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The DEADLINE to submit or mail this Claim Form is: January 25, 2027

CLAIM FORM

Sandra Reyes v. TA Fintech Inc. d/b/a TradeAlgo

Case No. 2026-001915-CA-01

Return this Claim Form to: *Reyes v. TA Fintech Inc. d/b/a TradeAlgo*, C/O Kroll Settlement Administration LLC, P.O. Box 5324, New York, NY 10150-5324.

CLAIM DEADLINE: THIS CLAIM FORM MUST BE SUBMITTED BY JANUARY 25, 2027, BE FULLY COMPLETED, SIGNED, AND MEET ALL CONDITIONS OF THE SETTLEMENT AGREEMENT.

YOU MUST SUBMIT THIS CLAIM FORM TO RECEIVE A CLAIM SETTLEMENT PAYMENT.

Please note that this Claim Form may be researched and verified by the Administrator.

YOUR CONTACT INFORMATION

Name: _____
(First) (Middle) (Last)

Current Address: _____ __ __ ___ ___ ___ ___ ___
(City) (State) (ZIP Code)

Provide the telephone number(s) at which you received text message(s) from TA Fintech Inc. d/b/a TradeAlgo. If you received text messages at more than one phone number, list all such numbers you used. You may leave unused lines blank. The Administrator will verify any qualifying messages to the phone numbers listed below.

Telephone Number (required): (___ ___ ___)___ ___ ___ - ___ ___ ___ ___

Telephone Number (if applicable): (___ ___ ___)___ ___ ___ - ___ ___ ___ ___

Telephone Number (if applicable): (___ ___ ___)___ ___ ___ - ___ ___ ___ ___

Email address (if any): _____ **@** _____

Current Phone Number: (___ ___ ___)___ ___ ___ - ___ ___ ___ ___ or ☐ check if same as above. (Please provide a phone number where you can be reached if further information is required.)

Claim ID: 8 3 4 6 3 ___ ___ ___ ___ ___ ___ ___ ___ ___

Settlement Class Member Verification

By submitting this Claim Form, I attest under penalty of perjury that I am the current or former subscriber or authorized user for the telephone number(s) listed in this Claim Form, and that I received more than one text message from TA Fintech Inc. d/b/a TradeAlgo, at the telephone number(s) listed above, after opting out of text communications or while my number was listed on the DNC Registry. I further attest that the information provided herein is true and correct under penalty of perjury.

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Additional information regarding the Settlement can be found at **www.TradeAlgoTCPASettlement.com**.

Signature: _____ Date: ___ ___ / ___ ___ / ___ ___ ___ ___

Print Name: _____

If you have questions, visit www.TradeAlgoTCPASettlement.com or call toll-free (833) 319-1315.