

## SCIPLAY ELECTION FORM

YOU DO NOT NEED TO COMPLETE THIS FORM IF YOU WANT TO RECEIVE VIRTUAL COINS. IF YOU WANT TO RECEIVE MONEY RATHER THAN VIRTUAL COINS YOU MUST SUBMIT THIS ELECTION FORM ONLINE OR BY MAIL POSTMARKED BY **NOVEMBER 4, 2025**. THE ELECTION FORM MUST BE SIGNED AND MEET ALL CONDITIONS OF THE SETTLEMENT AGREEMENT.

The Settlement Administrator will review your Election Form. If accepted, you will receive the portion of the Settlement Fund you are entitled to under the Settlement in money. This process takes time, please be patient. If you have any questions, visit the Settlement Website [www.SciPlaySettlement.com](http://www.SciPlaySettlement.com).

**Instructions.** Fill out each section of this form and sign where indicted. To find your Player ID(s), select the **Settings** button in the game (it's the gear icon).

<u><b>First Name</b></u>		<u><b>Last Name</b></u>	
<u><b>Street Address</b></u>			
<u><b>City</b></u>		<u><b>State</b></u>	<u><b>Zip Code</b></u>
<u><b>Email Address</b></u>			<u><b>Phone Number</b></u>
<u><b>(only complete the following boxes for the games you have played and made purchases)</b></u>			
<u><b>Jackpot Party Casino Player ID(s)</b></u>	<u><b>Gold Fish Casino Player ID(s)</b></u>	<u><b>Hot Shot Casino Player ID(s)</b></u>	<u><b>Quick Hit Slots Player ID(s)</b></u>
<u><b>88 Fortunes Player ID(s)</b></u>	<u><b>Monopoly Slots Player ID(s)</b></u>	<u><b>Bingo Showdown Player ID(s)</b></u>	
<u><b>All email addresses associated with any of the foregoing game accounts.</b></u>			
<u><b>All email addresses associated with Facebook (App Center), Apple (App Store), Google (Play Store), Amazon, and Microsoft accounts from which you played any of the foregoing games.</b></u>			

**Settlement Class Member Affirmation:** By submitting this Election Form you affirm under penalty of perjury that, to the best of your knowledge, the Player ID(s) and email address(es) listed above are yours.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Select Payment Method.** Select **ONE** box for how you would like to receive payment and provide the requested information.

<input type="checkbox"/> Check  <b>Mailing Address:</b>  	<input type="checkbox"/> Zelle®  <b>Email Address <u>OR</u> Phone Number:</b>  	<input type="checkbox"/> PayPal®  <b>Email Address:</b>  	<input type="checkbox"/> Venmo®  <b>Email Address <u>OR</u> Phone Number:</b>  
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