CLOSED ACCOUNT CLAIM FORM

To submit a claim for an account that was Closed as of January 2, 2020 please fill out the form below and mail before July 29, 2020.

_____ _____ _____
First Name MI Last Name

_____
Street Address

_____ _____ _____
City State ZIP Code

_____ _____
Contact Phone Number Email Address

_____
Cell Phone Number that received a call

You may log into the Settlement Website at www.CPSTCPASettlement.com or contact the Cavalry TCPA Settlement Administrator, JND Legal Administration, to obtain your current account status. Sign below and return this claim form to submit your claim for a cash benefit.

I received a call from Cavalry at the above Cell Phone Number.

Claimant Signature: _____ Date: ____/____/____