

CLAIM FORM

SUPERIOR COURT OF CALIFORNIA FOR THE COUNTY OF LOS ANGELES – CENTRAL DISTRICT

**BERTRAM RIDDICK v. WDI INTERNATIONAL, INC. d/b/a TONY ROMA’S – CASE NO. BC507786
AND THE RELATED CASE OF JEFF MCLAUGHLIN AND BRUCE GREENBERG v. WDI INTERNATIONAL, INC. d/b/a TONY ROMA’S – CASE NO. BC514961**

INSTRUCTIONS

EACH CLASS MEMBER WHO MAKES A VALID CLAIM MAY BE ENTITLED TO A PAYMENT NOT TO EXCEED \$4,000.00

1. Please read all three pages of this form carefully. It is important that you follow all instructions and meet all deadlines and requirements, or your claim could be delayed or denied.

2. **IN ORDER TO MAKE A CLAIM, YOU MUST MAIL, FAX, OR EMAIL A COMPLETED CLAIM FORM TO THE CLAIMS ADMINISTRATOR AT THE ADDRESS LISTED BELOW. YOUR CLAIM MUST BE POSTMARKED, FAXED, OR E-MAILED BY DECEMBER 12, 2016.**

Mail, Fax, or E-Mail Claim to:

Tony Roma’s Settlement
Claims Administrator
1801 Market Street, Suite 660
Philadelphia, PA 19103

Website: www.TonyRomasSettlement.com
E-Mail: TonyRomasSettlement@AdministratorClassAction.com
Fax: 1-215-525-0209

3. To ensure that your claim is considered:

- Please make sure that all sections of this form are fully completed.
- Please make sure you have attached your proof(s) of purchase.
- Please make sure that you have signed this form.
- If you move, you need to send the Claims Administrator your new address.

CLAIMANT INFORMATION -- PLEASE COMPLETE ALL SECTIONS

<input type="text"/>	<input type="text"/>	
FIRST NAME	LAST NAME	
<input type="text"/>		
STREET ADDRESS		
<input type="text"/>	<input type="text"/>	<input type="text"/>
CITY	STATE	ZIP CODE
<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	PHONE NUMBER	

THIS FORM MAY BE COPIED, AND ADDITIONAL COPIES MAY BE OBTAINED FROM THE SETTLEMENT ADMINISTRATOR AT THE ADDRESS OR WEB-SITE LISTED ABOVE.

PLEASE PRINT IN BLACK OR BLUE INK ONLY

BASIS FOR YOUR CLAIM

PLEASE COMPLETE THE FOLLOWING:

I was a customer at WDI International, Inc.'s Tony's Roma's restaurant, formerly located in Torrance, California during the Monday through Thursday "Buy One Drink and Get the Second Drink for \$0.99" and/or Friday "First Drink Is \$0.99" ladies' night promotions (the "Ladies Night" promotions) held there for the period from April 1, 2012 to May 31, 2013, and purchased a beverage that was listed on this Tony Roma's restaurant's Happy Hour drinks menu and that was subject to the Ladies Night promotions.

Date(s) of my patronage of the Tony's Roma's restaurant, formerly located in Torrance, California during its Ladies Night promotions: (Please enter MM/DD/YEAR format)

DATE #1 / / **DATE #2** / /
DATE #3 / /

Brief description of the facts supporting my claim: _____

You must attach your proof(s) of purchase of a drink listed on the Tony Roma's Happy Hour menu that was subject to the Ladies Night discount, and the purchase of that drink must have been made during Tony Roma's Ladies Night promotions to this Claim Form. Claims will not be honored if they do not include a proof of purchase of an alcoholic beverage that was listed on the Happy Hour menu during a Ladies' Night promotion and that you purchased during the Ladies' Night promotion.

IF YOU DO NOT HAVE DOCUMENTARY PROOF OF THE PURCHASE, BUT YOU ARE A CLASS MEMBER, YOU MUST COMPLETE THE FOLLOWING:

I purchased a drink at Tony Roma's in Torrance, California between April 16, 2012 and May 3, 2013 during Ladies' Night promotions in the bar area of the restaurant. The drink was offered during the Ladies' Night promotion as a discounted drink to women. I purchased the drink during the hours of the Ladies' Night promotion. I do not have documentary proof of the purchase.

My home address or work address is within 10 miles of 24301 Crenshaw Blvd, Torrance, CA 90505.

PLEASE SELECT ONE: The address below is my **HOME** or **WORK** address during the period of April 16, 2012 and May 3, 2013.

STREET **CITY** **STATE** **ZIP CODE**

Attached is proof of my work or home address during this period.

NOTICE: Notwithstanding the above declaration, WDI reserves the unrestricted right to reject any claims for which a proof of purchase is not submitted.

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**SUBMISSION TO JURISDICTION OF COURT AND
ACKNOWLEDGMENT OF RELEASE OF CLAIMS**

I submit to the jurisdiction of the Los Angeles County Superior Court with respect to my claim as a Participating Class Member and for purposes of enforcing the Release Claims described in the Joint Stipulation and Agreement to Settle Class Action and herein. I acknowledge that I am bound by and subject to the terms of any judgment that may be entered in this action.

By submitting this Proof of Claim and Release, I understand that I will be will be deemed to have released and waived the following Released Claims: All claims, demands, rights, liabilities and causes of action of every nature and description whatsoever including without limitation statutory, constitutional, contractual or common law claims, against the Releasees (as defined below), or any of them, for any type of relief and penalties, that accrued from April 1, 2012 through May 31, 2013, which relate to or arise under any federal, state or local law or federal or state administrative order that was or could have been pled based on the facts alleged in the Complaint in Riddick v. WDI International, Inc., Los Angeles County Superior Court Case No. BC507786, and the First Amended Complaint in McLaughlin, et al. v. WDI International, Inc., Los Angeles County Superior Court Case No. BC51496, relating to claims of (1) Violation of Civil Code section 51 – Unruh Civil Rights Act; (2) Violation of Civil Code section 51.5; (3) Violation of Civil Code section 51.6 – Gender Tax Repeal Act of 1995; (4) Violation of Business & Professions Code section 125.6; and (5) Negligence. “Releasees” means WDI International, Inc., each of its respective parent companies, subsidiaries, affiliates, current and former management companies, shareholders, members, agents (including without limitation, any investment bankers, accountants, insurers, reinsurers, attorneys and any past, present or future officers, directors and employees) predecessors, successors, and assigns.

I recognize that I am able to obtain that written Joint Stipulation and Agreement to Settle Class Action in order to ensure that I fully understand the scope of this release. By signing this Claim Form, I acknowledge that I have no questions about the scope of release and that I knowingly release my claims against WDI International, Inc. I agree to furnish additional information to the Claims Administrator to support my claim if requested to do so.

I DECLARE UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF CALIFORNIA, THAT THE FOREGOING IS TRUE AND CORRECT.

DATE: _____ **SIGNATURE:** _____

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SUBSTITUTE FORM W-9

Request for Taxpayer Identification Number (“TIN”) and Certification

PART I

Name: _____

Check appropriate box:

Individual Corporation Partnership Other (specify) _____

Enter your TIN below. For individuals, this is your Social Security Number (“SSN”).

□□□□ - □□□□ - □□□□

Social Security Number

**PART II
CERTIFICATION**

UNDER THE PENALTY OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED IN THIS FORM IS TRUE, CORRECT AND COMPLETE.

I (We) certify that I am (we are) **NOT** subject to backup withholding under the provisions of Section 3406 (a)(1)(C) of the Internal Revenue Code because: (a) I am (we are) exempt from backup withholding; or (b) I (we) have not been notified by the Internal Revenue Service that I am (we are) subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the Internal Revenue Service has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the Internal Revenue Service that you **are** subject to backup withholding please cross out the word **NOT** in the certification above.

(Sign your name here)

(Date)

(Type or print your name here)