



4 3 3 0 6 0 0 0 0 0 0 0

In Re: Packaged Seafood Products Antitrust Litigation Claim Form

Important: The Deadline to File A Claim is August 30, 2024.

_____ / _____ / _____
First Name MI Last Name

Street Address

_____/_____/_____
City State Zip Code

Email Address: _____@_____

Class Member ID: 4 3 3 0 6 _____

Instructions: To receive payment, you must file a claim. If you file a validated claim and it is approved, you will receive a *pro rata* share of the net settlement fund based on your validated purchases of Foodservice-Size Packaged Tuna Products (40-ounces or larger) from DOT Foods, Sysco, US Foods, Sam's Club, Wal-Mart, or Costco.

Claimed purchase amounts: \$ _____

I am submitting, along with this claim form, business records to validate the claim amount above. Such records may include purchase orders, receipts, business records, or the like.

_____/_____/_____
Your Signature Date (mm/dd/yyyy)

_____/_____
Print Name Title



43360



CF



Page 1 of 1