

Claim Form

*Alexander Garner v. Aramark Management Services LP, Case
No. 2025 CAB 007444*

Authorized by the Superior Court of the District of Columbia

You must submit this Claim Form to receive a payment from the Settlement. Your Claim Form must be submitted online, or mailed and postmarked, no later than December 4, 2026. This is not an opt-out form.

How and when to submit this form

You can submit this Claim Form in one of two ways: (1) online at www.VenueFeeSettlement.com; or (2) by printing it and mailing it to the Settlement Administrator at the address below. If you would like a Claim Form mailed to you, call (844) 659-2531 or email info@VenueFeeSettlement.com.

To count, your completed and signed Claim Form must be submitted online or postmarked no later than December 4, 2026. If you do not submit a valid claim by that date, you will still be bound by the Settlement, but you will not receive a payment. To be paid by direct deposit (ACH), submit your claim online at www.VenueFeeSettlement.com.

Your information

First Name (Required) _____

Last Name (Required) _____

Mailing Address (Required)

City (Required) _____ State (Required) _____

Zip Code (Required) _____

Email Address (Required)

Phone Number (Optional) _____

Claimant ID (From your notice) _____

The Settlement Administrator will use your contact information only to reach you about your claim. Providing your phone number is optional.

Confirm you are a class member

Please confirm the statement below is true by adding your initials in the space provided.

I made a purchase from food and beverage concessions (which are operated by Aramark) at Capital One Arena and paid a Venue Fee between October 1, 2024 and December 31, 2025.

Initials _____

Choose how you want to be paid

Each class member who submits a valid claim will receive an equal (pro rata) share of the Net Settlement Fund. Choose **one** payment method below. Direct deposit, PayPal, and Venmo are the fastest options and are available only if you submit your claim online. If you do not choose a method, you will be paid by check mailed to the address above.

☐ PayPal — email associated with your PayPal account

☐ Venmo — Phone number or email associated with your Venmo account

☐ Zelle — Phone number or email associated with your Zelle account

☐ Check mailed to the address I provided above

Sign and submit

I declare under penalty of perjury under the laws of the District of Columbia that the information in this Claim Form is true and correct, and that I made a purchase from food and beverage concessions (which are operated by Aramark) at Capital One Arena and paid a Venue Fee between October 1, 2024 and December 31, 2025. I understand that my claim may be subject to verification, audit, and review by the Court. By submitting this form, I acknowledge that I have received notice of the class action Settlement in this case.

If you submit this form online, typing your name on the settlement website serves as your electronic signature on the date you submit it.

Date _____ Signature _____

Printed Name _____

Where to send this form

To submit: file your claim online at www.VenueFeeSettlement.com, or mail this completed and signed form to the Settlement Administrator at the address to the right.

Questions? Visit

www.VenueFeeSettlement.com or call (844) 659-2531. Please do not contact the Court or the Clerk's office about your claim.

Venue Fee Settlement
Administrator
PO Box 1268
Baton Rouge, LA, 70821
www.VenueFeeSettlement.com