

In the lawsuit *Hoyle v. Harrington Raceway, Inc.*, Case No. 1:23-cv-00420-MN (D. Del.) you are a class member if you received notice that your personal information was potentially compromised as a result of the data security incident that Harrington experienced in December 2022 (the “Data Incident”).

**WHAT ARE THE SETTLEMENT BENEFITS AND TERMS?**

Under the Settlement, Harrington has agreed to pay \$400,000.00 into a Settlement Fund which will be distributed to Class Members who submit Valid Claims. Class Members who believe they suffered out-of-pocket losses or expenses as a result of the Data Incident may claim up to \$1,000.00 for the reimbursement of sufficiently documented losses or expenses. All Class Members may also submit claims to receive additional cash payments of approximately \$50.00, which will be *pro rata* adjusted up or down based on the balance of the Settlement Fund after payments for valid out-of-pocket loss or expense claims, settlement administration expenses, attorneys’ fees and expenses, and any class representative service award. More information about the types of Claims and how to file them is available at [www.HarringtonDataSettlement.com](http://www.HarringtonDataSettlement.com).

**WHAT ARE YOUR RIGHTS AND OPTIONS?**

**Submit a Claim Form.** To qualify for a cash payment, you must timely mail a Claim Form that is attached to this notice or complete and submit a Claim Form online at [www.HarringtonDataSettlement.com](http://www.HarringtonDataSettlement.com). Your Claim Form must be postmarked or submitted online no later than **March 4, 2024**. Simpluris is the Settlement Administrator.

**Opt Out.** You may exclude yourself from the Settlement and retain your ability to sue Harrington on your own by mailing a written request for exclusion to the Settlement Administrator that is postmarked no later than **February 19, 2024**. If you don’t exclude yourself, you will be bound by the Settlement and give up your right to sue regarding the released claims.

**Objecting.** If you do not exclude yourself, you have the right to object to the Settlement. Written objections must be signed, postmarked no later than **February 19, 2024**, and provide the reasons

for the objection. If you intend to file an objection, please review the full requirements for filing an objection located at [www.HarringtonDataSettlement.com](http://www.HarringtonDataSettlement.com).

**Do Nothing.** If you do nothing, you will not receive a Settlement payment and will lose the right to sue regarding the released claims.

**Attend the Final Approval Hearing.** The Court will hold a Final Approval Hearing at **10:00 a.m.** on **April 25, 2024** to determine if the Settlement is fair, reasonable, and adequate. All persons who timely object to the Settlement may appear at the Final Approval Hearing.

**Who are the attorneys for the Plaintiff and the proposed Class?** The Court has appointed Philip J. Krzeski and Bryan L. Bleichner of Chestnut Cambronne PA and Joseph M. Lyon of the Lyon Firm to represent the Class.

**Do I have any obligation to pay attorneys’ fees or expenses?** No. Attorneys’ fees and expenses will be paid exclusively from the Settlement Fund as awarded and approved by the Court. Class Counsel will request attorneys’ fees and litigation expenses in an amount not exceeding \$133,333.33. The motion for attorneys’ fees and expenses will be posted on the Settlement Website once it is filed.

**How much are the Class Representative Service Awards?** The Class Representative will seek a Service Award in the amount of \$5,000.00 for his efforts in this case.

Who is the Judge overseeing this Settlement? Judge Maryellen Noreika of the United States District Court for the District of Delaware.

**Where may I locate a copy of the Settlement Agreement, learn more about the case, or learn more about submitting a Claim?** [www.HarringtonDataSettlement.com](http://www.HarringtonDataSettlement.com)

\*\*\* Please note that if you wish to submit a claim for compensation for out-of-pocket losses on the attached Claim Form, you will likely need to submit your claim online so that you can attach all information necessary to support your request for payment. If you wish to receive just a pro rata cash payment, the attached tear off claim form will suffice. A longer version of the Claim Form may be accessed on the Settlement Website.

**This Notice is a summary of the proposed Settlement.**



NO POSTAGE  
NECESSARY  
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IN THE  
UNITED STATES

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POSTAGE WILL BE PAID BY ADDRESSEE



***Hoyle v. Harrington Raceway Data Settlement***  
**PO Box 25225**  
**Santa Ana, CA 92799**



Hoyle v. Harrington Raceway Data Settlement  
P.O. Box 25225  
Santa Ana, CA 92799

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## NOTICE OF CLASS ACTION SETTLEMENT

You may be entitled to submit a claim for monetary compensation under a class action settlement.  
[www.HarringtonDataSettlement.com](http://www.HarringtonDataSettlement.com)

CLASS MEMBER UNIQUE ID:

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### CLAIM FORM

Claims must be postmarked or submitted no later than March 4, 2024

**Claimant Information:**

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

**Monetary Compensation:**

1. **Pro Rata Cash Payment:** Would you like to receive a cash payment under the Settlement? (circle one)

Yes      No

*If you are a Settlement Class member, you may receive a cash payment of approximately \$50.00, which will be increased or decreased pro rata from money remaining in the Settlement Fund after all claims are submitted. You do not need to suffer out-of-pocket losses or expense to select this option.*

2. **Verified Out-of-Pocket Losses or Expenses:** I would like to submit a claim for out-of-pocket monetary losses in the amount of \$ \_\_\_\_\_ (not more than \$1,000.00) due to out-of-pocket expenses and/losses I incurred as a result of the Data Incident. I understand that I am required to provide supporting third-party documentation to support my claim for out-of-pocket losses or expenses, such as providing copies of any receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support other submitted documentation. I understand the Settlement Administrator may contact me for additional information before processing my claim. I understand that if I lack information and documentation supporting my claim for out-of-pocket losses or expenses, I will likely not receive compensation for this settlement benefit. I understand any monetary compensation I may receive under the settlement for expense or loss reimbursement is capped at \$1,000.00.

By signing my name below, I swear and affirm that the information included on this Claim Form is true and accurate, and that I am completing this claim form to the best of my knowledge.

SIGNATURE: \_\_\_\_\_