

Collective Form

Pineda, et. al. v. Hacienda Amigos, LLC, Case No. 2024CA000296

INSTRUCTIONS: Fill out each section of this form and sign where indicated. Submit the completed Collective Form online by logging in with your SIMID and Last Name located on the mailed and/or emailed Notice:

Pineda v. Hacienda Amigos Mexican Kitchen, LLC Settlement Administrator
c/o Simpluris, Inc.
P.O. Box 26170
Santa Ana, CA 92799
Tel: (888) 369-3780
E-mail: info@HaciendaAmigosPSLSettlement.com

Alternatively, you may submit the completed Collective Form by mail or email. See above for contact information.

THIS COLLECTIVE FORM MUST BE COMPLETED AND SUBMITTED BY: JUNE 12, 2024.

<u>First Name</u>	<u>Last Name</u>
<u>Street Address</u>	<u>City</u>
<u>State</u>	<u>Zip Code</u>
<u>E-mail Address</u>	<u>Contact Phone Number</u>

Collective Member Affirmation: By submitting this Collective Form, I declare that I am a member of the Section 216(b) Settlement Collective and that the following information is true and correct:

I am an individual who worked more than 40 hours a week in one or more workweeks as a Server at Hacienda Amigos Mexican Kitchen in Port St. Lucie, Florida, between June 20, 2020, and October 2, 2023.

Signature: _____

Date: _____
(MM-DD-YY)

Printed Name: _____

Former (Maiden) Names worked under, if any: _____

Note: If you change your address, please inform the above Settlement Administrator of your new address to ensure processing of your claim and mailing of your settlement check to the correct address. It is your responsibility to keep a current address on file with the Settlement Administrator.