AGREEMENT TO PARTICIPATE IN REFUSE FEE CLASS ACTION
Guiffrida v. City of Scranton
Case No. 2016-cv-6933

I, _____, am (was) a resident of the City of Scranton who between January 1, 2014, and the present, paid the City's annual refuse fee. I have read the Notice of Pendency of Class Action, and elect to participate in the lawsuit. I understand that by doing so, I will be represented by the Plaintiff's lawyers. I further understand that if the Plaintiff is successful, the Plaintiff's lawyers will assist me in obtaining an individual refund from the City for any overpayment of the refuse fee. In exchange for their assistance, the Plaintiff's lawyers will request up to 25% of all the refunds they obtain to cover their costs and attorneys' fees.

My contact information is as follows:

First Name: MI: Last Name:

Current Address:

City: State: ZIP Code:

Phone: – –

Email Address:

Date: – – (MM DD YYYY) Signature:

RETURN TO EITHER OF THE FOLLOWING NO LATER THAN JULY 25, 2019:

THE CITY OF SCRANTON REFUSE CLASS ACTION
P.O. Box 3127
Portland, OR 97208-3127

EMAIL: RefuseFeesClassAction@smbb.com