

# Scouting Settlement Trust Independent Review Option (“IRO”) Complaint Cover Page Form

<b>Claimant Name</b>	First Name	Middle Initial	Last Name	Suffix
<b>Attorney Name</b>	First Name	Middle Initial	Last Name	Suffix
<b>Attorney Contact Information</b>	Phone Number		Email Address	
	Law Firm Name			
	Street/P.O. Box			Apt./Suite
	City		State	Zip
<b>Defendant(s)</b>				
<b>SST Claim ID Number</b>	SST- _____			

- Does the Claimant consent to a virtual IRO Hearing?

Electing a virtual IRO hearing is irrevocable and cannot be converted to an in-person hearing since a neutral who accepts only virtual hearings may be assigned the IRO claim. Irrespective of whether an in-person or virtual hearing is elected, The Claimant may still elect to proceed solely on the written record as described in Section XVII of *the Attorney’s Guide to the Independent Review Option*.

☐ Yes, the Claimant consents to a virtual hearing    ☐ No, the Claimant requests an in-person hearing

If requesting an in-person IRO Hearing, in which city and state did the Claimant’s abuse primarily occur?

\_\_\_\_\_

- Besides the Claimant’s name identified above, please identify the actual names of other pseudonyms (if any) used in the complaint:

\_\_\_\_\_

3. For represented Claimants, does Counsel intend to file additional IRO claims that are substantially similar to this IRO claim? (For purposes of this inquiry, the term “substantially similar” means the same perpetrator, involving the same acts during roughly the same time period, against Claimant(s) in the same troop or camp.)

☐ Yes   ☐ No

If yes, please list the name(s) and SST Claim ID Number(s) (if known) of the Claimants whom you would like to associate as having substantially similar claims to the present claim. Please also briefly describe the nature of these similarities.