

**UNITED STATES DISTRICT COURT
DISTRICT OF NEVADA**

**BRIAN SMITH, on behalf of himself and those similarly
situated persons,**

Plaintiffs,

v.

**KELLOGG COMPANY and KELLOGG SALES COMPANY,
Defendants.**

**2:17-cv-01914-APG-
GWF**

CONSENT TO SUE

1. I consent to join the above lawsuit and make a claim under the Fair Labor Standards Act, 29 U.S.C. § 201, *et seq.* against my current/former employer, Kellogg Company and Kellogg Sales Company to recover alleged unpaid overtime pay.

2. I hereby designate Getman, Sweeney & Dunn, PLLC (the Firm), 260 Fair Street, Kingston, NY 12401 to represent me for all purposes in this action.

3. I also designate the named Plaintiff in this action as my agent to make decisions on my behalf concerning the litigation, including the method and manner of conducting this litigation, entering into settlement agreements, and all other matters pertaining to this lawsuit.

4. If for any reason the above lawsuit is dismissed and refiled in a different federal jurisdiction with a new Named Plaintiff, I consent to join the refiled lawsuit, and I give permission to the Firm to file this Consent to Sue form in the refiled case. I designate that new named Plaintiff as my agent to make decisions on my behalf concerning the litigation, including the method and manner of conducting this litigation, entering into settlement agreements, and all other matters pertaining to this or a refiled lawsuit.

5. If I am subject to an arbitration agreement, regardless of what happens within the above case, I give permission to the Firm to file an individual arbitration demand on my behalf.

6. By signing and returning this Consent to Sue, I understand that, if accepted for representation, I will be represented by the above attorneys without prepayment of costs or attorneys' fees. I understand that if Plaintiffs are successful, costs expended by attorneys on my behalf will be deducted from my settlement or judgment amount on a pro rata basis with all other plaintiffs. I understand that the attorneys may petition the court for an award of fees and costs to be paid by Defendants on my behalf. I understand that the fees retained by the attorneys will be either the amount received from the Defendant or 1/3 of my gross settlement or judgment amount, whichever is greater.

Date: _____

Signature: _____

Print Name: _____

To be considered for representation, send the completed form to the Firm, 260 Fair Street, Kingston, NY 12401, or send it by fax to (866) 543-9619 or (845) 255-8649, or e-mail it to jfriday@getmansweeney.com. This Consent to Sue is not valid and effective until you have received a receipt from Plaintiffs' Counsel indicating that it has been filed. If you have not received a receipt within 3 weeks from your transmission of the form to us, you must contact us by phone at (845) 255-9370.

Information Below Is Required But Will Not Be Filed with the Court. Please Print Clearly or Type.

Address: _____

City, State Zip: _____

Best Phone Number(s): _____

Emergency Contact: _____

Email: _____

Return this form by mail, email or fax to:

Getman, Sweeney & Dunn, PLLC
Attn.: Julia Friday
260 Fair Street
Kingston, NY 12401
Fax: (845) 255-8749
Email: jfriday@getmansweeney.com

To be considered for representation, send the completed form to the Firm, 260 Fair Street, Kingston, NY 12401, or send it by fax to (866) 543-9619 or (845) 255-8649, or e-mail it to jfriday@getmansweeney.com. This Consent to Sue is not valid and effective until you have received a receipt from Plaintiffs' Counsel indicating that it has been filed. If you have not received a receipt within 3 weeks from your transmission of the form to us, you must contact us by phone at (845) 255-9370.