

Rikos v. The Procter & Gamble Company
Settlement Administrator
c/o KCC LLC
P.O. Box 404041
Louisville, KY 40233-4041



PGK

*RIKOS V. THE PROCTER
& GAMBLE COMPANY*
UNITED STATES DISTRICT COURT,
SOUTHERN DISTRICT OF OHIO
Case No.: 1:11-cv-00226

**Must Be Postmarked
No Later Than
May 16, 2018**

Settlement 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

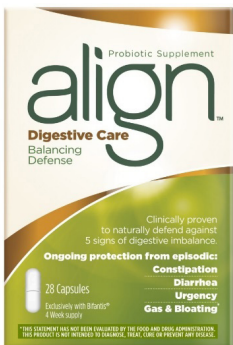
**Have you purchased and used Align® probiotic supplements, but received no digestive relief or other digestive benefit?
If so, you may be entitled to a refund as part of a class action settlement.**

To be eligible to receive a cash refund from the class action settlement, you **must** complete and return this Claim Form postmarked no later than May 16, 2018. You may also submit your Claim Form online, no later than May 16, 2018, at www.AlignSettlement.com.

1. Complete the Information Below.

Number of packages of Align® purchased from March 1, 2009 through October 31, 2009 (may claim up to two packages)

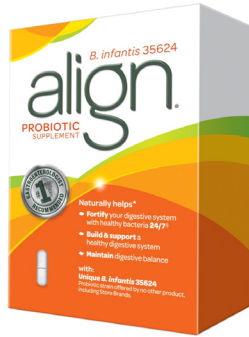
[Below is an example of packaging available from March 1, 2009 through October 31, 2009]



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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Number of packages of Align® purchased from November 1, 2009 through June 6, 2016 (may claim one package)

[Below are examples of packaging available from November 1, 2009 through June 6, 2016]



2. Sign the Claim Form. I declare under penalty of perjury that the information I have provided is true and correct.

Signature: _____

Dated: _____

Please submit the Claim Form online at www.AlignSettlement.com or return the Claim Form by mail to:

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