

Cody et al., v. City of St. Louis
Case No. 4:17-cv-2707-AGF

CLAIM FORM

You are eligible to complete and submit this Claim Form to be eligible for a Settlement Payment if you were detained in the City of St. Louis, Missouri Medium Security Institution for three or more consecutive days between November 13, 2012 and June 30, 2022.

Please complete this form in its entirety. Claim Forms must be mailed and postmarked or filed online at www.STLmediumsecurityinstitutionclassaction.com no later than June 29, 2026.

CLASS MEMBER INFORMATION

Claimant ID: _____

This is the 8-digit number printed about your name and address on the Notice that was mailed to you.

First Name: _____ Last Name*: _____ MI: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____

**If your last name has changed since you were in custody at MSI, please include legal documentation, such as a marriage or divorce certificate, with your claim to support the name change. If you are filing a claim on behalf of a deceased Class Member, please include a copy of his/her death certificate and legal documentation to show that you have authority to act on his/her behalf with the claim.*

CLAIMANT VERIFICATION

Check the boxes below if you agree with the following statement:

I was detained in the St. Louis Medium Security Institution for three or more consecutive days between November 13, 2012 and June 30, 2022.

Throughout my detention at the St. Louis Medium Security Institution, I experienced inhumane treatment including exposure to one or more of the following conditions: extreme temperatures, poor ventilation, overflowing sewage, insect and rodent infestations, mold, or overcrowding.

CLAIMANT DECLARATION

I hereby give assurances that the information on this Claim Form is correct.

Signature: _____ Date: _____

Claim Forms can be submitted online at www.STLmediumsecurityinstitutionclassaction.com or by mail to:

St. Louis MSI Lawsuit
c/o Atticus Administration
PO Box 64053
St. Paul, MN 55164
Email: stlmediumsecurityinstitutionclassaction@atticusadmin.com

CLAIMS MUST BE SUBMITTED BY JUNE 29, 2026.

Call the Settlement Administrator at 1-800-591-0732 if you need assistance or have any questions.