

# EXHIBIT

M

S F D C T  
SETTLEMENT FACILITY  
DOW CORNING TRUST

P.O. Box 52429  
Houston, Texas 77052

Telephone: 713.874.6099  
888.874.6099

[Date]



SID: [SID Number]

[CLAIMANT / LEGAL REPRESENTATIVE]  
[STREET ADD 1  
STREET ADD 2  
CITY, STATE, ZIP  
REGION  
COUNTRY]

\_\_\_\_\_ Re: [Claimant Name]  
\_\_\_\_\_ Implant Manufacturer - Class 7 Silicone Material Claim  
\_\_\_\_\_

\_\_\_\_\_ We have reviewed your claim form for Class 7 silicone materials. The Settlement requires that you have  
\_\_\_\_\_ acceptable proof of a silicone gel breast implant implanted between January 1, 1976 and January 1, 1992  
\_\_\_\_\_ from one of the following manufactures:  
\_\_\_\_\_

- \_\_\_\_\_ Bioplasty
- \_\_\_\_\_ Baxter
- \_\_\_\_\_ Bristol
- \_\_\_\_\_ Cox-Uphoff
- \_\_\_\_\_ Mentor
- \_\_\_\_\_ Koken
- \_\_\_\_\_ Medasil
- \_\_\_\_\_ Silimed
- \_\_\_\_\_ Societe Prometel

Because the implant(s) you received was not manufactured by one of these manufactures, you are not eligible to participate in the Settlement Program. If you feel this information is incorrect, you must submit supporting documentation that you received one of these implants and the Settlement Facility will re-evaluate your claim.

Please submit information to:

The Settlement Facility-Dow Corning Trust  
P.O. Box 52429  
Houston, Texas 77052

Sincerely,

Claims Operations  
Settlement Facility - Dow Corning Trust

Enclosure: Error Correction and Appeal Process

cc [cc\_name]

PM-2303

11/9/05

For assistance or questions call the Claims Assistance Program at 1.888.874.6099 (toll free), through electronic mail at [info@sfdct.com](mailto:info@sfdct.com), or go to [www.dowsettlement.com](http://www.dowsettlement.com) on the internet.