

Additional 20505

SAMPLE NOTICE

April, «Date», 2021

«First Name» «Last Name»

«Street Address»

«City», Massachusetts «Zip»

**RE: Notice of Data Security Incident**

Dear «First Name» «Last Name»:

Global Advanced Metals USA, Inc. is committed to the protection of the security and confidentiality of the information in its possession (GAM is a subsidiary of Global Advanced Metals International Pty Ltd). Unfortunately, we are sending you this notice because of a recent data security incident that occurred at Global Advanced Metals USA, Inc. ("GAM") that may have involved your personal information. If you are an active or former employee of GAM (or the former Cabot Supermetals business), personal information of dependents that you provided to GAM (or Cabot) during your employment may have also been involved in this incident and, if so, GAM will send separate letters to any such dependents.

Please be assured that upon learning of the incident, GAM took immediate steps to both contain and thoroughly investigate the incident, including notifying federal law enforcement and other agencies, and retaining forensic consultants to assist us with our investigation. **At this time, GAM is not aware of any misuse of your personal information.**

As noted above, there is no indication at this time that your personal information has been misused. Nevertheless, as an added precaution, GAM is offering identity theft protection and credit monitoring services through IDShield at no cost to you. IDShield's services include: 18 months of monitoring of sensitive information such as credit score, Social Security number, bank accounts, credit cards, and social media accounts; \$1,000,000 of identity fraud insurance coverage; and identity recovery and restoration services. With this protection, IDShield is available to help you resolve issues if your identity is compromised.

If you are not already enrolled under GAM's plan with IDShield, please find enclosed an enrollment request form. **Note that the deadline to enroll is ninety (90) calendar days from the date of this letter.** Once enrolled, you should receive a letter sent to your home from IDShield with your member ID number and information on setting up your monitoring account. Please look for this important correspondence. Once you have enrolled, if you do not receive a letter from IDShield or need assistance with activating your account, please contact GAM's Human Resources Department (feel free to place your phone call collect):

Kelly Thater: telephone 610-369-8548 kthater@globaladvancedmetals.com	Sherry Guy: telephone 610-369-8327 sguy@globaladvancedmetals.com
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Under Massachusetts law, you have the right to obtain any police report filed in regard to this incident. If you are the victim of identity theft, you also have the right to file a police report and obtain a copy of it. You may also place a security freeze on your credit reports, free of charge. A security freeze prohibits a credit reporting agency from releasing any information from a consumer's credit report without written authorization. However, please be aware that placing a security freeze on your credit report may delay, interfere with, or prevent the timely approval of any requests you make for new loans, credit mortgages, employment, housing or other services. Under federal law, you cannot be charged to place, lift, or remove a security freeze.

You may place your request for a freeze with each of the three major consumer reporting agencies: Equifax ([www.equifax.com](http://www.equifax.com)); Experian ([www.experian.com](http://www.experian.com)); and TransUnion ([www.transunion.com](http://www.transunion.com)). To place a security freeze on your credit report, you may send a written request by regular, certified or overnight mail at the addresses below. You may also place a security freeze through each of the consumer reporting agencies' websites or over the phone, using the contact information below:

<p>Equifax Security Freeze  P.O. Box 105788  Atlanta, GA 30348  1-800-349-9960  <a href="https://www.equifax.com/personal/credit-report-services/">https://www.equifax.com/personal/credit-report-services/</a></p>	<p>Experian Security Freeze  P.O. Box 9554  Allen, TX 75013  1-888-397-3742  <a href="https://www.experian.com/freeze/center.html">https://www.experian.com/freeze/center.html</a></p>	<p>TransUnion Security Freeze  P.O. Box 160  Woodlyn, PA 19094  1-888-909-8872  <a href="https://www.transunion.com/credit-freeze">https://www.transunion.com/credit-freeze</a></p>
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In order to request a security freeze, you will need to provide some or all of the following information to the credit reporting agency, depending on whether you do so online, by phone, or by mail:

1. Your full name (including middle initial as well as Jr., Sr., II, III, etc.);
2. Social Security Number;
3. Date of birth;
4. If you have moved in the past five (5) years, the addresses where you have lived over the prior five years;
5. Proof of current address, such as a current utility bill, telephone bill, rental agreement, or deed;
6. A legible photocopy of a government issued identification card (state driver's license or ID card, military identification, etc.);
7. Social Security Card, pay stub, or W2;
8. If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint to a law enforcement agency concerning identity theft.

The credit reporting agencies have one (1) to three (3) business days after receiving your request to place a security freeze on your credit report, based upon the method of your request. The credit bureaus must also send written confirmation to you within five (5) business days and provide you with a unique personal identification number (PIN) or password (or both) that can be used by you to authorize the removal or lifting of the security freeze. It is important to maintain this PIN/password in a secure place, as you will need it to lift or remove the security freeze.

To lift the security freeze in order to allow a specific entity or individual access to your credit report, you must make a request to each of the credit reporting agencies by mail, through their website, or by phone (using the contact information above). You must provide proper identification (including name, address, and social security number) and the PIN number or password provided to you when you placed the security freeze, as well as the identities of those entities or individuals you would like to receive your credit report. You may also temporarily lift a security freeze for a specified period of time rather than for a specific entity or individual, using the same contact information above. The credit bureaus have between one (1) hour (for requests made online) and three (3) business days (for request made by mail) after receiving your request to lift the security freeze for those identified entities or for the specified period of time.

To remove the security freeze, you must make a request to each of the credit reporting agencies by mail, through their website, or by phone (using the contact information above). You must provide proper identification (name, address, and social security number) and the PIN number or password provided to you when you placed the security freeze. The credit bureaus have between one (1) hour (for requests made online) and three (3) business days (for requests made by mail) after receiving your request to remove the security freeze.

Additional information regarding identity theft, fraud alerts, credit freezes, and the steps you can take to protect your personal information is available by contacting the consumer reporting bureaus, the Federal Trade Commission, or your state Attorney General. The Federal Trade Commission may be reached at: 600 Pennsylvania Avenue NW, Washington, DC 20580; [www.identitytheft.gov](http://www.identitytheft.gov); 1-877-ID-THEFT (1-877-438-4338); and TTY: 1-866-653-4261.

We deeply regret any concern or inconvenience that this incident may cause you. If you have any further questions or concerns, please contact Sherry Guy or me at the information listed above.

Thank you.

Sincerely,

Kelly Thater  
Global Human Resources Manager

**ATTACHMENT A**

**Request for IDShield Enrollment Form**



**IDSIELD IDENTITY PROTECTION PLAN  
ENROLLMENT REQUEST FORM - MASSACHUSETTS**

This form was enclosed in a separate letter sent by Global Advanced Metals USA, Inc. ("GAM") regarding a recent data security incident ("GAM Notice") that extended an offer to the letter recipient to enroll in an IDShield identity theft protection ("Plan") with 18 months of Plan protection at no cost to the enrollee and subject to the separate terms and conditions of IDShield, a third party service provider engaged by GAM to offer this Plan protection.

**GAM's offer to submit this form for enrollment in the Plan protection expires 90 calendar days of the date of the GAM Notice.** Enclosed with the GAM Notice and this form is a brochure from IDShield with more information about the Plan.

For any former and active GAM employee ("Employee") who received the GAM Notice along with a dependent who also received a GAM Notice in the dependent's name ("Eligible Dependents"), this form can be completed on behalf of the Employee and the Eligible Dependents for family coverage under the Plan ("Family Coverage"). For the avoidance of doubt, GAM's offer to enroll in the Plan only extends to Eligible Dependents and not to any other dependent(s) of the Employee who did not separately receive a GAM Notice.

By completing this form, the undersigned is requesting that GAM submit the information below for the Employee and Eligible Dependents listed below to IDShield for further enrollment processing in the Plan. The Employee understands that the requested enrollment in the Plan is not completed until confirmed by IDShield in a separate communication. The Employee agrees that, once enrolled in the Plan, IDShield will be the exclusive provider of services under the Plan and not GAM.

**1. Indicate who you are requesting GAM enroll in the Plan - please select one of the two options below:**

Choose "Self Coverage" only if you received the GAM Notice and offer to enroll in the Plan and do not have Eligible Dependents to request enrollment for Family Coverage.

**Self Coverage** - please complete question 2 only below (and skip question 3)

Choose "Family Coverage" only if you and one or more of your Eligible dependents also received a GAM Notice and wish to request enrollment together for Family Coverage.

**Family Coverage** - please complete questions 2 and 3 below.

**2. Personal Information – Employees only:**

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

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

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

Phone Number: \_\_\_\_\_

**3. Eligible Dependent information for Family Coverage:** If you checked Family Coverage in question 1 above, list the following information for Eligible Dependents that you are requesting to enroll under the Plan along with yourself (attach paperwork for Eligible Dependent information if additional space is required):

Name: \_\_\_\_\_  
 Last First Date of Birth

Name: \_\_\_\_\_  
 Last First Date of Birth

Name: \_\_\_\_\_  
 Last First Date of Birth

Name: \_\_\_\_\_  
 Last First Date of Birth

**EMPLOYEE/PLAN APPLICANT: BY MY SIGNATURE BELOW, I HEREBY AGREE TO THE FOREGOING AND REQUEST THAT GAM SUBMIT THIS FORM TO IDSHIELD FOR FURTHER ENROLLMENT PROCESSING UNDER THE PLAN FOR THE INDIVIDUALS LISTED ABOVE AND ACKNOWLEDGE THE TERMS AND CONDITIONS STATED ABOVE.**

PRINTED NAME:

DATE:

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE:

\_\_\_\_\_

**PLEASE SUBMIT A SIGNED AND COMPLETED COPY OF THIS FORM TO GAM'S HUMAN RESOURCES DEPARTMENT AS FOLLOWS:**

1. VIA EMAIL:

Kelly Thater: <a href="mailto:kthater@globaladvancedmetals.com">kthater@globaladvancedmetals.com</a>	Sherry Guy: <a href="mailto:sguy@globaladvancedmetals.com">sguy@globaladvancedmetals.com</a>
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OR

2. VIA MAIL:

Global Advanced Metals USA, Inc.  
 1223 County Line Road  
 Boyertown, PA 19512-1608  
 Attn: Human Resources

**SAMPLE NOTICE**

April, «Date», 2021

«First\_Name» «Last\_Name»  
c/o Parent or Guardian  
«Street\_Address»  
«City», Massachusetts «Zip»

**RE: Notice of Data Security Incident**

Dear «First\_Name» «Last\_Name»:

We are sending you this notice because of a recent data security incident that occurred at Global Advanced Metals USA, Inc., a subsidiary of Global Advanced Metals International Pty Ltd (“GAM”). As a named dependent of a current or former employee of GAM (or the former Cabot Supermetals business), this data security incident may have involved your personal information. For minor aged recipients, this notice is intended to be reviewed in consultation with a parent or guardian, including any contractual offers or legal matters that require parental or guardian consent.

GAM is committed to the protection of the security and confidentiality of the information in its possession. Please be assured that upon learning of the incident, GAM took immediate steps to both contain and thoroughly investigate the incident, including notifying federal law enforcement and other agencies, and retaining forensic consultants to assist us with our investigation. **At this time, GAM is not aware of any misuse of your personal information.**

As noted above, there is no indication at this time that your personal information has been misused. Nevertheless, as an added precaution, GAM is offering identity theft protection and credit monitoring services through IDShield at no cost to you (and as a family coverage option to each parent or guardian who receives a separate notice regarding this incident). IDShield’s services include: 18 months of monitoring of sensitive information such as credit score, Social Security number, bank accounts, credit cards, and social media accounts; \$1,000,000 of identity fraud insurance coverage; and identity recovery and restoration services. With this protection, IDShield is available to help you resolve issues if your identity is compromised.

If you are not already enrolled under a Family Coverage plan with IDShield by a parent or guardian, please find enclosed an enrollment request form to review, as applicable, with a parent or guardian. **Note that the deadline to enroll is ninety (90) calendar days from the date of this letter.** Once enrolled, you should receive a letter sent to your home from IDShield with your member ID number and information on setting up your monitoring account. Please look for this important correspondence. Once enrolled, please contact GAM’s Human Resources Department if you do not receive a letter from IDShield for assistance with account activation (phone calls may be placed as collect):

Kelly Thater: telephone 610-369-8548 kthater@globaladvancedmetals.com	Sherry Guy: telephone 610-369-8327 sguy@globaladvancedmetals.com
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interfere with, or prevent the timely approval of any requests you make for new loans, credit mortgages, employment, housing or other services. Under federal law, you cannot be charged to place, lift, or remove a security freeze.

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In order to request a security freeze, you will need to provide some or all of the following information to the credit reporting agency, depending on whether you do so online, by phone, or by mail:

1. Your full name (including middle initial as well as Jr., Sr., II, III, etc.);
2. Social Security Number;
3. Date of birth;
4. If you have moved in the past five (5) years, the addresses where you have lived over the prior five years;
5. Proof of current address, such as a current utility bill, telephone bill, rental agreement, or deed;
6. A legible photocopy of a government issued identification card (as applicable, state driver's license or ID card, military identification, or other suitable means appropriate for your age);
7. Social Security Card, pay stub, or W2;
8. If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint to a law enforcement agency concerning identity theft.

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Thank you.

Sincerely,

Kelly Thater  
Global Human Resources Manager

**ATTACHMENT A**

**Request for IDShield Enrollment Form**

**FOR MINOR AGED RECIPIENTS, THIS FORM IS TO BE  
REVIEWED WITH A PARENT OR GUARDIAN**



**IDSIELD IDENTITY PROTECTION PLAN  
ENROLLMENT REQUEST FORM - MASSACHUSETTS**

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For any former and active GAM employee ("Employee") who received the GAM Notice along with a dependent who also received a GAM Notice in the dependent's name ("Eligible Dependents"), this form can be completed on behalf of the Employee and the Eligible Dependents for family coverage under the Plan ("Family Coverage"). For the avoidance of doubt, GAM's offer to enroll in the Plan only extends to Eligible Dependents and not to any other dependent(s) of the Employee who did not separately receive a GAM Notice.

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**2. Personal Information – Employees only:**

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

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

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

Phone Number: \_\_\_\_\_

**3. Eligible Dependent information for Family Coverage:** If you checked Family Coverage in question 1 above, list the following information for Eligible Dependents that you are requesting to enroll under the Plan along with yourself (attach paperwork for Eligible Dependent information if additional space is required):

Name: \_\_\_\_\_  
Last First Date of Birth

Name: \_\_\_\_\_  
Last First Date of Birth

Name: \_\_\_\_\_  
Last First Date of Birth

Name: \_\_\_\_\_  
Last First Date of Birth

**EMPLOYEE/PLAN APPLICANT: BY MY SIGNATURE BELOW, I HEREBY AGREE TO THE FOREGOING AND REQUEST THAT GAM SUBMIT THIS FORM TO IDSHIELD FOR FURTHER ENROLLMENT PROCESSING UNDER THE PLAN FOR THE INDIVIDUALS LISTED ABOVE AND ACKNOWLEDGE THE TERMS AND CONDITIONS STATED ABOVE.**

PRINTED NAME:

DATE:

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE:

\_\_\_\_\_

**PLEASE SUBMIT A SIGNED AND COMPLETED COPY OF THIS FORM TO GAM'S HUMAN RESOURCES DEPARTMENT AS FOLLOWS:**

1. VIA EMAIL:

Kelly Thater: <a href="mailto:kthater@globaladvancedmetals.com">kthater@globaladvancedmetals.com</a>	Sherry Guy: <a href="mailto:sguy@globaladvancedmetals.com">sguy@globaladvancedmetals.com</a>
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OR

2. VIA MAIL:

Global Advanced Metals USA, Inc.  
1223 County Line Road  
Boyertown, PA 19512-1608  
Attn: Human Resources