

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MICHIGAN**

**BRIAN SMITH; and ROSEANN
MIRACOLA, SCOTTY POARCH, and
MARK YOUNG, on behalf of themselves and
those similarly situated persons,**

Plaintiffs,

v.

**KELLOGG COMPANY and KELLOGG
SALES COMPANY,**

Defendants.

1:18-cv-01341-PLM-RSK

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, 260 Fair Street, Kingston, NY 12401 to represent me for all purposes in this action.

3. I also designate Named Plaintiffs Miracola, Poarch, and Young 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. 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 Defendants 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 Getman, Sweeney & Dunn, PLLC, 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

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