



REQUEST FOR EXCLUSION FORM

LOPEZ v. LOWE'S HIW SETTLEMENT

**SUBMIT THIS FORM IF YOU WISH TO BE EXCLUDED
FROM PARTICIPATING IN THE CLASS ACTION SETTLEMENT**

THIS DOCUMENT MUST BE POSTMARKED NO LATER THAN AUGUST 3, 2009.

I have received and read the Notice of Class Action Settlement in this lawsuit. I wish to be excluded from Plaintiff Class, and do not wish to participate in the proposed settlement. By signing and returning this form, I hereby exclude myself from participating in the settlement of the class action entitled *Willie Lopez, et al. v. Lowe's HIW, Inc., et al.*, Los Angeles Superior Court Case Number BC 260702. I understand this means that I will not be bound by the settlement and also will not share in the settlement proceeds. I represent that the information set forth below is accurate.

Please print (or type) clearly in blue or black ink

Last Name

First Name

Address

City

State

Zip Code

Telephone No.:

Social Security No.:

Signature:

Date:

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MM DD

Please mail via first-class mail this Request for Exclusion Form to:

**Lopez v. Lowe's HIW Settlement
P.O. Box 4098
Portland, OR 97208-9620**

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Questions? Please call 1-888-266-9440