

Scouting Settlement Trust (“Trust”)

Incarcerated Claimant Late Filing Attorney Form

Information and Instructions

Read Before Completing this Form.

The deadline to submit a Matrix Claims Questionnaire (“CQ”) was midnight ET May 31, 2024. The Matrix Late Claim Deadline was 6pm ET July 26, 2024.

The Trust understands that obtaining completed and signed CQs back from incarcerated Claimants for submission to the Trust can be difficult. In recognition of this difficulty, this form was developed.

This form can only be used by an incarcerated Claimant (i) who is represented by an attorney, (ii) who was unable to meet the July 26, 2024, CQ submission deadline as a result of mail processing delays at the prison or other correctional facility, and (iii) whose attorney sent the CQ to him no later than July 16, 2024.

If the incarcerated Claimant satisfies the above requirements, the Claimant’s attorney must:

1. complete this form in full and sign it;
2. provide an image of the postmark or other proof of mailing date for when the incarcerated Claimant transmitted the signed and completed CQ to his attorney for submission to the Trust; and
3. send this form and supporting documents to info@scoutingsettlementtrust.com within 14 days of the attorney’s receipt of the signed and completed CQ from the incarcerated Claimant.

If the CQ is approved for late submission following the Trust’s review of this form and related required documents, you will be notified via email and given access to submit the completed and signed CQ via the Claims Processing portal.

Claimant Information *			
Claimant Full Legal Name *	First Name	Middle Name	Last Name
SST Claim ID *	SST Claim ID Number SST- _____	Claimant Jail / Prison Identification Number *	Prison ID Number _____
Name and Location of Jail / Prison *	Prison Name and Location		
Date CQ Sent by Attorney to Claimant (postmark date) *	Date CQ Sent to Claimant	Date Signed CQ Sent by Claimant to Attorney *	Date Sent to Attorney _____

Attorney Information and Signature *		
Attorney Name *	First Name	Last Name
Law Firm *	Firm Name	
Attorney Signature *	Date of Signature * ____ / ____ / ____ (MM/DD/YYYY)	

By signing this form, you are verifying and acknowledging the following:

1. My law firm represents the above referenced Claimant.
2. I have worked diligently with the Claimant to complete the CQ.
3. The information included in the above form including the date the CQ was sent to the Claimant and the date the completed and signed CQ was sent by the Claimant to my law firm is accurate.
4. The Claimant is incarcerated and was unable to meet the July 26, 2024 filing deadline due to inbound and/or outbound mail processing delays at the jail/prison.