



Claim Form

If mailed, this Claim Form must be postmarked no later than May 16, 2016.
If submitted online it must be submitted by 11:59 p.m. PT on May 16, 2016.

A. ADDRESS INFORMATION FOR DELIVERY OF CLASS AWARD

First Name	M.I.	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Address

Continuation of Primary Address

City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Area code	Telephone number
<input type="text"/>	<input type="text"/>

B. TRANSACTION INFORMATION

I entered into a credit card transaction with Kmart between December 10, 2007 and December 8, 2008, and provided the following ZIP code (s) during the transaction(s):

Approximate Transaction Date (month/year)	ZIP code(s) provided
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

C. CERTIFICATION OF ELIGIBILITY

By signing and submitting this Claim Form, you certify that you entered into a credit card transaction during the period of time from December 10, 2007 to December 8, 2008 with Kmart, that you did not use a credit card issued to a business, that your purchase was not a layaway or a special order delivery, and that the ZIP code you gave was your ZIP code at the time of the transaction.

If you do not indicate an award selection or select more than one award, you will receive the \$15 Merchandise Voucher.

D. ELECTION OF CLASS AWARD

Please indicate whether you wish to receive the \$10 Cash Award, \$15 Merchandise Voucher, or \$15 Shop Your Way Rewards Points:

Please note that valid claimants will be eligible to receive a single award regardless of the number of eligible transactions made during the Class Period.

- \$10 Cash Award
- \$15 Merchandise Voucher
- \$15 Shop Your Way Rewards Points (Shop Your Way Rewards Member # _____)

If you do not indicate an award selection or select more than one award, you will receive the \$15 Merchandise Voucher.

Continued on Reverse Side



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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E. SIGNATURE UNDER PENALTY OF PERJURY

I verify under penalty of perjury under the laws of the State of California that the information in the “Transaction Information” and “Certification of Eligibility” sections are true and accurate.

Signature: _____

Dated: _____

YOUR CLAIM FORM MUST BE SUBMITTED NO LATER THAN MAY 16, 2016, ONLINE AT www.KmartSettlement.com, OR BY MAIL TO THE CLAIMS ADMINISTRATOR, AT THE ADDRESS BELOW:

Kmart Class Action Settlement
c/o KCC, LLC
P.O. Box 30213
College Station TX 77842-3213

