cellular telephone number(s)

received at least one Cash App "Invite Friends" text mess	() 1
☐ I was a Washington resident at the time I received at lea message; and	
☐ I did not clearly and affirmatively consent, in advance, to Friends" text message, while a Washington resident.	receive at least one Cash App "Invite
IV. Payment Selection	
Please select from one of the following payment options:	
PayPal - Enter your PayPal email address:	
☐ Venmo - Enter the mobile # associated with your Venmo acc	count:
Zelle - Enter the mobile # or email address associated with y	our Zelle account:
Mobile Number: or Email Add	ress:
☐ Virtual Prepaid Card - Enter your Email Address:	
Physical Check - Payment will be mailed to the address prov	vided in Section II above.
V. Certification & Signature.	
I declare under penalty of perjury under the laws of the United Statand correct.	tes of America that the foregoing is true
Signature	Date (MM/DD/YYYY)