

OBJECTION FORM

JOSE LUIS DE JESUS JIMENEZ V. GRACE STAFFING LLC, ET AL.

Superior Court of California, County of Los Angeles
Case No. 23STCV10897

AS EXPLAINED IN MORE DETAIL IN THE “NOTICE OF PROPOSED SETTLEMENT” (“NOTICE”) THAT CAME WITH THIS FORM, YOU HAVE THE FOLLOWING OPTIONS AS PART OF THE SETTLEMENT:

YOUR OPTIONS IN THIS SETTLEMENT	
DO NOTHING	You will remain a member of the class, receive a settlement payment, and will be bound by the terms of the Settlement Agreement (including the release of claims).
OBJECT	If you choose, you may object to this Settlement. The Court may or may not agree with your objection. Objecting to the Settlement will not exclude you from the Settlement, and if the Court grants final approval to the Settlement, you will receive a payment from Settlement and will be bound by the terms of the Settlement Agreement.
EXCLUDE YOURSELF	This is the only option that allows you to exclude yourself from the class action portion the Settlement, including its release of claims. If you exclude yourself, you will receive no class action settlement payment as part of the Settlement and you will not be bound by the terms of the class action settlement as a result. You will, however, be bound by the terms of any Court-approved PAGA claim settlement.
SUBMIT A WORKWEEK OR PAY PERIOD DISPUTE	Your dispute and related documentation will be reviewed and a decision will be made regarding your applicable workweeks or pay periods based on the information available. You will receive a payment from the Settlement and will be bound by the terms of the Settlement Agreement.

If you wish to object to the Settlement, you must complete this Objection Form stating the basis for your objection, along with any documents that support your objection, and mail it to Grace Staffing Settlement Claims Administrator, ILYM Group, Inc. P.O. Box 2031, Tustin, CA 92781 on or before June 8, 2026. If the Notice has been re-mailed, then you shall receive an additional 14 days beyond this response deadline to submit this Objection Form. You may also, if you wish, appear at the Settlement Fairness Hearing concerning the proposed settlement, either personally or through an attorney you hire and present oral objections at the Settlement Fairness Hearing, regardless of whether or not you submit this Objection Form.

I object to the proposed Settlement for the following reasons:

(If you need more space, please attach additional pages to this form.)

Dated: _____

(Signature)

(Typed or Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number, Including Area Code)

XXX - XX - ____ ____ ____ ____
(Social Security Number – last 4 digits only)