

RESPONSE FORM

IN ORDER TO OPT OUT OF THIS LAWSUIT OR TO BE ENTITLED TO RECEIVE YOUR SHARE OF THE AWARD GIVEN TO PLAINTIFFS YOU MUST COMPLETE AND MAIL THIS DOCUMENT BY FIRST CLASS MAIL WITH A POSTMARK DATED NO LATER THAN [30 DAYS AFTER MAILING], 2008, TO:

**LESTER J. LEVY, ESQ.
JAMS
2 EMBARCADERO CENTER
SUITE 1500
SAN FRANCISCO, CALIFORNIA 94111
TEL.: (415) 774-2656**

A. CLAIMANT IDENTIFICATION

Sample A Sample

123 Main Street
Anytown US 12345-6789

Residence Telephone () _____ - _____
Number:

Social Security Number: _____ - _____ - _____

B. ALLOCATION OF THE AWARD

The entire Judgment plus interest will be allocated among the approximately 200 class members. The exact amount you will receive if you participate will be determined at a later date by the Special Master appointed by the Court.

In the event you elect to participate, you will not receive any monies until all appeals have been heard in this case and Judgment is final.

C. NO RETALIATION

CDN, its employees, agents and attorneys may not retaliate against any class member based on that individual's decision to participate in this lawsuit, or to submit this form.

If you have any questions about this form, **do not attempt** to communicate with CDN, its employees, agents or attorneys as they have been prohibited from communicating with you regarding this litigation. You may contact either Class Counsel or the Special Master at the numbers listed in the accompanying Notice.

D. RESPONSE

CHECK ONLY ONE OF THE FOLLOWING OPTIONS:

1. _____ **I wish to participate in this lawsuit and to receive my share of the award;**

or

2. _____ **I do not want to participate in this lawsuit or to recover any part of the award. I understand that my share of the award will not directly revert to CDN.**

Signature of
Claimant

Name:

(Print)

Last

First

Middle