

IMPORTANT LEGAL MATERIALS

CLAIM FORM

GENERAL INSTRUCTIONS

You can submit a Claim for a payment under this Settlement if you purchased any Seagram's Ginger Ale Product (including Seagram's Ginger Ale, Diet Ginger Ale, Raspberry Ginger Ale, and Diet Raspberry Ginger Ale) in the United States **between April 1, 2013, and June 13, 2019.**

To obtain payment from the Settlement you must complete and return this Claim Form. Completed Claim Forms must be mailed to the Settlement Administrator at Ginger Ale Settlement c/o RG/2 Claims Administration LLC, P.O. Box 59479, Philadelphia, PA 19102-9479 or can be submitted via the **Settlement Website, www.gingeralesettlement.com.** Claim Forms must be **DELIVERED TO, AND RECEIVED BY, THE SETTLEMENT ADMINISTRATOR** or **SUBMITTED ONLINE NO LATER THAN SEPTEMBER 5, 2019.**

Before you complete and submit this Claim Form by mail or online, you should read and be familiar with the Settlement Notice ("the Notice") available at www.gingeralesettlement.com. Defined terms (with initial capitals) used in these General Instructions have the same meaning as set forth in the Settlement Agreement. By submitting this Claim Form, you acknowledge that you have read and understand the Notice for the Settlement at issue, and you agree to the Release(s) included as a material term of the Settlement Agreement.

If you fail to timely submit a Claim Form, you may be precluded from any recovery from the Settlement. If you are a member of the Settlement Class and you do not timely and validly seek to Opt-Out from the Class, you will be bound by any judgment entered by the Court approving the Settlement regardless of whether you submit a Claim Form. To receive the most current information and regular updates, please submit your Claim Form on the Settlement Website at www.gingeralesettlement.com.

The information you provide will not be disclosed to anyone other than the Court, the Settlement Administrator, and the Parties in this case, and will be used only for purposes of administering this Settlement (such as to audit and review a claim for completeness, truth, and accuracy).

Claimant Information

Claimant Name: _____
First Name MI Last Name

Street Address: _____

Street Address2: _____

City: _____ State: _____ Zip Code: _____

[optional] Daytime Phone Number: (_____) _____ - _____

[optional] Evening Phone Number: (_____) _____ - _____

[optional] E-mail Address: _____

Benefit Information

All claimants may receive a Benefit of up to \$0.80 per Unit purchased, with a minimum payment of 5 Units (up to \$4.00), for personal use between April 1, 2013 and June 13, 2019. The Benefit value may be less than \$0.80 per Unit, depending on the number of Valid Claims and on the cost of other expenses paid out of the settlement fund, such as attorneys' fees, but it will not be greater than \$0.80 per Unit. The parties predict that each claim will be paid at least \$0.40 per Unit, and more if there are fewer claims than expected.

If you **do not** provide Proof of Purchase, you can claim the Benefit for up to **13** Units (for a maximum payment of \$10.40) per Household. If you claim the Benefit for 1-5 Units, you will receive the Benefit for 5 Units (up to \$4.00).

If you **do** provide Proof of Purchase, you can claim the Benefit for up to **100** Units (for a maximum payment of \$80.00) per Household, provided you present Proof of Purchase for at least 87 of those Units.

“Proof of Purchase” means a receipt or other documentation from a third-party commercial source (such as a store) that reasonably establishes the fact and date of purchase of the Product between April 1, 2013 and June 13, 2019 in the United States.

“Unit” means any Product unit purchased individually at retail. For example, a 2-liter bottle, 20-ounce bottle, 1-liter bottle, 12-pack of 12-ounce cans, or 10-pack of 7.5-ounce cans would each be a single Unit. A single 12-ounce or 7.5-ounce can is not a Unit because it is not individually purchased at retail.

Purchase Information

1. Did you purchase Seagram's Ginger Ale Products in the United States between April 1, 2013, and June 13, 2019?

Yes

No

2. How many Unit(s) did you purchase? _____

(If you are claiming more than 13 Units, you must provide Proof of Purchase.)

To provide Proof of Purchase, attach it to this form and sign where marked on the last page of the form.

If you **are not** providing Proof of Purchase, you must answer question 3 and sign where marked on the last page of the form.

3. Please provide the following information for the Seagram's Product(s) you purchased. (Complete this section if you are not including proof of purchase).

Seagram's Product	Approximate Month & Year of Purchase	Place of Purchase (optional)	Number of Units Purchased
Regular Ginger Ale			
Diet Ginger Ale			
Raspberry Ginger Ale			
Diet Raspberry Ginger Ale			
	TOTAL		

4. I wish to receive my payment by:

Check made out to me as an individual at the address above.

Direct deposit to Bank Name: _____ ABA Routing No. _____
Account No. _____

Direct deposit to PayPal Account: PayPal email address: _____

Certification under Penalty of Perjury

I hereby certify under penalty of perjury that:

- The information provided in this Claim Form is accurate and complete to the best of my knowledge, information, and belief;
- The additional documentation information provided to the Settlement Administrator to support my Claim is original or else a complete and true copy of the original(s);
- I am not (a) a Person who purchased or acquired the Product for resale; (b) an employee, principal, legal representative, successor, or and assign of Defendants or their affiliated entities; (c) a government entity; nor (d) a judge to whom this Action is assigned, or any member of the judge's immediate family;
- I have not submitted any other Claim for the same purchases and have not authorized any other Person or entity to do so, and know of no other Person or entity having done so on my behalf;
- I understand that by not opting out of the Settlement, I have given a complete Release of all Released Claims; and
- I understand that Claims will be audited for veracity, accuracy, and fraud. Claims Forms that are not valid and/or illegible can be rejected.

Signature: _____ Dated: ____ / ____ / _____