

# EXHIBIT

# B

**S F D C T**  
 SETTLEMENT FACILITY  
 DOW CORNING TRUST

P.O. Box 62420  
 Houston, Texas 77062

Telephone 713.874.6099  
 866.874.6099

[Date]



SID: [SID Number]

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

**Disease Claim Review: Notification of Status Letter - Class 7**

Name: [Claimant Name]

Dear Claimant or Claimant Representative:

We have reviewed your Class 7 claim and it has been approved at Option 1 Atypical Connective Tissue Disease (ACTD), Level ( ). We are unable to pay your claim at this time, because the Dow Corning Plan does not allow payment of Class 7 claims until all Class 7 claims have been evaluated. After all Class 7 claims have been processed, the SF-DCT will determine the final value of your claim.

Because your claim is complete, we cannot accept any additional disease records that would qualify you for a higher level of disability.

Class 7 disease claims will be paid an amount that will not exceed 40% of the Class 5 base payments. The chart below describes the maximum Class 7 disease payments:

	Level A	Level B	Level C
Option 1	\$20,000	\$8,000	\$4,000
Option 2			
GCTS	\$44,000	\$30,000	n/a
SS & SLE	\$100,000	\$80,000	\$60,000
PWDM	\$44,000	N/A	N/A

These awards are also subject to reductions based on the amount you received from the Revised Settlement Program (RSP), Foreign Settlement Program (FSP), or directly from Bristol, Baxter, or 3M. You received \$ (amount) from the RSP and your Class 7 payment is (amount), you will receive (**bold amount**).

If you have questions about this letter, please consult with your attorney or if you are not represented, please call the Claims Assistance Department at 1-866-874-6099.

Sincerely,  
 Settlement Facility – Dow Corning Trust

For assistance or questions call the Claims Assistance Program at 1-866-874-6099 or go to [www.dcssettlement.com](http://www.dcssettlement.com) on the internet.