

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

Mariah Moses, et al. v. Arhaus, Inc.
Case No. 8:24-cv-00728-FMO-ADS

CLAIM FORM

If you wish to file a claim to receive either a store credit gift card or a cash payment as described in the Class Notice, you must complete this Claim Form in its entirety. The Claim Form must be completed, signed, and received (if filled out and submitted online) or postmarked (if returned by mail) by December 19, 2025, unless you are an objector described in sections 4.9.1–4.9.3 of the Settlement Agreement. **IF YOUR CLAIM FORM IS NOT RECEIVED OR POSTMARKED ON OR BEFORE DECEMBER 19, 2025, YOUR CLAIM MAY BE REJECTED. ONLY ONE CLAIM FORM WILL BE HONORED PER CLAIMANT.**

Claim Forms must be physically mailed to:

Mariah Moses, et al. v. Arhaus, Inc.
c/o ILYM Group, Inc.
P.O. Box 2031
Tustin, CA 92781

or completed electronically at: www.arhaussettlement.com

Claimant Information: (PLEASE PRINT LEGIBLY)

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Cash Payment Option: By checking the box below, you elect to receive a cash payment in lieu of receiving a store credit gift card for the same amount. If you do not check the box below, then you will receive a store credit gift card.

☐

I elect to receive a cash payment in lieu of a store credit gift card.

Please read the statement below. You must sign and date the Claim Form acknowledging that you have reviewed and agree with the statement.

I attest under penalty of perjury that (1) between April 2, 2020 and September 18, 2024 (“Settlement Class Period”), I purchased one or more of Defendant’s products on its website, where the purchased product listed both a current sale price and also referenced a second, higher price (with or without a “strike” through it), and (2) have not received a refund or credit for their purchase(s).

Signature: _____

Dated: _____

QUESTIONS? CALL 1-855-735-2641 TOLL-FREE OR VISIT WWW.ARHAUSSETTLEMENT.COM