

IN THE CIRCUIT COURT  
FOR HOWARD COUNTY, MARYLAND

JASON W. ROYAL

and all others similarly situated

Plaintiffs,

[vs]

Civil No: 13-C-04-059581 OC

EASTERN HOMES, INC., et. al.

Defendants.

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**CLAIM FORM – COMPLETE IN ORDER TO BE  
ELIGIBLE FOR RECOVERY**

**YOU MUST BE A CURRENT OWNER AND COMPLETE, SIGN AND MAIL THIS CLAIM FORM BY FIRST CLASS U.S. MAIL OR EQUIVALENT, POSTAGE PAID, POSTMARKED ON OR BEFORE OCTOBER 3, 2011 OR ADDRESSED AS FOLLOWS, IN ORDER TO BE ELIGIBLE TO RECEIVE MONETARY RECOVERY. CLAIMS WILL NOT BE ACCEPTED IF POSTMARKED AFTER THE DEADLINE IDENTIFIED HEREIN.**

Mail to:

Pels, Anderson & Lee, LLC  
4833 Rugby Avenue  
Fourth Floor  
Bethesda, MD 20814

(301) 986-5570  
(301) 986-5571 FAX

[www.pallaw.com](http://www.pallaw.com)

EASTERN CLASS I - CLASS ACTION SETTLEMENT CLAIM FORM

Please print clearly in blue or black ink.

1. Claimant Information

Name:

\_\_\_\_\_  
*Last*

\_\_\_\_\_  
*First*

\_\_\_\_\_  
*Middle*

Mailing Address:

\_\_\_\_\_  
*Number and Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

Social Security No.: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_

Evening Phone: (\_\_\_\_) \_\_\_\_\_

2. Your Mobile Home

Are you a current owner:

\_\_\_\_\_  
*Yes*

\_\_\_\_\_  
*No*

\_\_\_\_\_  
*Manufacturer*

\_\_\_\_\_  
*Model*

\_\_\_\_\_  
*Model Year*

\_\_\_\_\_  
*Name of Record Owner(s)*

\_\_\_\_\_  
*Vehicle Identification Number (VIN)*

This information on your home should be available from the data plate - an 8 x 11" piece of paper glued to the wall, in a closet, or behind a cabinet door.

\_\_\_\_\_  
*Date of Purchase*

\_\_\_\_\_  
*Name of Dealer or Previous Owner*

\_\_\_\_\_  
*Date You Sold Mobile Home*

EASTERN CLASS I - CLASS ACTION SETTLEMENT CLAIM FORM

\_\_\_\_\_  
*Name of Lender Financing Your Home*

\_\_\_\_\_  
*Loan Number*

Please attach a copy of your purchase agreement with the dealer or previous owner and a copy of the Certificate of Title for your mobile home.

**3. Your Mobile Home Park(s)**

*Name(s) of Mobile Home Park(s)  
Where You Have Resided and Your  
Address at the Park*

*Installation Date(s) Dates of Residency  
of Your Home*

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4. Additional Comments**

Please list anything additional you would like to state here.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Attach additional page(s) if necessary*

Please attach copies of any repair receipts.

**5. Acknowledgments And Signatures**

**EASTERN CLASS I - CLASS ACTION SETTLEMENT CLAIM FORM**

The Undersigned Claimant agrees to submit to the exclusive jurisdiction of the Circuit Court for Howard County, Maryland for all purposes associated with this Claim.

The Undersigned Claimant agrees to cooperate with respect to the verification of this Claim Form.

THE UNDERSIGNED CLAIMANT HEREBY SWEARS UNDER PENALTY OF PERJURY THAT ALL OF THE INFORMATION PROVIDED HEREIN IS TRUE AND CORRECT AND AGREE WITH AND ACKNOWLEDGE THE FOLLOWING:

Your Signature(s):

\_\_\_\_\_

*Claimant*

\_\_\_\_\_

*Date*

\_\_\_\_\_

*Claimant*

\_\_\_\_\_

*Date*