

Numi Release Card Settlement Claim Form

Submit your claim by mailing this completed form to: Numi Release Card Settlement, 3101 Western Ave., Suite 350, Seattle, WA 98121. You may also email this completed form to numireleasecard@sylaw.com. **All claims must be received by November 19, 2024.**

First Name _____

Last Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Date of Birth _____

If you received a release card under a different name than you are using now, please provide that name below:

Identify the facilities where you received a Numi Release Card with the state and name of each facility:

I certify, under penalty of perjury, that the information provided in this claim form is true and correct.

(Signature)

If you have questions, contact us at numireleasecard@sylaw.com. Instead of completing this form, you may make a claim electronically at <https://www.numireleasecard.com/claim-form>