

NaturMed/IVL Settlement Administrator
c/o Postlethwaite & Netterville
P.O. Box 3958
Baton Rouge, LA 70821

**Your Claim Form Must Be
Postmarked On or Before
May 20, 2022.**

Copley v. Bactolac Pharmaceutical, Inc. et al.

United States District Court for the Eastern District of New York | Case No. 2:18-cv-00575-FB-PK

Claim Form

To submit a Claim for a Settlement Credit or Alternative Payment from the Settlement Fund, please fill out the Claim Form below and send it by U.S. mail. You may also submit a Claim Form online at www.NaturMedIVLSettlement.com. The deadline to file a Claim online is **May 20, 2022**. If you send in a Claim Form by regular mail, it must be **postmarked on or before May 20, 2022**.

Settlement Claim ID: -

If you do not have a Settlement Claim ID (found on the mailed postcard notice), you are required to provide documentation to support the claim. Please indicate by highlighting, circling, or underlining the part(s) of your documentation that are relevant to the claim.

***Step 1**

***First Name**

***Last Name**

***Street Address**

***City**

***State**

***Zip Code**

***Step 2**

For my Settlement Benefit, I choose:

(select one below - if no selection is made, a Settlement Credit will be issued by default)

- Settlement Credit: \$10 toward future IVL2 product purchase (valid 3 years)
 Alternative Payment: Expected \$5, adjusted based on number of claimants

***Step 3**

For my preferred credit/payment method, I choose:

(select one option below)

- Mailed Settlement Credit/Alternative Payment
 Digital Settlement Credit/Alternative Payment

Step 3: Email Address (Required if you have selected digital payment or digital delivery of credit)

Step 4: Are you submitting documentation with your claim? (Note: Documentation is not required with a Settlement Claim ID)

- Yes No

Step 5: Please provide an explanation of the provided documentation.

***I affirm that to the best of my knowledge that I am a Settlement Class Member and purchased one or more canisters of ADEG that were manufactured as part of the Recalled Lots in 2014 and 2015 and I affirm that I have not previously received a full refund for my purchase.**

***Signature:** _____

***Date (MM/DD/YY):**

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