#### UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF OHIO EASTERN DIVISION

MADISON GARCIA,	
Plaintiff,	) CASE NO: 1:23-cv-01617
V.	) JUDGE CHARLES ESQUE FLEMING
BLUESKY HEALTHCARE, INC., et al.	)
Defendants.	)

# IMPORTANT NOTICE TO POTENTIAL CLASS MEMBERS

The signed Consent Form must be signed, texted, postmarked, faxed, or emailed by November 20, 2024.

# AUTHORIZED BY JUDGE CHARLES ESQUE FLEMING OF THE U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF OHIO

TO: All current and former non-exempt employees who worked at any Sprenger Facility between August 20, 2020 and the present.

RE: Your right to join a class action seeking to recover unpaid overtime compensation.

#### 1. PURPOSE OF THIS NOTICE

This Notice informs you of a collective action that has been filed under the Fair Labor Standards Act ("FLSA"), advises you of your rights as a class member, and tells you how you can be included in the action. If you wish to be included in this collective action, you must sign and return the enclosed Consent Form as explained below.

### 2. DESCRIPTION OF THE ACTION

On August 20, 2020, this collective action was filed by Representative Plaintiff Madison Garcia against Sprenger Healthcare in the U.S. District Court for the Northern District of Ohio, Case No. 1:23-cv-1617. The action was filed on behalf of Madison Garcia and all other similarly-situated individuals.

Representative Plaintiff alleges that Sprenger Healthcare failed to pay her overtime pay for all of her working hours over 40 per workweek and failed to pay her at the correct rate for overtime hours. Representative Plaintiff alleges that she and all other similarly-situated individuals are entitled to recover from Defendants: (a) unpaid overtime compensation; (b) liquidated damages; and (c) attorneys' fees and costs. Defendants have denied these claims and maintain that they have properly paid their respective employees in accordance with the applicable laws.

The Court has authorized that notice of this be sent to persons fitting the definition above. However, the Court has not decided whether Representative Plaintiff is correct or whether Defendants are correct. The right to any recovery has not been established and is not guaranteed or certain. Your decision to participate in this lawsuit does not guarantee that you will receive any money.

#### 3. YOUR RIGHT TO PARTICIPATE IN THIS ACTION

Representative Plaintiff seeks to sue not only for herself, but also for other persons with whom she is similarly situated. You may join this lawsuit only if you meet the class definition above. You are not required to join this lawsuit.

#### 4. HOW TO PARTICIPATE IN THIS ACTION

To join this collective action, you must sign and return the enclosed Consent Form. You can return the Consent Form by:

- (a) e-signing the form at www.tittlelawfirm.com/sprenger;
- (b) texting or faxing a picture of the completed form to (440) 805-2101 (this number doesn't accept phone calls);
- (c) mailing it to Representative Plaintiff's counsel in the included self-addressed, postage-prepaid envelope; or
- (d) scanning the form and emailing it to Representative Plaintiff's counsel at <a href="mailto:scott@tittlelawfirm.com">scott@tittlelawfirm.com</a>.

#### The signed Consent Form must be signed, texted, postmarked, faxed, or emailed by November 20, 2024.

It is important that you return the Consent Form as soon as possible because the time period for which you can seek payment for your unpaid wages will depend on when this form is filed with the Court.

#### 5. NO RETALIATION PERMITTED

If you join this lawsuit, federal law prohibits Defendants or any of their agents or employees to discriminate or retaliate against you in any manner for taking part in this collective action.

#### 6. EFFECT OF JOINING THIS ACTION

If you join this collective action, you will be bound by any judgment that is rendered, whether favorable or unfavorable, and share in any recovery, if any. You will also be bound by, and share in, any settlement that may be reached on behalf of the class. You give up the right to file a separate action for the claims made in this case.

If you join the lawsuit, you may be required to provide information about your employment with Defendants, answer written questions, search for and produce documents, and/or testify at a pre-trial deposition and/or in Court.

The Representative Plaintiff in this matter has entered into a contingency fee agreement with Representative Plaintiff's counsel, which means that if there is no recovery, there will be no attorneys' fees or costs chargeable to you. If there is a recovery of wages, liquidated damages, and/or attorneys' fees and costs, Representative Plaintiff's counsel will be paid whatever attorneys' fees and costs the Court orders or approves as fair and reasonable.

#### 7. NO LEGAL EFFECT OF NOT JOINING THIS ACTION

If you choose not to join this action, you will not be bound by any judgment or settlement, whether favorable or unfavorable, and you will not share in any recovery. You will be free to file your own lawsuit; however, the pendency of this action will not stop the running of the statute of limitations as to any claims you may have until you file your own lawsuit.

# 8. YOUR LEGAL REPRESENTATION IF YOU JOIN

If you choose to join this lawsuit, your interests will be represented by the following attorneys:

Scott D. Perlmuter 4106 Bridge Ave. Cleveland, OH 44113 216-222-2222 Fax: 888-604-9299

scott@tittlelawfirm.com

#### 9. FURTHER INFORMATION

Further information about this Notice or the action may be obtained by calling Representative Plaintiff's counsel Scott Perlmuter at 216-222-2222. The call is free and confidential.

THE COURT HAS TAKEN NO POSITION REGARDING THE MERITS OF THIS LAWSUIT.

PLEASE DO NOT CONTACT THE COURT REGARDING THIS NOTICE.

# UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF OHIO **EASTERN DIVISION**

MADISON GARCIA,	)
On behalf of herself and all others similarly situated,	) CASE NO: 1:23-cv-01617
situatea,	) JUDGE CHARLES ESQUE FLEMING
Plaintiff,	)
v.	
BLUESKY HEALTHCARE, INC., et al.	
Defendants.	)
	CONSENT FORM
	arty Plaintiff in the above-captioned collective action. I agreed irm. I understand that by filing this consent, I will be bound se.
	Signature
	Printed Name
	Date
SEND COMPLETED FORM BY:	

# S

- a) **e-signing** the form at www.tittlelawfirm.com/sprenger;
- b) texting or faxing a picture of the completed form to (440) 805-2101;
- c) **e-mailing** the completed form to: <u>scott@tittlelawfirm.com</u>
- d) Mailing the completed form to:

Tittle & Perlmuter, 4106 Bridge Ave., Cleveland, OH 44113

Must be postmarked, faxed, or emailed by November 20, 2024.

# **CONFIDENTIAL CLIENT INFORMATION SHEET**

# THIS INFORMATION IS FOR PLAINTIFF'S COUNSEL ONLY AND WILL NOT BE MADE PUBLIC.

Name:	
Address:	
Telephone Numbers:	
E-Mail:	