

**SETTLEMENT CLAIM FORM**

**To Make a Claim for Compensation Under the Settlement, You Must Provide All Requested Information and Sign and Mail this Claim Form, Postmarked On or Before July 23, 2018, to the Settlement Administrator at**

Banco Popular Overdraft Fee Settlement  
c/o A.B. Data, Ltd.  
P.O. Box 173048  
Milwaukee, WI 53217

**Notice ID #:** \_\_\_\_\_ **Enter Any Name/Address Changes:**

Name on Popular Account (if different from current name) \_\_\_\_\_

**CLAIM:** Popular’s records indicate that you were charged one or more overdraft fees on Card transactions during the Class Period. You can obtain the total amount of overdraft fees, not including any continuous overdraft fees, that you were charged during the Class Period on the Settlement Website by using the Notice ID # listed on this Notice or by calling the Settlement Administrator.

As described in the Notice included with this Claim Form, and in other Notices included on the settlement website, Plaintiffs allege that Popular engaged in three (3) practices that caused settlement class members to incur overdraft fees during the Class Period that should not have been charged: (1) Failure-to-Warn, (2) Reordering and (3) Inaccurate Balance Reporting (collectively, the “Disputed Practices”).

To make a claim, you must provide in the space provided to the right under **YOU MUST COMPLETE THIS SECTION** an estimate of the *total* percentage (1% - 100%) of the Card overdraft fees that you incurred during the Class Period that you believe were caused by the Disputed Practices. The Settlement Administrator will use the estimated percentage that you provide to calculate the amount of your claim.

*\* Settlement Class Counsel believes that up to 100% of all Card overdraft fees paid by all Settlement Class Members during the Class Period were likely caused by one or any combination of the Disputed Practices, including that Popular did not provide a real-time warning at ATM and POS terminals that an attempted transaction, if completed, could overdraw the account and result in an overdraft. If you believe that all of your Overdraft Fees charged by Popular for ATM and POS transactions were caused by one or more of the alleged Disputed Practices, you should indicate 100% in the line.*

*\* BPNA believes that less than 100% of all Card overdraft fees paid by all settlement class members during the Class Period were likely caused by one or any combination of the*

*Disputed Practices, including because at least some settlement class members may have knowingly overdrawn their accounts because they had an immediate need for more money than they had in their account. The estimated percentage that you provide on the line below should equal the total percentage of your Overdraft Fees that you believe were caused by one or more of the alleged Disputed Practices.*

**YOU MUST COMPLETE THIS SECTION:**

**FIRST AND LAST NAME(S)** \_\_\_\_\_  
**ADDRESS1** \_\_\_\_\_  
**ADDRESS2** \_\_\_\_\_  
**CITY, STATE ZIP** \_\_\_\_\_

I believe that \_\_\_\_\_% (1-100%) of the overdraft fees I incurred during the Class Period were the result of one or more of the Disputed Practices.

**Certification:** By signing and submitting this claim form, the undersigned (1) attests that, to the best of his or her knowledge, he or she is entitled to the requested relief, and (2) agrees to be bound by the terms of Settlement Agreement.

Date: \_\_\_\_\_ Signature of Account Holder: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Co-Account Holder (if any): \_\_\_\_\_