

## CLAIM FORM

*Randle, et al. v. SunTrust Banks, Inc., et al.*

**IMPORTANT:** In order to receive a monetary award in this Settlement based on your individual experiences, you must complete, sign, and submit this Claim Form, and it must be **received** by the Claims Administrator, by **April 15, 2024**. You may submit your Claim Form either by mail or electronically at the Claims Administrator website below.

SunTrust Settlement  
c/o Atticus Administration  
PO Box 64053  
St. Paul, MN 55164  
**1-888-262-9393 (Toll-Free)**  
Case website: [www.SunTrustFASettlement.com](http://www.SunTrustFASettlement.com)

### **INTRODUCTION TO CLAIM FORM**

The *Randle* lawsuit alleged that SunTrust (now Truist) engaged in systemic, nationwide racial discrimination against African American Financial Advisors (“FAs”). In the lawsuit, Plaintiffs challenged several SunTrust policies and practices as discriminatory, including those governing the assignment of bank branches, client accounts, books of business, and licensed banker support; assignment of designations such as “Premier,” “Wealth,” “Hub” and “Private Client” Advisor; and participation in teams, among other business opportunities and resources.

This Claim Form is intended to assist you in providing information about how you were subjected to racial discrimination, a racially hostile work environment or racial harassment, and/or retaliation by SunTrust, and what losses and harm you suffered as a result. Please answer each question as fully and completely as you can if it applies to your individual work experiences.

### **INSTRUCTIONS:**

- Please review and verify the accuracy of your name and address listed above. If any of the information is incorrect or incomplete, provide the correct information in the blank space to the right of the pre-printed information.
- In addition, in Section A, please provide your phone number and personal email address in case we need to contact you about your Claim Form.
- Provide as much detail as necessary to fully answer the questions below. Include names, dates of events, and amounts of accounts or books of business, for example.
- Please identify examples of non-African American FAs you believe were treated better than you and how.
- The Claim Form includes questions that may or may not be applicable to your individual experience at SunTrust. You need only answer the questions that apply to you.
- If you are unsure of names, provide as much additional detail as possible to help identify the individual(s) (e.g., “the HR representative,” “Joe Smith’s licensed banker,” “the regional manager,”).
- If you are uncertain of dates of incidents described in your responses, provide as much detail as possible to help identify the time period (e.g., “late fall 2018,” “shortly after the 2016 Presidential election,” etc.).
- If you need more space than is provided to fully answer any question below, use a separate sheet(s) of paper and indicate clearly to which question you are responding.
- In order to seek financial recovery for any period after your employment with SunTrust ended, you must complete Section P and submit qualified documentary evidence of post-SunTrust income and work history, such as W-2, 1099, tax return, Social Security Wage Statement.
- In order to seek financial recovery for any emotional distress, you must complete Section N, and you may submit additional documentary evidence that supports your claim of emotional distress.
- **You must date and sign the Claim Form under penalty of perjury, and the Claims Administrator must receive it by April 15, 2024.**

**PERSONAL INFORMATION**

Start Date, as an FA, at SunTrust: Start Date: \_\_\_\_\_  
MM/DD/YYYY

End Date, as an FA, at SunTrust/Truist (if applicable) End Date: \_\_\_\_\_  
MM/DD/YYYY

Former Name (if applicable): \_\_\_\_\_

Length of SunTrust/Truist Service (in years) at Departure:

Last 4 Digits of your Social Security Number: XXX – XX - \_\_\_\_\_

Personal Phone Number: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

**A. EDUCATIONAL HISTORY (College and above)**

\_\_\_\_\_  
School/Degree/Date

\_\_\_\_\_  
School/Degree/Date

\_\_\_\_\_  
School/Degree/Date

**B. PRIOR RELEVANT EMPLOYMENT**

*Pre-SunTrust Relevant Professional Employment:*

\_\_\_\_\_  
Employer/Dates of Employment/Job(s) Held

\_\_\_\_\_  
Employer/Dates of Employment/Job(s) Held

\_\_\_\_\_  
Employer/Dates of Employment/Job(s) Held

Describe your career achievements prior to your employment with SunTrust.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. SUNTRUST EMPLOYMENT**

1. Are you currently employed by SunTrust/Truist?

Yes     No

2. If yes, in what capacity (e.g., FA, banker, etc.)?

3. If you are not a current SunTrust/Truist employee, explain the reason for your separation from SunTrust/Truist (Termination, Resignation, Forced to Resign, Medical, Layoff, etc.) and confirm the last date you worked at SunTrust/Truist as an FA.

End Date:        \_\_\_\_\_ - \_\_\_\_\_  
                          MM                    YYYY

**D. HIRING**

Describe how you were hired by SunTrust and any aspect of the hiring process that you believe was discriminatory based on your race. (Your response may include whether you were recruited or applied for a position at SunTrust; the person(s) with whom you interviewed; how you were treated during the hiring process; whether any promises were made to you, and whether those promises were honored or not, regarding developing your business or your career at SunTrust; any race-based or stereotypical statements or conduct during the hiring process; and/or whether different standards applied to you than others during the hiring process.)

**E. ASSIGNMENT OF BANK BRANCHES, TERRITORIES, AND BANKING RESOURCES**

*This lawsuit alleged that SunTrust assigned less lucrative territories and bank branches and less banking and sales support to African American FAs.*

1. Do you believe your race had an impact on which bank branches or territories you were assigned?

Yes     No



















3. Other than your response to the above questions, did you witness or learn about race-based remarks or racial hostility directed to other African Americans at SunTrust that impacted your work environment?

Yes     No

4. If yes, please describe the circumstances in detail, including identifying all persons involved and how they impacted your work and environment.

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**K. COMPLAINTS OF DISCRIMINATION AND RETALIATION**

1. Did you make any internal complaints about racial discrimination, racial harassment, or retaliation?

Yes     No

If yes, please describe your complaint(s) and identify to whom you complained, and approximately when you made the complaint(s) (e.g., to management, human resources, legal, employee hotline, etc.).

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2. Describe any action taken regarding your complaint(s) (e.g., whether there was an investigation, finding, or any action taken by SunTrust).

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3. Have you ever filed a charge of racial discrimination with the Equal Employment Opportunity Commission (“EEOC”) or a state or local administrative agency alleging racial discrimination, harassment, or retaliation against SunTrust?

Yes     No

4. If yes, please state when you filed the charge and describe the nature of your allegations and how the matter was resolved.

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5. Have you ever filed a lawsuit or arbitration against SunTrust alleging racial discrimination, harassment, or retaliation?

Yes     No

6. If yes, please state when you filed the charge and describe the nature of your allegations and how the matter was resolved.

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7. After you complained about racial discrimination or harassment, were you subjected to retaliation? That is, do you believe SunTrust took any adverse action against you because you complained internally, filed a charge of discrimination with the EEOC or state or local agency, or filed a lawsuit or arbitration?

Yes     No

8. If yes, describe the circumstances in detail, including identifying all persons involved and any adverse action taken against you and when.

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**L. OTHER FORMAL AND INFORMAL LITIGATION AND SETTLEMENTS/RELEASES**

1. Have you ever formally or informally asserted legal claims against SunTrust?

Yes     No

2. If yes, describe the nature of the legal claims and how you asserted those claims (e.g., whether you wrote a letter, hired a lawyer, attended a mediation, or took other steps).

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3. Has SunTrust ever threatened or asserted legal claims against you?

Yes     No

4. If yes, please describe the claims threatened or asserted by SunTrust and how those claims were communicated to you (e.g., did SunTrust send you a demand letter?).

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5. Have you ever been in litigation or arbitration against SunTrust?

Yes     No

6. If yes, describe the claims asserted and the outcome of the litigation.

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7. Have you ever signed an agreement or settlement releasing any claims against SunTrust?

Yes     No

8. If yes, ***please provide the Claims Administrator a copy of the release***, and below, please describe the date and scope of the release and whether the release included claims of racial discrimination or racial harassment.

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9. Describe the circumstances leading to the release agreement, including whether you had filed a claim against SunTrust and if so, the type of claim (e.g., racial discrimination or retaliation, breach of contract, etc.); whether SunTrust had filed a claim against you, and if so, the type of claim; and whether you were represented by a lawyer or assisted by a government agency.

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10. At the time you signed the release agreement, were you aware of this class action lawsuit?

Yes     No

11. Did you incur any legal costs and/or have any ongoing financial liability as a result of any legal action described above?

Yes     No

12. If yes, please state the amount of your legal costs and any ongoing liability for legal fees and expenses.

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13. Did SunTrust agree to forgive repayment of a promissory note or other financial obligation in connection with your release agreement?

Yes     No

14. If yes, please describe.



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15. Did SunTrust pay you any money in connection with the release agreement, over and above any forgiveness of a promissory note?

Yes     No

16. If yes, how much?

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17. Did you feel you were coerced or under duress to sign the release agreement?

Yes     No

18. If yes, please describe the circumstances in detail, including the specific reason(s) why you felt you had to sign the agreement.

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**M. TERMINATION (IF APPLICABLE)**

1. What was the reason for your departure from SunTrust/Truist?

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2. Were you given the option to resign rather than be terminated?

Yes     No

3. Were you terminated as part of a reduction in force or layoff?





at SunTrust?

Yes     No

9. If yes, please describe your symptoms of emotional distress and any permanent health effects.

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**O. FINANCIAL LOSS**

1. Did you suffer any financial losses because of racial discrimination by SunTrust?

Yes     No

2. If yes, please describe in detail the losses you suffered.

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3. Were you forced to file for bankruptcy or did you have a home foreclosure, IRS action, or other catastrophic financial event due to your experience at SunTrust?

Yes     No

4. If yes, describe the catastrophic financial events and circumstances (including whether you believe that your experience at SunTrust contributed to those events and why).

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5. Did you suffer any period of unemployment after separating from SunTrust?

Yes     No

6. If yes, for how long were you unemployed, and did you receive unemployment benefits.

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7. Do you believe your reputation and/or career were harmed by oral or written statements made by SunTrust (e.g., in U-5 disclosures or statements to clients or potential employers)?

Yes     No

8. If yes, please describe in detail the statements and how they harmed you.

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9. If not otherwise set forth above, describe how you believe you have been harmed by any racial discrimination, harassment, or retaliation you experienced at SunTrust and what other losses you have suffered.

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10. Are you still employed in the financial industry?

Yes     No

**P. POST-SUNTRUST EMPLOYMENT EARNINGS**

1. If you wish the for Neutral to consider losses that you have suffered after your employment with SunTrust ended, you **must** list your post-SunTrust employment history and earnings **and** provide evidence of these earnings (e.g., W-2, 1099, tax return, Social Security Wage Statement, etc.).

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Employer/Dates of Employment/Job(s) Held/Compensation

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Employer/Dates of Employment/Job(s) Held/Compensation

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Employer/Dates of Employment/Job(s) Held/Compensation

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Employer/Dates of Employment/Job(s) Held/Compensation

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Employer/Dates of Employment/Job(s) Held/Compensation

2. List your annual earnings for every year following your separation from SunTrust.

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3. If your subsequent employment was with another financial services firm, were you paid a recruitment bonus or promissory note?

Yes     No

4. If yes, provide the amount of the bonus or promissory note, describe the repayment terms, and state whether any amount remains unpaid.

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5. Describe in detail the basis of the amount of your recruitment bonus or promissory note (e.g., trailing 12 months' commissions, minimum value of assets transferring from SunTrust).

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6. Identify the total client assets you serviced at SunTrust prior to your departure, the total client assets that followed you to your new employer, your trailing 12 months of production at SunTrust, and your subsequent production history post-SunTrust.

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**Q. ADDITIONAL INFORMATION**

Please describe any additional facts or information supporting your claim of racial discrimination, racial harassment, or race-related retaliation or any additional information that you wish the Neutral to consider in assessing your claim and in understanding your experiences at SunTrust and the losses you suffered. (For example, if you believe you suffered racial discrimination, racial harassment, or retaliation not addressed by the above topics, you may take this opportunity to provide this information to the Neutral.) You may attach additional pages to complete your statement.

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**R. INTERVIEW WITH NEUTRAL**

You have the option, but are not required, to meet with the Neutral to explain your experiences at SunTrust and answer any questions the Neutral may have. These 60-minute Interviews will be held by a video conference.

Would you like to meet with the Neutral assigned to your case?

Yes     No

**By signing I swear under penalty of perjury that the foregoing information is true and accurate to the best of my knowledge and belief:**

BY: \_\_\_\_\_  
SIGNATURE

DATE: \_\_\_\_\_

\_\_\_\_\_  
Print Name

Additional information is available at the website below, and if you have any questions regarding the Settlement or this Claim Form, you can contact the Claims Administrator or Class Counsel:

SunTrust Settlement  
c/o Atticus Administration  
PO Box 64053  
St. Paul, MN 55164  
**1-888-262-9393 (Toll-Free)**  
Case website: [www.SunTrustFASettlement.com](http://www.SunTrustFASettlement.com)

**Stowell & Friedman, Ltd.**, Class Counsel  
Website: [www.stowellfriedman.com](http://www.stowellfriedman.com)  
1-312-431-0888