

This is a notice of a lawsuit settlement, not a lawsuit against you.

**IN THE CIRCUIT COURT OF THE 19TH JUDICIAL DISTRICT
LAKE COUNTY, ILLINOIS**

SHAUN FAULEY, SABON, INC., SANDY ROTHSCHILD &
ASSOCIATES, INC., DEBAUN DEVELOPMENT, INC.,
CHRISTOPHER LOWE HICKLIN DC PLC, RICHARD
CADENASSO and C-MART, INC., individually and as the
representatives of a class of similarly-situated persons,

Plaintiffs,

v.

METROPOLITAN LIFE INSURANCE COMPANY, STORICK
GROUP CO., THE STORICK GROUP CORPORATION,
SCOTT R. STORICK and JOI IN DOCS 1-10,

Defendants.

No. 14 CH 1518

Judge Luis A. Berrones

NOTICE OF CLASS ACTION SETTLEMENT WITH ATTACHED CLAIM FORM

TO: All persons in the United States who were sent a facsimile advertisement by or on behalf of MetLife or the Storick Defendants between August 23, 2008 and August 7, 2014, where the facsimile advertisement was unsolicited and/or did not contain opt-out language compliant with the requirements of the TCPA and/or its accompanying regulations. (the "Settlement Class")

The Court ordered us to send you this Notice because your fax number is contained on a list of fax numbers to which advertisements may have been sent by fax and you appear to be a member of the Settlement Class defined above.

- A. WHAT IS THIS LAWSUIT ABOUT?** Plaintiffs filed this class action lawsuit against Metropolitan Life Insurance Company, Storick Group Co., the Storick Group Corporation, and Scott Storick (collectively, "Defendants") alleging that they violated the federal Telephone Consumer Protection Act ("TCPA") by sending unsolicited advertisements by fax. Defendants deny Plaintiffs' allegations and raised defenses. The parties have agreed to settle all claims about advertising faxes sent by or on behalf of one or more of the Defendants between August 23, 2008 and August 7, 2014. This notice informs you of your rights regarding this settlement as a member of the Settlement Class.
- B. WHAT IS THE PROPOSED SETTLEMENT?** The Court has certified the Settlement Class defined above and preliminarily approved a settlement, subject to a final approval hearing that will occur on November 14, 2014, at 9:00 a.m. in Room C-302, Circuit Court of Lake County, 18 N. County St., Waukegan, Illinois 60085. Defendants have created a settlement fund of \$23,000,000.00 to settle this case. If the Court finally approves the settlement, each valid claim will be paid up to (1) \$250 per fax, up to 10 faxes, for valid faxes sent in by the claimant with her claim form; and up to (2) \$100 per fax, up to 10 faxes, for the number of faxes attempted to be sent to the claimant as shown by the available records; or up to (3) \$50 per claim if the claimant does not attach faxes and the claimant's fax number does not appear in the available records but the claimant attests under penalty of perjury that the claimant received at least one applicable fax sent by or on behalf of the Defendants during the class period. In the event the Settlement Fund is exhausted, these amounts are subject to reduction.
- C. WHO REPRESENTS THE SETTLEMENT CLASS IN THIS LITIGATION?** Plaintiffs Shaun Fauley, Denise Debaun, Sabon, Inc., Sandy Rothschild & Associates, Inc., Christopher Lowe Hicklin DC PLC, Richard Cadenasso and C-Mart, Inc. (collectively, "Plaintiffs") are the class representatives. Their attorney, Brian J. Wanca of Anderson + Wanca has been appointed Class Counsel. They have litigated on behalf of the Settlement Class against Defendants on a contingency basis. As part of the settlement, Class Counsel will request that the Court award Plaintiffs incentive awards of \$15,000 each for serving as the class representatives and ask the Court to award attorney's fees to Class Counsel equal to one-third of the settlement fund for their legal services, plus their out-of-pocket litigation expenses. You will not have to pay any money to Class Counsel. You may retain your own counsel to represent you at your own expense.
- D. WHAT ARE YOUR FOUR OPTIONS?**
 - 1. Submit a Proof of Claim (attached) to receive a check:** You must submit a completed Claim Form (see form at end of this notice) to the Settlement Administrator via U.S. Mail, fax, or the settlement website. The claim form must be submitted to the Settlement Administrator on or before November 26, 2014. If mailed the envelope must be postmarked on or before November 26, 2014. If sent via fax or the settlement website the form must be received by the Settlement Administrator on or before November 26, 2014. If you do not submit a claim form you will not be eligible to participate in the economic recovery under this settlement. If you submit a timely and valid claim form you will be mailed a settlement check.

2. **Do nothing:** You will be bound by the settlement and you will release your claims regarding faxes sent by or on behalf of the MetLife (defined in this Notice as Metropolitan Life Insurance Company and its past or present subsidiaries, affiliates, or any of its or their directors, officers, employees, agents, representatives or attorneys) or the Storick Defendants between August 23, 2008 and August 7, 2014, but you will not receive any money.
3. **Opt out of the settlement:** You have the right to exclude yourself from both the class action and the settlement by submitting a written request to be excluded from the Settlement Class. Your request for exclusion must be postmarked on or before October 14, 2014, it must list your name, fax number, street address, and the name and number of this case, and it must state that you wish to be excluded (for example, "Exclude me from the Met Life settlement."). Mail your exclusion request to the following attorneys, postmarked by date above, who will notify the Court of your request:

Class Counsel:

Brian J. Wanca
Anderson + Wanca
3701 Algonquin Road, Suite 760 Rolling
Meadows, IL 60008

MetLife's Counsel:

Frank A. Zacherl
Shutts & Bowen LLP
201 South Biscayne Boulevard Suite 1500
Miami, FL 33131

4. **Object to the settlement:** If you wish to object to the settlement rather than excluding yourself, you must file a written objection with the Clerk of the Circuit Court of Lake County, 18 N. County St., Waukegan, Illinois 60085. Your objection must be filed by October 14, 2014, and must contain the name and number of this case (as indicated at the top of this notice). You must also serve copies of your objection on Class Counsel and Defendants' attorneys (identified above), postmarked by the same date. Your objection must include your name, fax number, and street address, along with a statement of the reasons why you believe the Court should find that the proposed settlement is not in the best interests of the Settlement Class. It is not sufficient to simply state that you object; you must state your reasons. Additionally, if you want the Court to consider your objection, then you must also appear at the final approval hearing in Room C-302, on November 14, 2014, at 9:00 a.m. You are not required to attend this hearing unless you object to the settlement

E. **WILL THE COURT APPROVE THE SETTLEMENT?** The Court will hold a final approval hearing on November 14, 2014, at 9:00 a.m., in Room C-302 of the Circuit Court of Lake County, 18 N. County St., Waukegan, Illinois 60085, at which the Court will hear any timely and properly-filed objections and arguments about the settlement. You are not required to attend unless you object to the settlement. The hearing may be continued to a future date without further notice.

F. **WHERE CAN YOU GET MORE INFORMATION?** This Notice only summarizes the litigation and the settlement. To see the complete file, including a copy of the settlement agreement, you may visit the office of the Clerk of the Circuit Court of Lake County, 18 N. County St., Waukegan, Illinois 60085. The Clerk will make the files relating to the lawsuit available to you for inspection and copying at your own expense.

If you have specific questions, you can write to Class Counsel at the address listed above. Include the case number, your name, your fax number, and your current street address on any correspondence. You may also call the office of attorney Brian J. Wanca, Class Counsel, at 855-827-2329.

DO NOT CONTACT THE JUDGE, THE JUDGE'S STAFF, OR THE CLERK OF THE COURT BECAUSE THEY CANNOT ANSWER YOUR QUESTIONS ABOUT THE SETTLEMENT.

BY ORDER OF THE COURT, JUDGE LUIS A. BERRONES

CLAIM INSTRUCTIONS

TO FILE YOUR CLAIM, GO TO: [http:// www.class-settlement.com](http://www.class-settlement.com)

Enter your unique **USERNAME & PASSWORD** below and follow the easy online instructions.



Username:

Password:

PROOF OF CLAIM

Shaun Fauley, et al. v. Metropolitan Life Insurance Company, et al.
Case No. 14 CH 1518



7746009

Fax Number: 409-770-5560

You Must Complete the first FOUR Steps to Claim a Share of the Settlement Fund. You Must Also Complete Step 5 to Claim a Maximum Share of the Settlement Fund.

1. You Must Provide Your Contact Information:

Name of person signing form: _____

Company (if applicable): _____

Street Address: _____

City/State/Zip Code: _____

Contact Telephone Number: _____

Fax Number(s):

[List all numbers owned by you at which you received faxes from August 23, 2008 through August 7, 2014]

2. You Must Verify Ownership of the Fax Number(s) Listed in #1 above:

Any person who knowingly presents a fraudulent claim containing any false or misleading information may be guilty of fraud.

SIGN ONE OF THE FOLLOWING LINES:

"I or my company was the subscriber for the fax number(s) identified above or attached to this claim form throughout the entire period from August 23, 2008 through August 7, 2014."

"I make this statement under penalty of perjury."

(Sign your name here)

OR

"I or my company was NOT the subscriber for the fax number(s) identified above or attached to this claim form throughout the entire period from August 23, 2008 through August 7, 2014." If you choose this option, explain on the lines provided when during August 23, 2008 through August 7, 2014 you claim to have had the fax number(s).

"I make these statements under penalty of perjury."

(Sign your name here)

3. If You Are Submitting This Form On Behalf of Your Company, You Must Verify That You Are Authorized to Do So.

"I am authorized to submit this form on behalf of the company listed above."

(Sign your name here)

4. You Must Submit your Claim by November 26, 2014 (CHOOSE ONLY ONE METHOD):

(a) Log on with your personal Username and Password

Go to: www.class-settlement.com

Username: [Redacted]
Password: [Redacted]



OR

(b) Fax this Claim Form to: (888) 774-9323

OR

(c) Mail this Claim Form to: **Class-Settlement.com**
MetLife/Storick
PO Box 9009
Hicksville, NY 11802-9009

5. Attach Copies of Facsimiles (Optional):

If you have retained copies of any faxes you believe to be advertisements sent by or on behalf of the Defendants, you should attach copies of all faxes received to this form. If you do not attach any faxes, your recovery under the Settlement will be reduced.