



**SKR**

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

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

**Kumar v. Safeway, Inc. Class Action Settlement  
Opt Out Form**

**CLAIMANT INFORMATION**

|                           |                          |                                   |
|---------------------------|--------------------------|-----------------------------------|
| <input type="text"/>      | <input type="checkbox"/> | <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 exclude yourself, you must mail this form to the *Safeway Settlement Claim Administrator* at P.O. Box 404041, Louisville, KY 40233-4041 by no later than **February 16, 2018**.

**Acknowledgment**

I wish to be excluded from the Safeway Olive Oil Class Action Settlement.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

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

|                      |
|----------------------|
| <input type="text"/> |
|----------------------|

Email Address



|                                  |                         |                         |                                                                                    |                                                                                 |
|----------------------------------|-------------------------|-------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| FOR CLAIMS<br>PROCESSING<br>ONLY | OB <input type="text"/> | CB <input type="text"/> | <input type="radio"/> DOC<br><input type="radio"/> LC<br><input type="radio"/> REV | <input type="radio"/> RED<br><input type="radio"/> A<br><input type="radio"/> B |
|----------------------------------|-------------------------|-------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|