

**IN THE AMERICAN ARBITRATION ASSOCIATION**

***Blakeman et al. v. Geneva Enterprises, LLC et al.***

**Case No.: 01-22-0000-0610**

**CONSENT TO JOIN COLLECTIVE ACTION**

Pursuant to the Virginia Wage Payment Act, Va. Code § 40.1-29(J)

1. I consent to pursue my claims arising out my employment as a commission-based employee for the Respondents in connection with the above-referenced collective action.

2. I was employed by Respondents as a \_\_\_\_\_. I worked at the dealership \_\_\_\_\_ from approximately \_\_\_\_\_ (month, year) to on or about \_\_\_\_\_ (month, year).

3. I understand that this collective action is brought under the Virginia Wage Payment Act, Va. Code §§ 40.1-29 *et seq.* I hereby consent, agree, and “opt in” to become a claimant herein and to be bound by any award by the Arbitrator or any settlement of this action.

4. I hereby designate ZIPIN, AMSTER, & GREENBERG LLC to represent me for all purposes in this collective action, and any other attorneys they may choose to associate with.

5. I also designate Claimant Paul Blakeman, the collective action representative, as my agent to make decisions on my behalf concerning the action, including the method and manner of conducting this action, entering into settlement agreements, entering into an agreement with Claimant’s Counsel, ZIPIN, AMSTER, & GREENBERG LLC (with the understanding that Claimant’s Counsel is being paid on a contingency fee basis, which means that if there is no recovery, there will be no attorneys’ fees, pursuant to Claimant’s retainer agreement with ZIPIN, AMSTER, & GREENBERG LLC).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**COMPLETE AND RETURN TO:**

**Blakeman, et al. v. Geneva Enterprises, LLC, et al.**

c/o ILYM Group, Inc.

P.O. Box 2031

Tustin, CA 92781

Tel: (888) 250-6810

Fax: (888) 845.6185

claims@ilymgroup.com

**OR by visiting GenevaEnterprises.ilymgroup.com**

**Client Information Sheet**  
*Not to be filed with the Arbitrator*

Name: \_\_\_\_\_

Address (Street, City/Town, State, Zip Code):  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_

Pay Rate: \_\_\_\_\_

If you wish to join this collective action, you must complete this "Consent to Join" form and email it to **rtucci@zagfirm.com** or return it via U.S. Mail in the self-addressed prepaid envelope to the following address:

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c/o ILYM Group, Inc.

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Tustin, CA 92781

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This form must be postmarked no later than **July 10, 2023**. If you fail to return the "Consent to Join" form to Claimant's counsel on or before the above deadline date, you may not be able to participate in this collective action. If you decide to join this collective action, Claimant's counsel will keep you informed of the status of the action.