



**SKR**

*Kumar v. Safeway, Inc.*  
Class Action Settlement

**Must Be Received by  
February 16, 2018**

**Claim Form**

**CLAIMANT INFORMATION**

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	M.I.	Last Name
<input type="text"/>		
Primary Address		
<input type="text"/>		
Primary Address Continued		
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Foreign Province	Foreign Postal Code	Foreign Country Name/Abbreviation

To make a claim under the Settlement, you must complete this form and mail it to the address at the bottom of this form. (Alternatively, you can complete and submit the online claim form at [www.SafewayOliveOilSettlement.com](http://www.SafewayOliveOilSettlement.com).) Your claim form must be received by February 16, 2018.

All information will be kept private. It will not be disclosed to anyone other than the Court, the Claim Administrator, and the parties in this case, and will be used only for purposes of administering this Settlement.

This Settlement involves the following olive oil **Products** sold at Safeway retail stores in the United States:

- Safeway Select Pure Olive Oil: January 1, 2012 to July 31, 2015
- Safeway Select Extra Light in Flavor Olive Oil: January 1, 2012 to July 31, 2015
- Safeway Select Extra Virgin Olive Oil: May 23, 2010 to December 16, 2016

For **each** Product bottle you purchased, you will receive:

- A Safeway Voucher with a face value of \$1.50.\* Vouchers can be combined and can be used at any Safeway or Von's store to purchase most items.
- A cash payment of \$0.50\*.

\*The Voucher and cash payment amounts will be \$0.75 and \$0.25, respectively, for Safeway Select Extra Virgin Olive Oil purchases between August 1, 2015 and December 16, 2016. The amounts may be subject to other reductions if various settlement limits are reached. You will be sent Voucher(s) unless you choose the cash option below. See the Settlement Notice for details.

If you want to make a claim for **more than five Product purchases**, you must submit **at least one** of the following:

1. Your **Safeway Club Card number or telephone number** that links to your Safeway Club Card account.
2. One or more itemized **Safeway store receipts** showing date and place of purchase, name and quantity of Products purchased, and amount paid.

You can make a claim even if you do not submit Club Card information or store receipts. However, such claims will be limited to five Product purchases, with a maximum payment of \$7.50 in Vouchers or \$2.50 in cash.

You will receive the Vouchers / cash payments only if the Court approves the Settlement. Please save a copy of this completed form and your store receipts for your records. **For further information, visit [www.SafewayOliveOilSettlement.com](http://www.SafewayOliveOilSettlement.com).**



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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Please send me (select one):

Vouchers to use at Safeway or Von's stores  Cash payment (by check)

I or a member of my family is the owner or authorized user of the following Safeway Club Card(s): (Enter 10-digit telephone numbers linked to Club Cards (if known))

—    —

—    —

—    —

—    —

(attach additional sheets if necessary)

(Enter Club Card numbers shown on cards (if known)):

(attach additional sheets if necessary)

Address(es) associated with my Safeway Club Card(s) (if known and if different from address above):

Primary Address

Primary Address Continued

City

State

Zip Code

(attach additional sheets if necessary)



(The information on this page 3 is required only for purchases not linked to my Club Cards and not shown in my attached store receipts:) If you are only making claims for the products shown in your Club Card records or in the store receipts you are attaching, leave this page blank.

I purchased the following Safeway Select Olive Oil Products at a Safeway retail store in the United States between May 23, 2010 and December 16, 2016. (See above for definitions of Products):

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Date	Quantity	Amount Paid
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
Product Name		
<input type="text"/>		
Store Location City		State
<input type="text"/>		<input type="text"/>

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Date	Quantity	Amount Paid
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
Product Name		
<input type="text"/>		
Store Location City		State
<input type="text"/>		<input type="text"/>

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Date	Quantity	Amount Paid
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
Product Name		
<input type="text"/>		
Store Location City		State
<input type="text"/>		<input type="text"/>

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Date	Quantity	Amount Paid
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
Product Name		
<input type="text"/>		
Store Location City		State
<input type="text"/>		<input type="text"/>

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Date	Quantity	Amount Paid
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
Product Name		
<input type="text"/>		
Store Location City		State
<input type="text"/>		<input type="text"/>

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I certify under penalty of perjury that all purchases I made at a Safeway or Von's store listed above were not for the purpose of resale and that all of the foregoing is true and correct.

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

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Email Address

[\*Email is the only way to receive written notice if your claim is denied, with the reasons for the denial.]

**Mail your completed form, WITH YOUR STORE RECEIPTS, IF ANY, to: Safeway Olive Oil Settlement Claim Administrator, P.O. Box 404041, Louisville, KY 40233-4041.**

**Claim Forms must be RECEIVED BY THE CLAIM ADMINISTRATOR (not just postmarked) by February 16, 2018. Final approval will be posted on the settlement website.**

