## PROOF OF CLAIM AND RELEASE FORM

## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

GINA McINTOSH, Individually and On Behalf of All Others Similarly Situated, Plaintiff,

VS.

KATAPULT HOLDINGS, INC., LEE EINBINDER, HOWARD KURZ, ORLANDO ZAYAS, KARISSA CUPITO and DEREK MEDLIN

Defendants.

Case No. 1:21-cv-07251 (AS)

Katapult Securities Litigation c/o JND Legal Administration PO Box 91340, Seattle, WA 98111

Toll-Free Number: 844-552-0057

Email: info@Katapult-FinServSecuritiesLitigation.com Website: www.Katapult-FinServSecuritiesLitigation.com

To be eligible to receive a share of the Settlement Fund in connection with the Settlement of this Action, you must complete and sign this Proof of Claim Form ("Claim Form") and mail it by first-class mail to the above address, *postmarked* no later than December 19, 2024 or submit it online at the above website on or before December 19, 2024.

Failure to submit your Claim Form by the date specified will subject your claim to rejection and may preclude you from being eligible to receive any money in connection with the Settlement.

Do not mail or deliver your Claim Form to the Court, the parties to the Action, or their counsel. Submit your Claim Form only to the Claims Administrator at the address set forth above.

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## PART I - INTRODUCTION

#### A. General Instructions

- 1. To recover as a member of the Settlement Class based on your claims in the action entitled *McIntosh v. Katapult Holdings, Inc., et al.*, No. 1:21-cv-07251 (AS) (the "Action"), you must complete, and on page 10 hereof, sign this Proof of Claim and Release ("Claim Form"). If you fail to file a properly addressed (as set forth in paragraph 3 below) Claim Form, your claim may be rejected, and you may be precluded from any recovery from the Settlement Fund created in connection with the proposed settlement of the Action.
- 2. Submission of this Claim Form, however, does not assure that you will share in the proceeds of settlement in the Action.
- 3. YOU MUST MAIL OR SUBMIT ONLINE YOUR COMPLETED AND SIGNED CLAIM FORM ON OR BEFORE DECEMBER 19, 2024, ADDRESSED AS FOLLOWS:

Katapult Securities Litigation c/o JND Legal Administration PO Box 91340 Seattle, WA 98111

If you are NOT a member of the Settlement Class, as defined below and in the Notice of Pendency and Proposed Settlement of Class Action (the "Notice"), DO NOT submit a Claim Form.

- 4. If you are a member of the Settlement Class and you do not timely and validly request exclusion from the Settlement Class, you are bound by the terms of any judgment entered in the Action, including the releases provided therein, WHETHER OR NOT YOU SUBMIT A CLAIM FORM.
- 5. It is important that you completely read and understand the Notice that accompanies this Claim Form, including the Plan of Allocation of the Settlement Fund set forth in the Notice. The Notice describes the proposed Settlement, how Settlement Class Members are affected by the Settlement, and the manner in which the Settlement Fund will be distributed if the Settlement and Plan of Allocation are approved by the Court. The Notice also contains the definitions of many of the defined terms (which are indicated by initial capital letters) used in this Claim Form. By signing and submitting this Claim Form, you will be certifying that you have read and that you understand the Notice, including the terms of the releases described therein and provided for herein.

### B. Claimant Identification

- 1. If you purchased or acquired Katapult securities (common stock and warrants) and/or FinServ common stock ("Eligible Securities") and held the certificate(s) in your name, you are the beneficial purchaser or acquirer as well as the record purchaser or acquirer. If, however, the certificate(s) were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial purchaser, and the third party is the record purchaser.
- 2. Use Part II of this form entitled "Claimant Identification" to identify the beneficial owner(s) of Eligible Securities. The complete name(s) of the beneficial owner(s) must be entered. If you held the Eligible Securities in your own name, you are the beneficial owner as well as the record owner. If, however, your Eligible Securities were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial owner of these shares, but the third party is the record owner. THIS CLAIM MUST BE FILED AND SIGNED BY THE ACTUAL BENEFICIAL PURCHASER(S) OR ACQUIRER(S) OR THE LEGAL REPRESENTATIVE OF SUCH PURCHASER(S) OR ACQUIRER(S) OF ELIGIBLE SECURTIES UPON WHICH THIS CLAIM IS BASED.

- 3. All joint purchasers must sign this Claim Form and be identified in Part II. The Social Security (or taxpayer identification) number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of your claim or result in rejection of the claim.
- 4. **One Claim Form should be submitted for each separate legal entity.** Separate Claim Forms should be submitted for each separate legal entity (e.g., a claim from joint owners should not include separate transactions of just one of the joint owners, and an individual should not combine his or her IRA transactions with transactions made solely in the individual's name). Conversely, a single Claim Form should be submitted on behalf of one legal entity including all transactions made by that entity on one Claim Form, no matter how many separate accounts that entity has (e.g., a corporation with multiple brokerage accounts should include all transactions made in all accounts on one Claim Form).
- 5. Agents, executors, administrators, guardians, and trustees must complete and sign the Claim Form on behalf of persons represented by them, and they must:
  - (a) expressly state the capacity in which they are acting;
- (b) identify the name, account number, Social Security Number (or taxpayer identification number), address, and telephone number of the beneficial owner of (or other person or entity on whose behalf they are acting with respect to) the Eligible Securities; and
- (c) furnish herewith evidence of their authority to bind to the Claim Form the person or entity on whose behalf they are acting. (Authority to complete and sign a Claim Form cannot be established by stockbrokers demonstrating only that they have discretionary authority to trade securities in another person's accounts.)
  - 6. By submitting a signed Claim Form, you will be swearing that you:
    - (a) own or owned Eligible Securities you have listed in the Claim Form; or
    - (b) are expressly authorized to act on behalf of the owner thereof.

### C. Claim Form

- 1. Use Part III of this form entitled "Schedule of Transactions" to supply all required details of your transaction(s) in Eligible Securities. If you need more space or additional schedules, attach separate sheets giving all of the required information in substantially the same form. Sign and print or type your name on each additional sheet.
- 2. On the schedules, provide all of the requested information with respect to all of your purchases and acquisitions and all of your sales of Katapult securities that took place at any time on or between and including June 15, 2021 and August 9, 2021, whether such transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim. Also, list the number of FinServ common stock held at the close of trading on May 11, 2021 and purchases and acquisitions and all of your sales from May 12, 2021 through June 9, 2021, inclusive.
- 3. List each transaction in the Settlement Class Period separately and in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day and year of each transaction you list.
- 4. You are required to submit genuine and sufficient documentation for all of your transactions in and holdings of Eligible Securities set forth in the Claim Form. Documentation may consist of copies of brokerage confirmation slips or monthly brokerage account statements, or an authorized statement from your broker containing the transactional and holding information found in a broker confirmation slip or account statement. The parties and the Claims Administrator do not independently have information about your investments in Eligible Securities. IF SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN COPIES OF THE DOCUMENTS OR EQUIVALENT DOCUMENTS

FROM YOUR BROKER. FAILURE TO SUPPLY THIS DOCUMENTATION MAY RESULT IN THE REJECTION OF YOUR CLAIM. DO NOT SEND ORIGINAL DOCUMENTS. Please keep a copy of all documents that you send to the Claims Administrator. Also, do not highlight any portion of the Claim Form or any supporting documents.

- 5. The above requests are designed to provide the minimum amount of information necessary to process the simplest claims. The Claims Administrator may request additional information as required to efficiently and reliably calculate your losses. In the event the Claims Administrator cannot perform the calculation accurately or at a reasonable cost to the Settlement Class with the information provided, the Claims Administrator may condition acceptance of the claim upon the production of additional information and/or the claimant's responsibility for any increased costs due to the nature and/or scope of the claim.
- 6. If the Court approves the Settlement, payments to eligible Authorized Claimants pursuant to the Plan of Allocation (or such other plan of allocation as the Court approves) will be made after any appeals are resolved, and after the completion of all claims processing. The claims process will take substantial time to complete fully and fairly. Please be patient.
- 7. **PLEASE NOTE:** As set forth in the Plan of Allocation, each Authorized Claimant shall receive his, her, or its *pro rata* share of the Settlement Fund. If the prorated payment to any Authorized Claimant calculates to less than \$10.00, it will not be included in the calculation and no distribution will be made to that Authorized Claimant.
- 8. If you have questions concerning the Claim Form, or need additional copies of the Claim Form or the Notice, you may contact the Claims Administrator, JND Legal Administration, at the address on the first page of the Claim Form, by email at info@Katapult-FinservSecuritiesLitigation.com, or by toll-free phone at 844-552-0057, or you can visit the website, www.Katapult-FinServSecuritiesLitigation.com, where copies of the Claim Form and Notice are available for downloading.
- 9. NOTICE REGARDING ELECTRONIC FILES: Certain claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. To obtain the *mandatory* electronic filing requirements and file layout, you may visit the Settlement website at www.Katapult-FinServSecuritiesLitigation.com or you may email the Claims Administrator's electronic filing department at KATSecurities@JNDLA.com. Any file not in accordance with the required electronic filing format will be subject to rejection. Only one claim should be submitted for each separate legal entity (see ¶B.4 above) and the *complete* name of the beneficial owner(s) of the securities must be entered where called for (see ¶B.2 above). No electronic files will be considered to have been submitted unless the Claims Administrator issues an email to that effect. Do not assume that your file has been received until you receive this email. If you do not receive such an email within 10 days of your submission, you should contact the electronic filing department at KATSecurities@JNDLA.com to inquire about your file and confirm it was received.

#### IMPORTANT: PLEASE NOTE

YOUR CLAIM IS NOT DEEMED FILED UNTIL YOU RECEIVE AN ACKNOWLEDGEMENT POSTCARD. THE CLAIMS ADMINISTRATOR WILL ACKNOWLEDGE RECEIPT OF YOUR CLAIM FORM BY MAIL, WITHIN 60 DAYS. IF YOU DO NOT RECEIVE AN ACKNOWLEDGEMENT POSTCARD WITHIN 60 DAYS, CALL THE CLAIMS ADMINISTRATOR TOLL FREE AT 844-552-0057.

## PART II - CLAIMANT IDENTIFICATION

The Claims Administrator will use this information for all communications regarding this Claim Form. If this information changes, you MUST notify the Claims Administrator in writing at the address above. Complete names of all persons and entities must be provided.

Beneficial Owner's First Name	MI	Beneficial Owner's Last Name		
Joint Beneficial Owner's First Name (if applicable)	MI	Joint Beneficial Owner's Last Name ( <i>if applicable</i> )		
Name of Representative, if applicable (executor, adm	inistrato	or, trustee, c/o, etc.), if different from Beneficial Owner		
Address 1 (Street name and number)				
Address 2 (Apartment, unit, or box number)				
City		State/Province Zip Code or Postal Code		
Foreign Province Foreign Postal Code Foreign Country Name/Abbreviation				
Social Security Number (last four digits only)  T	aynave	r Identification Number (last four digits only)		
OR	ахраус	Tashineans Trains		
Telephone Number (Home)  Telephone Number (Work)				
Email Address				
Account Number				
Record Owner's Name (if different from beneficial own	ner liste	ed above)		
Tune of Peneticial Owner (Specify one of the fallowing	ing):			
Type of Beneficial Owner (Specify one of the following):  ☐ Individual (includes joint owner accounts) ☐ Corporation ☐ Pension Plan ☐ IRA/401k				
☐ Estate ☐ Trust ☐ Other (ple	case sp	<sup>,</sup> сспу <i>)</i>		

# PART III.A – SCHEDULE OF TRANSACTIONS IN KATAPULT COMMON STOCK

Please be sure to include proper documentation with your Claim Form as described in detail in ¶C.4 of the Instructions. Do not include information regarding securities other than Katapult common stock.

Number of Katapult cor If none, write "zero":	nmon stock held	at the close of trading on June	e 14, 2021. (Must be documented.)	
2. Purchases or acquisition (Must be documented.):	ns of Katapult co	mmon stock (June 15, 2021 th	rough November 5, 2021, inclusive).	
Date of Purchase/ Acquisition (Trade Date) MM/DD/YY	Number of Shares Purchased or Acquired	Purchase / Acquisition Price Per Share	Total Purchase or Acquisition Price (excluding any taxes, commissions, and fees)	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
IMPORTANT: If any purchase listed covered a "short sale," please mark Yes: ☐ Yes				
3. Sales of Katapult cor documented.):	mmon stock (Ju	ine 15, 2021 through Novem	nber 5, 2021, inclusive). (Must be	
Trade Date MM/DD/YY	Number of Shares Sold	Sale Price Per Share	Total Sales Price (not deducting any taxes, commissions, and fees)	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
4. Number of shares of Katapult common stock held at the close of trading on November 5, 2021. (Must be documented.) If none, write "zero":				
IF YOU REQ	UIRE ADDITION	IAL SPACE. ATTACH EXTRA	SCHEDULES IN THE	

SAME FORMAT AS ABOVE. SIGN AND PRINT YOUR NAME ON EACH ADDITIONAL PAGE.

YOU MUST READ AND SIGN THE RELEASE ON PAGE 10.
FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR
THE REJECTION OF YOUR CLAIM.

# PART III.B – SCHEDULE OF TRANSACTIONS IN KATAPULT WARRANTS

Please be sure to include proper documentation with your Claim Form as described in detail in ¶C.4 of the Instructions. Do not include information regarding securities other than Katapult warrants.

1. Number of Katapu If none, write "zero":	lt warrants he	ld at the close of trac	ding on June	14, 202	21. (Must be	documented.)
2. Purchases or acqu (Must be documented		apult warrants (June	15, 2021 thr	ough No	ovember 5, 202	21, inclusive).
Date of Purchase/ Acquisition (Trade Date) MM/DD/YY	Number of Warrants Purchased or Acquired	Purchase / Acquisition Price Per Warrant	Total Purchase or Acquisition Price (excluding any taxes, commissions, and fees)		Exercised? (Y/N)	Exercise Date MM/DD/YY
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
IMPORTANT: If any purchase listed covered a "short sale," please mark Yes: ☐ Yes						
3. Sales of Katapult w	arrants (June 1	5, 2021 through Nove	mber 5, 2021	l, inclusiv	ve). (Must be d	ocumented.):
Trade Date MM/DD/YY	Number of Warrants Sold	PAR Warrant I '		Total Sales Price of deducting any taxes, ommissions, and fees)		
		\$		\$		
		\$		\$		
		\$		\$		
		\$		\$		
4. Number of share (Must be documented		t warrants held at e "zero":	the close of	of tradin	g on Noveml	oer 5, 2021.
		OITIONAL SPACE, AT SIGN AND PRINT YO				

YOU MUST READ AND SIGN THE RELEASE ON PAGE 10.
FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR
THE REJECTION OF YOUR CLAIM.

# PART III.C – SCHEDULE OF TRANSACTIONS IN FINSERV COMMON STOCK

Please be sure to include proper documentation with your Claim Form as described in detail in ¶C.4 of the Instructions. Do not include information regarding securities other than FinServ common stock.

1. Number of shares of FinServ common stock held at the close of trading on May 11, 2021. (Must be documented.) If none, write "zero":				
2. Purchases or acquisitions of FinServ common stock (May 12, 2021 through June 9, 2021, inclusive). (Must be documented.):				
Date of Purchase/ Acquisition (Trade Date) MM/DD/YY	Number of Shares Purchased or Acquired	Purchase / Acquisition Price Per Share	Total Purchase or Acquisition Price (excluding any taxes, commissions, and fees)	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
IMPORTANT: If any purchase listed covered a "short sale," please mark Yes: ☐ Yes				
3. Sales of FinServ common stock (May 12, 2021 through June 9, 2021, inclusive). (Must be documented.):				
Trade Date MM/DD/YY	Number of Shares Sold	Sale Price Per Share	Total Sales Price (not deducting any taxes, commissions, and fees)	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
4. Number of shares of FinServ common stock that were eligible to vote on FinServ's June 7, 2021 special meeting and subsequently exchanged for shares of Katapult common stock. (Must be documented.) If none, write "zero":				
5. Number of shares of Katapult common stock received in exchange for shares of FinServ common stock. (Must be documented.) If none, write "zero":				
		IAL SPACE, ATTACH EXTRA		

YOU MUST READ AND SIGN THE RELEASE ON PAGE 10.
FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR
THE REJECTION OF YOUR CLAIM.

# PART IV – SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

I (We) submit this Claim Form under the terms of the Stipulation and Agreement of Settlement dated July 3, 2024 ("Stipulation") described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the Southern District of New York, with respect to my (our) claim as a Settlement Class Member (as defined in the Notice) and for purposes of enforcing the release set forth herein. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in the Action. I (We) agree to furnish additional information to Lead Counsel and/or the Claims Administrator to support this claim if required to do so. I (We) have not submitted any other claim covering the same purchases, acquisitions, or sales of Eligible Securities during the Settlement Class Period and know of no other Person having done so on my (our) behalf.

### PART V - RELEASE

- 1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally and forever settle, release, relinquish and discharge all of the Released Claims (including Unknown Claims) against each and all of the Released Defendant Parties, all as defined herein and in the Notice and Stipulation.
- 2. This release shall be of no force or effect unless and until the Court approves the Stipulation and it becomes effective on the Effective Date.
- 3. I (We) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to this release or any other part or portion thereof and have not submitted any other claim covering the same purchases of Eligible Securities and know of no other person having done so on my (our) behalf.
- 4. I (We) hereby warrant and represent that I (we) have included all requested information about all of my (our) purchases or acquisitions of Katapult securities during the Settlement Class Period, as well as the number of securities held at the close of trading on June 14, 2021 and August 9, 2021.
  - 5. The number(s) shown on this form is (are) the correct SSN/TIN(s).
- 6. I (We) waive the right to trial by jury, to the extent it exists, and agree to the determination by the Court of the validity or amount of this claim and waive any right of appeal or review with respect to such determination.
- 7. I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code.

(NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, you must cross out Item 7 above.)

Executed this day of	, 20,	
1)	Month/Year)	
in	(State/Country)	
Sign your name here	Date	
eigh year name here	Date	
Type or print your name here		
(Capacity of person(s) signing, e.g., Ber	neficial Purchaser or Acquirer, Executor or Administrator)	
For Joint Beneficial Purchaser, if any:		
Sign your name here	Date	
Type or print your name here		

I (We) declare under penalty of perjury under the laws of the United States of America that the

foregoing information supplied by the undersigned is true and correct.

ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME. THANK YOU FOR YOUR PATIENCE.

### REMINDER CHECKLIST:



- 1. Please sign the above release and acknowledgment.
- 2. Remember to attach copies of supporting documentation, if available.





- Do not send original stock certificates. Attach only copies of acceptable supporting documentation as these documents will not be returned to you.
- 4. Keep a copy of your Claim Form and all supporting documentation for your records.





- 5. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. Your claim is not deemed filed until you receive an acknowledgement postcard. If you do not receive an acknowledgement postcard within 60 days, please call the Claims Administrator toll free at 844-552-0057.
- 6. If you move, please send us your new address.



7. If you have any questions or concerns regarding your claim, contact the Claims Administrator by email at info@Katapult-FinServSecuritiesLitigation.com or by toll-free phone at 844-552-0057 , or you may visit www.Katapult-FinServSecuritiesLitigation.com. DO NOT call Katapult, the other Defendants, or their counsel with questions regarding your claim.

THIS PROOF OF CLAIM MUST BE SUBMITTED ONLINE OR MAILED NO LATER THAN DECEMBER 19, 2024, ADDRESSED AS FOLLOWS:

Katapult Securities Litigation c/o JND Legal Administration P.O. Box 91340 Seattle, WA 98111

Online Submissions: www.Katapult-FinservSecuritiesLitigation.com