

FDNY Discrimination Case
PO Box 9000 #6541
Merrick, NY 11566-9000
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CNY0123456789



Charlie Claimant
123 Smith Street
Smithtown, NY 12345

Mailing Date: March 26, 2015
Claimant No: 123456

**ACCEPTANCE OF INDIVIDUAL MONETARY RELIEF AWARD
& RELEASE OF CLAIMS**

RE: *United States and Vulcan Society, et al. v. City of New York*, 07-CV-2067
(E.D.N.Y.) (NGG) (RLM)

I, Charlie Claimant, have received notice of the individual monetary relief award offered to me pursuant to the provisions of the Amended Monetary Relief Consent Decree (“Decree”) entered by the Court on March 11, 2015, in the above-named lawsuit.

The award I am being offered consists of at least the following amounts:

Back pay:	[insert back pay amount]
Fringe benefits:	[insert fringe benefits amount]
<u>Interest:</u>	<u>[insert total interest amount]</u>
TOTAL:	[insert sum of the above]

I understand that I will receive payment from the City for the back pay portion of my award and a separate payment from GCG for the fringe benefits and interest portions of my award. ***[For City employees only:]*** I understand that the City will issue payment for the back pay portion of my award via the method by which my wages are typically paid and that GCG will issue payment for the fringe benefits and interest portions of my award via check.

I understand that the back pay portion of my award will be reduced to make the appropriate withholdings for federal income taxes, FICA, Medicare, and any other amounts required to be withheld by law, such as child support liens. I understand that applicable New York State and New York City income taxes will also be withheld from the back pay portion of my award and that I will have to pay any additional employee-side state income taxes that I may owe if I live in a different state. I understand that I may have to pay additional taxes on the fringe benefits and interest portions of my award.

If I am a priority hire or a Delayed Hire Claimant entitled to retroactive seniority:

- I understand that any owed minimum employee pension contributions also will be withheld from the back pay portion of my award, unless I opt out of having these minimum employee pension contributions withheld from the back pay portion of my award.

- If I am an FDNY employee and the back pay portion of my award is less than any owed minimum employee pension contributions, I understand that the FDNY will withhold additional employee pension contributions from my future paychecks to fund my retroactive pension benefit.
- If I am not an FDNY employee and the back pay portion of my award is less than any owed minimum employee pension contributions, I understand that I will be responsible for paying the difference to fund my retroactive pension benefit.
- I understand that I will receive further information that will give me the opportunity to opt out of having any owed minimum employee pension contributions withheld from the back pay portion of my award and, if applicable, my future paychecks. This will include information about the consequences of not paying the shortage in my pension account, which may reduce my retirement allowance.

In consideration for this award of the relief stated above, I release the City of New York and all prior and current elected and appointed officials thereof, and their employees, agents, attorneys, successors, and assigns, from all or any legal claims for lost back pay, fringe benefits and interest thereon based upon alleged disparate impact discrimination on the basis of race and/or national origin with respect to the hiring of black and Hispanic candidates into the position of entry-level firefighter in violation of any federal, state, or local statutes, regulations, or executive orders providing for or giving rise to claims or rights of action relating to equal employment, including Title VII of the Civil Rights Act of 1964, 42 U.S.C. § 2000e, *et seq.*, that were, or could have been, the subject of the above-described lawsuit, of which I am aware, or through the exercise of reasonable diligence could have been aware. The back pay and fringe benefits claims raised in the above-named lawsuit were resolved by entry of the Decree by the Court on March 11, 2015.

The release of claims contained herein is not conditioned on my receipt of any other relief under the Decree.

I understand that **I must properly and completely fill out this “Acceptance of Individual Monetary Relief Award & Release of Claims” form and return it to GCG no later than April 27, 2015**, in order to receive my award.

[For non-City employees] I also understand that **I must complete and return the enclosed federal and New York State tax forms** so that appropriate withholdings for taxes, FICA, and Medicare may be made from the back pay portion of my award.

I HAVE READ AND UNDERSTAND THIS “ACCEPTANCE OF INDIVIDUAL MONETARY RELIEF AWARD & RELEASE OF CLAIMS” FORM. I SIGN THIS FORM OF MY OWN FREE ACT AND DEED.

*** I ACCEPT THE AWARD:** Yes ___ No ___

Date Signed

* Signature

** Indicates required.*

Address you would like payment check(s) sent via first-class U.S. mail (if different from the address listed above):

(Number & Street)

(Apt./Unit)

(City)

(State)

(Zip)

Home Telephone: _____

Work Telephone: _____

Email Address: _____

Return this form to GCG no later than April 27, 2015, by:

- (a) Uploading it to your claimant portal on www.FDNYlitigation.com on or before April 27, 2015,
- (b) Emailing it to questions@FDNYlitigation.com on or before April 27, 2015, or
- (c) Mailing it so that it is postmarked by April 27, 2015, to: United States v. City of New York, FDNY Discrimination Case, P.O. Box 9000 #6541, Merrick, NY 11566-9000

** Indicates required.*