# **Bought Milk?**



### **Fresh Milk Products Antitrust Litigation**

## UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

Case No. 11-CV-04766-JSW [consolidated with 11-CV-04791-JSW and 11-CV-05253-JSW]

## **CLAIM FORM**

Must be Submitted Online or Postmarked No Later Than January 31, 2017.

#### **GENERAL INSTRUCTIONS**

To receive a settlement payment, **you must accurately complete this Claim Form and submit it by January 31, 2017**. Claim Forms may be submitted online at www.BoughtMilk.com or mailed to the Claims Administrator at Fresh Milk Products Antitrust Litigation, PO Box 43430, Providence RI 02940-3430. Go to www.BoughtMilk.com vto learn more about the settlement, your rights and how claims will be calculated and paid.

This Claim Form should be submitted only if you purchased milk or other fresh milk products (including cream, half & half, yogurt, cottage cheese, cream cheese, or sour cream) while a resident of Arizona, California, the District of Columbia, Kansas, Massachusetts, Michigan, Missouri, Nebraska, Nevada, New Hampshire, Oregon, South Dakota, Tennessee, Vermont, West Virginia, or Wisconsin during the period of 2003 to the present for your own use and not for resale.

You do not need to submit proof of your purchase(s) with your Claim Form.

**FIRST NAME** 

#### **CLAIMANT & PURCHASE INFORMATION**

Please type or neatly print all information.

MI

LAST NAME

EMA	EMAIL ADDRESS																				
RESIDENCY (fill the circle if true):  I was a resident of at least one of these states during at least part of 2003 to the present: Arizona, California, the District of Columbia, Kansas, Massachusetts, Michigan, Missouri, Nebraska, Nevada, New Hampshire, Oregon, South Dakota, Tennessee, Vermont, West Virginia, or Wisconsin.																					
PRODUCTS (fill the circle if true):																					
O I purchased milk or fresh milk products, including cream, half & half, yogurt, cottage cheese, cream cheese, or sour cream.																					
<b>VOLUME</b> (fill the <u>one</u> circle that best describes your purchases):																					
I am an individual who purchased for consumption by myself and/or my household; or																					
I am a school/after-school program/etc. that purchased for consumption by for my students/participants/etc., who were not charged for the milk products. Entities charging their participants for milk, for meals including milk, or for general programing with meals and/or drinks including milk are not eligible to recover. Governmental entities are not eligible to recover																					
SIGN & DATE CLAIM FORM  By signing below, I declare under penalty of perjury that the below information is true and correct to the best of my knowledge.																					
Signature												_	Date								

FOR CLAIMS

ONLY

)LC

REV