**UNITED STATES DISTRICT COURT**

**FOR THE DISTRICT OF COLUMBIA**

|  |  |  |
| --- | --- | --- |
| HENRY W. SEGAR, *et al.*,  Plaintiffs,  v.  PAMELA BONDI,  Attorney General, *et al.*,  Defendants. | )  )  )  )  )  )  )  )  )  )  )  ) | Civil Action No. 77-0081 (EGS)    **CLAIM FORM AND  QUESTIONNAIRE** |

**INSTRUCTIONS**

**If you are a class member and you submit a claim form postmarked or submitted online on or before June 23,2025, you are entitled to receive at least $5,000 from the settlement fund. To submit a timely claim form, complete the following steps:**

1. Please fill in all blanks on the claim form.
2. Type or print all information on the claim form.
3. You must date and sign the claim form.
4. If any information on the claim form is incorrect, cross out the incorrect information. Clearly type or print the correct information above the crossed-out incorrect information. If the boxes identifying your race, application history, or experience are incorrectly marked, cross out the incorrect mark, and place an “X” in the correct box.
5. By signing your form, you are declaring under penalty of perjury that the information provided is true and correct. Please understand that you could be subject to criminal penalties for submitting any false information on your form.
6. If you have any questions about these instructions or about how to complete the form, call the claims administrator at **(844) 783-5505**. There is no fee for any service or assistance provided by SSI, the claims administrator. **DO NOT CONTACT THE COURT OR THE CLERK OF THE COURT.**
7. Mail your claim form to: **Segar v Bondi Claims Administrator, c/o SSI, an Epiq Company, PO Box 2715, Portland, OR 97208-2715** or submit your claim form online at: [www.DEAdiscriminationsettlement.com](http://www.DEAdiscriminationsettlement.com). **YOUR CLAIM FORM MUST BE POSTMARKED OR SUBMITTED ONLINE ON OR BEFORE JUNE 23, 2025. LATE CLAIM FORMS WILL NOT BE CONSIDERED.**
8. If your address changes at any time before you have received a monetary payment, mail your new address to the Claims Administrator at the address above. Any change of address must be submitted in writing and include your signature.
9. You do **not** need to have your own attorney help you submit a claim form or otherwise participate in this settlement. However, if you do wish to consult your own attorney, you may do so at your own expense.
10. Please keep a copy of the form when it is completed for your records.
11. **You also have the option of submitting a completed questionnaire**. The questionnaire may be submitted by mail to: **Segar v Bondi Claims Administrator, c/o SSI, an Epiq Company, PO Box 2715, Portland, OR 97208-2715,** or it may be submitted online at: [www.DEAdiscriminationsettlement.com](http://www.DEAdiscriminationsettlement.com). **Submitting a questionnaire is OPTIONAL**. All claimants must submit a claim form, but all claimants are **not** required to submit a completed questionnaire to receive a monetary award. The questionnaire will be considered in determining monetary awards.
12. **YOUR QUESTIONNAIRE MUST BE POSTMARKED OR SUBMITTED ELECTRONICALLY ON OR BEFORE JUNE 23, 2025. LATE QUESTIONNAIRES WILL NOT BE CONSIDERED.**
13. In addition to the option of completing the questionnaire, **you also have the option of sitting for an interview** with the person who will be deciding each claimant’s monetary award (Michael Lewis). Having an interview with Mr. Lewis is **OPTIONAL**. All claimants must submit a claim form, but all claimants are **not** required to be interviewed to receive a monetary award. The interview will be considered in determining monetary awards.

**CLASS ACTION SETTLEMENT CLAIM FORM**

*Segar v. Bondi, Case No. 77-cv-0081-EGS*

«fname» «lname»

«address» «address\_2»

«City», «State» «Zip»

«Country»

|  |  |  |  |
| --- | --- | --- | --- |
| FULL NAME: |  |  |  |
|  | Last | First | Middle |

|  |  |  |  |
| --- | --- | --- | --- |
| STREET ADDRESS: |  |  |  |
|  | Street No. | Street Name | Apt. No. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CITY: |  | STATE: |  | ZIP CODE: |  |

|  |  |  |
| --- | --- | --- |
| TELEPHONE: |  |  |
|  | Daytime | Evening |

RACE (check one): Black \_\_\_\_ Other \_\_\_\_

Are you a current or former DEA Special Agent who applied for one or more GS-14 or GS-15 level positions at DEA at any time between January 21, 1993, and May 2, 2022?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Did you make the Best Qualified List for at least one such position?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Were you selected for every GS-14 or GS-15 level position to which you applied **and** made the Best Qualified List for between January 21, 1993, and May 2, 2022?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

I declare under penalty of perjury that the foregoing is true and correct. I understand that I could be subject to criminal penalties for submitting any false information on this claim form.

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

Signature

Executed on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(today’s date)

**MAIL THIS FORM TO:**

**Segar v Bondi Claims Administrator**

**c/o SSI, an Epiq Company**

**PO Box 2715**

**Portland, OR 97208-2715**

**THIS CLAIM FORM MUST BE POSTMARKED OR SUBMITTED ONLINE ON OR BEFORE JUNE 23, 2025**

**LATE CLAIM FORMS WILL NOT BE CONSIDERED**

**CLASS ACTION SETTLEMENT QUESTIONNAIRE**

*Segar v. Bondi, Case No. 77-cv-0081-EGS*

«fname» «lname»

«address» «address\_2»

«City», «State» «Zip»

«Country»

|  |  |  |  |
| --- | --- | --- | --- |
| FULL NAME: |  |  |  |
|  | Last | First | Middle |

|  |  |  |  |
| --- | --- | --- | --- |
| STREET ADDRESS: |  |  |  |
|  | Street No. | Street Name | Apt. No. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CITY: |  | STATE: |  | ZIP CODE: |  |

|  |  |  |
| --- | --- | --- |
| TELEPHONE: |  |  |
|  | Daytime | Evening |

1. If you experienced emotional distress as a result of being denied promotion(s) to GS-14 and/or GS-15 at DEA between January 21, 1993, and May 2, 2022, because of race, please describe the feelings of distress that you experienced.
2. Please describe what (if any) impact the experience of being denied promotion(s) to GS-14 and/or GS-15 between January 21, 1993, and May 2, 2022, because of race had on your employment trajectory at DEA or your day-to-day experience working there. (For example, did you leave DEA because you were denied GS-14 and/or GS-15 level promotion(s) because of race? If you remained at DEA, how did being denied promotion(s) affect your feelings about working at DEA?)
3. Please describe any effort(s) you made to combat or address race discrimination in the promotions process at DEA. (For example, did you make discrimination complaints or file an EEO charge or did you participate in efforts to secure individual relief for affected agents by participating in the *Segar* lawsuit.)
4. Government records indicate you may bea class member for GS-14 level promotion applications. The questions in the subparts below concern GS-14 level promotions. If you are not a class member for GS-14 level promotions, please skip to the next question.
   1. Records indicate that you may have applied at least one time for a promotion between January 21, 1993, and May 2, 2022. Is that correct? Please indicate how many times you applied for promotion between January 21, 1993, and May 2, 2022.
   2. For how many of those applications for promotion did you make the Best Qualified List?
   3. For how long (how many years and/or promotion cycles) did you apply for promotion between January 21, 1993, and May 2, 2022?
   4. For how many years had you been at DEA when you began applying for promotion?
   5. Were you promoted? If so, in what year?
   6. How long were you at the GS-13 level before you were promoted to GS-14 (or without being promoted to GS-14 if you were not promoted to that level)?
   7. How long did you work at DEA before you were promoted to GS-14 (or without being promoted to GS-14 if you were not promoted to that level)?
   8. How many GS-13 assignments did you have before you were promoted to GS-14 (or without being promoted to GS-14 if you were not promoted to that level)?
   9. Is there anything else that you’d like to tell the neutral regarding your experience attempting to attain a GS-14 promotion between 1993 and 2022?
5. Government records indicate you may bea class member for GS-15 level promotion applications. The questions in the subparts below concern GS-15 level promotions. If you are not a class member for GS-15 level promotions, please skip to the next question.
   1. Records indicate that you may have applied at least one time for a promotion between January 21, 1993, and May 2, 2022. Is that correct? Please indicate how many times you applied for promotion between January 21, 1993, and May 2, 2022.
   2. For how many of those applications for promotion did you make the Best Qualified List?
   3. For how long (how many years and/or promotion cycles) did you apply for promotion between January 21, 1993, and May 2, 2022?
   4. For how many years had you been at DEA when you began applying for promotion?
   5. Were you promoted? If so, in what year?
   6. How long were you at the GS-14 level before you were promoted to GS-15 (or without being promoted to GS-15 if you were not promoted to that level)?
   7. How long did you work at DEA before you were promoted to GS-15 (or without being promoted to GS-15 if you were not promoted to that level)?
   8. How many GS-14 assignments did you have before you were promoted to GS-15 (or without being promoted to GS-15 if you were not promoted to that level)?
   9. Is there anything else that you’d like to tell the neutral regarding your experience attempting to attain a GS-15 promotion between 1993 and 2022?
6. Would you like to participate in an optional, one-hour interview with Michael Lewis (the neutral) to discuss information you believe relevant to your individual relief?

I declare under penalty of perjury that the foregoing is true and correct. I understand that I could be subject to criminal penalties for submitting any false information on this questionnaire.

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

Signature

Executed on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(today’s date)

**MAIL THIS QUESTIONNAIRE TO:**

**Segar v Bondi Claims Administrator**

**c/o SSI, an Epiq Company**

**PO Box 2715**

**Portland, OR 97208-2715**

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**LATE QUESTIONNAIRES WILL NOT BE CONSIDERED**