



## **For use with Tier 2 Claims (With Proof of Purchase)**

Tier 2 Benefit is available for Settlement Class Members who purchased any variety of Silver Bullet or Pocket Hose Bullet Garden Hoses during the Class Period. Selecting Tier 2 requires that you to provide a copy of the receipt or a retail rewards submission memorializing the purchase of the Class Products or that your purchases appear in Defendant’s records (“Proof of Purchase”) but does not require you to return the Class Products. You will receive a refund of the amount you paid for each Class Product purchased up to the total amount of units purchased that are returned with Proof of Purchase. If your Proof of Purchase does not reveal the amount paid for the Class Product(s), you will receive a refund of the MSRP for the Hose(s) purchased.

Your Tier 2 Claim requires Proof of Purchase documentation of one of the following from you: (1) the receipt; (2) removed UPC code from the package(s); or (3) other similar type of documentation evidencing purchase of the applicable Hose during the Class Period in the United States.

### **Attestation**

- Check here if you wish to file a Tier 2 Claim. This Tier requires you to enclose Proof of Purchase documentation with this claim form or that, alternatively, you claim your purchases appear in Defendant’s records.
  - You purchases may appear in Defendant’s records if you purchased Class Product directly from the website at [www.pockethose.com](http://www.pockethose.com), [www.pockethoseultra.com](http://www.pockethoseultra.com), [www.pockethosedurarib.com](http://www.pockethosedurarib.com), or [www.pockethosetopbrass.com](http://www.pockethosetopbrass.com) or by calling a toll-free number in response to a television advertisement.
  - If you are making a claim with a Proof of Purchase, you can either: (1) e-mail a copy of your receipt(s) or retail rewards submission memorializing the purchase of the Class Products along with this Claim Form to [www.pockethosesettlement.com](http://www.pockethosesettlement.com); or (2) mail the receipts or other Proof of Purchase along with this Claim Form to: Digital Settlement Group; PO Box 232; Valparaiso, IN 46384.

**Please complete *only one* of the sections options below depending on Proof of Purchase type.**

**Completing more than one option below will invalidate your claim.**

Complete this section if your Proof of Purchase reveals the amount(s) paid for the Class Product(s).

Enter the purchase price for each product that you are claiming with Proof of Purchase:

Purchase Price 1: \_\_\_\_\_ Purchase Price 2: \_\_\_\_\_ Purchase Price 3: \_\_\_\_\_  
 Purchase Price 4: \_\_\_\_\_ Purchase Price 5: \_\_\_\_\_ Purchase Price 6: \_\_\_\_\_

If you require additional space, please submit additional *signed* declarations with your Claim Form.

Complete this section if your Proof of Purchase does **NOT** reveal the amount(s) paid for the Class Product(s).

Enter a quantity next to the product(s) that you are claiming with Proof of Purchase:

Pocket Hose Bullet 25 ft: \_\_\_\_\_ Pocket Hose Bullet 50 ft: \_\_\_\_\_  
 Pocket Hose Silver Bullet 25 ft: \_\_\_\_\_ Pocket Hose Silver Bullet 50 ft: \_\_\_\_\_  
 Pocket Hose Silver Bullet 75 ft: \_\_\_\_\_ Pocket Hose Silver Bullet 100 ft: \_\_\_\_\_

**\*\*Failure to include Proof of Purchase for claims for which a Proof of Purchase is required will result in the reduction of your claims.**

## **For use with Tier 3 Claims (Return of Hose)**

Tier 3 Benefit is available for Settlement Class Members who purchased any variety of Silver Bullet or Pocket Hose Bullet Garden Hoses during the Class Period. Selecting Tier 3 requires you to return a Class Product to the Settlement Administrator and allows you to receive a full refund (MSRP) of the purchase. Settlement Class Members who return a Hose to the Settlement Administrator receive a full refund between \$13.00 and \$50.00 each (depending on which Class Product you purchased) up to the total amount of units purchased that are returned with Proof of Purchase. Telebrands will provide free shipping to return the Hose(s).

If you are returning the Class Product for a full refund, you may contact the Settlement Administrator at [info@pockethosesettlement.com](mailto:info@pockethosesettlement.com), and provide a claim number after submitting your claim, for prepaid postage to be emailed to you.

### **Attestation**

- Check here if you wish to file a Tier 3 Claim and are returning your Class Product with this claim form. Please enter a quantity next to the product(s) that you are returning.
 

Pocket Hose Bullet 25 ft: \_\_\_\_\_ Pocket Hose Bullet 50 ft: \_\_\_\_\_ Pocket Hose Silver Bullet 25 ft: \_\_\_\_\_  
 Pocket Hose Silver Bullet 50 ft: \_\_\_\_\_ Pocket Hose Silver Bullet 75 ft: \_\_\_\_\_ Pocket Hose Silver Bullet 100 ft: \_\_\_\_\_

**Payment Information**

Please select how you would like to receive your payment:

- Prepaid MasterCard Email: \_\_\_\_\_
- PayPal Email or Phone Number: \_\_\_\_\_
- Venmo Email or Phone Number: \_\_\_\_\_
- Direct Deposit Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Select one:       Checking                       Savings
- Zelle Email or Phone Number: \_\_\_\_\_
- Check

**Submission to Jurisdiction of the Court**

By signing below, you are submitting to the jurisdiction of Essex County, New Jersey.

**Certification under Penalty of Perjury**

**I hereby certify under penalty of perjury that:**

1. I have read the Settlement Agreement and agree to its terms, including the Released Claims;
2. The information provided in this Claim Form is accurate and complete to the best of my knowledge, information and belief;
3. The additional information provided to the Settlement Administrator to support my Claim, if any, is an original or a complete and true copy of the original document;
4. I am a member of the Settlement Class and did not request to Opt-Out from the Settlement Class;
5. I am neither (a) a Person who purchased or acquired the Product for resale; (b) an employee of Defendant; (c) a Person who has filed for exclusion from the Settlement Class; (d) a governmental entity; nor (f) a judicial officer to whom this Action is assigned, or any member of the judge’s immediate family;
6. I have not submitted any other Claim for the same purchases and have not authorized any other Person or entity to do so, and know of no other Person or entity having done so on my behalf;
7. I will timely provide any additional information requested by the Settlement Administrator to validate my Claim;
8. I understand that by submitting this Claim Form, I am deemed to have given a complete Release of all Released Claims; and
9. I understand that Claims will be audited for veracity, accuracy and fraud. Illegible Claim Forms can be rejected. If a Claim Form is determined not to be a Valid Claim, it will be rejected.

Signature: \_\_\_\_\_ Dated: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_