

IN THE SUPERIOR COURT OF CHARLTON COUNTY
STATE OF GEORGIA

TOLEDO MANUFACTURING)
COMPANY, RAYONIER FOREST)
RESOURCES, L.P.,)
MARK TIMOTHY THRIFT, LISA)
ROSE THRIFT, LESLIE H. BLAIR)
AND MARY E.)
BLAIR)
)
Plaintiffs,) CIVIL ACTION NO. SUCV201900232
)
v.)
)
CHARLTON)
COUNTY)
)
Defendant.)

CLAIM FORM FOR MISSING CLASS MEMBER

If you believe that you may be entitled to a refund of ad valorem taxes paid because of a resolution in the above referenced class action (the “Lawsuit”), but your name is not listed as a Class Member on the Administrator’s webpage for this Settlement (<https://lmgriggers.com/charlton>), you need to complete this Claim Form within forty-five (45) days from the Publication Date shown on the Administrator’s Settlement Webpage,

You will need to mail your completed and signed Claim Form to the Administrator at:

Larry Griggers, Administrator
Charlton County Class Action Settlement
121 Salem Drive
Lyons, GA 30436

The Administrator will review your Claim Form and respond to you with their findings. You will have fifteen (15) days to object to the Administrator’s findings. Objections will be considered and ruled upon by the Special Master appointed by the Court. The Special Master’s ruling is final and binding.

Additional information may be obtained from the Charlton County Website:

<https://charltoncountyga.us/422/Tax-Refund-Case>

CLASS MEMBER IDENTIFICATION

Please Type or Print

Name:
Parcel Number and Address of property for which you believe a refund is owed: Parcel No.: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Please list all the tax years for which you believe you are entitled to a refund: _____
Current Mailing Address: Street Address: _____ _____ City: _____ State: _____ Zip Code: _____
Area Code and Phone number (day):
Area Code and Phone number (evening):
Email:

If you need additional space, attach the required information on separate, numbered sheets in the same format as above and print your name at the top of each additional sheet.

SUPPORTING DOCUMENTATION

You may attach to this Claim Form any documentation that you believe supports your claim that you are entitled to a refund. Make sure each page of such documentation is clearly labeled with your name and parcel number.

CERTIFICATION

I/We certify that I/we currently own or owned and paid ad valorem property taxes for the property identified on the preceding page. I/We further declare and affirm under penalties of perjury that the foregoing information contained herein, and documents attached hereto, if any, are true, correct, and complete to the best of my/our knowledge, information, and belief, and that this Claim Form was executed this _____ day of _____, 20__.

Signature of Property Owner

Signature of Joint Property Owner, if any

(Print your name here)

(Print your name here)