

**Exclusion Request – Soutter v. TransUnion Settlement Administrator
Receive No Settlement Benefits**

(If you choose this option, you will not receive a settlement check)

To exclude yourself from the Settlement, you must complete the attached Exclusion Request, selecting “I am opting out” where indicated, or send a letter stating that you want to be excluded from the Settlement of the *Soutter v. TransUnion* case. Be sure to include: (1) the name of this lawsuit, *Donna K. Soutter v. TransUnion, LLC*, Case No. 3:10-CV-514 (E.D. Va.); (2) your full name, current address, and telephone number; (3) the following statement: “I request to be excluded from the class settlement in *Donna K. Soutter v. TransUnion, LLC*, United States District Court, Eastern District of Virginia, Case No. 3:10-CV-514 (E.D. Va.)”; and (4) your signature.

You must mail your Exclusion Request so that it is postmarked no later than May 28, 2014, to:

Exclusion Requests – *Soutter v. TransUnion* Settlement Administrator
P.O. Box 1607
Blue Bell, PA 19422

Exclusion Request – *Soutter v. TransUnion* Settlement Administrator

FILL OUT AND RETURN THIS FORM **ONLY** IF YOU WISH TO EXCLUDE YOURSELF FROM THE SETTLEMENT. IF YOU WISH TO PARTICIPATE IN THE SETTLEMENT, YOU DO NOT NEED TO RETURN THIS FORM.

_____ I am opting out of the Settlement in *Donna K. Soutter v. TransUnion, LLC*, Case No. 3:10-CV-514 (E.D. Va.).

Claim Number:

(Your unique claim number is listed on the inside of the Postcard Notice that was mailed to you.)

Full Name:

Current Address:

Phone Number:

Signature